

# 미세플라스틱과 호흡기질환

가톨릭대학교 최준영



# Microplastic is ubiquitous

- A wide variety and large quantity of plastic is being consumed on a large scale by human beings.
- Plastic has desirable characteristics : durability, resistance, low cost.
- Air, soil and water + plastic  
→ smaller particles called micro and nanoplastics (NMPs).
- Plastic particles can be found in soil, water, and air.





## Synthetic Polymer Contamination in Bottled Water

Sherri A. Mason\*, Victoria G. Welch and Joseph Neratko

Department of Chemistry, State University of New York at Fredonia, Fredonia, NY, United States

259 bottles were analyzed

## Study Finds Microplastics In 93% Of Bottled Water

Lowest & highest number of plastic particles found per liter of bottled water (location & brand)



- 사출성형
- 가수분해



n=259 bottles from 11 brands across nine countries.  
Plastic discovered included polypropylene, nylon, and polyethylene terephthalate.


Source: Orb Media

Forbes **statista**



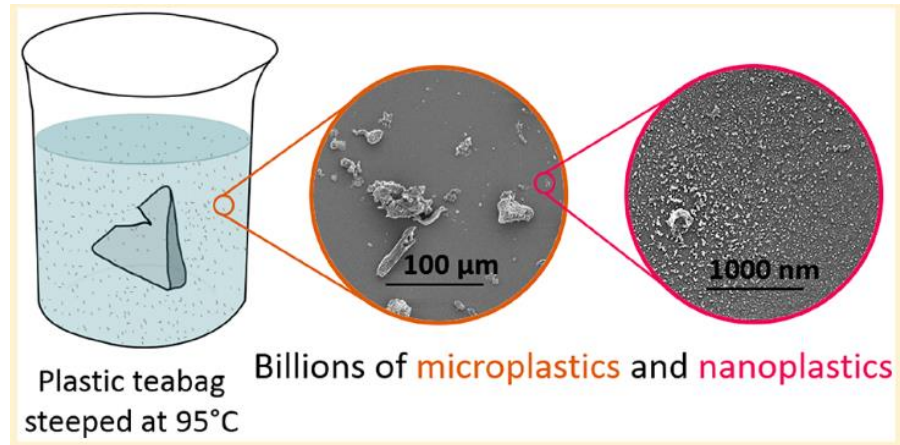


## Plastic Teabags Release Billions of Microparticles and Nanoparticles into Tea

Laura M. Hernandez,<sup>†</sup> Elvis Genbo Xu,<sup>†</sup> Hans C. E. Larsson,<sup>‡</sup> Rui Tahara,<sup>‡</sup> Vimal B. Maisuria,<sup>†</sup> and Nathalie Tufenkji<sup>\*,†</sup> 

<sup>†</sup>Department of Chemical Engineering, McGill University, Montreal, Quebec H3A 0C5, Canada

<sup>‡</sup>Redpath Museum, McGill University, Montreal, Quebec H3A 0C4, Canada



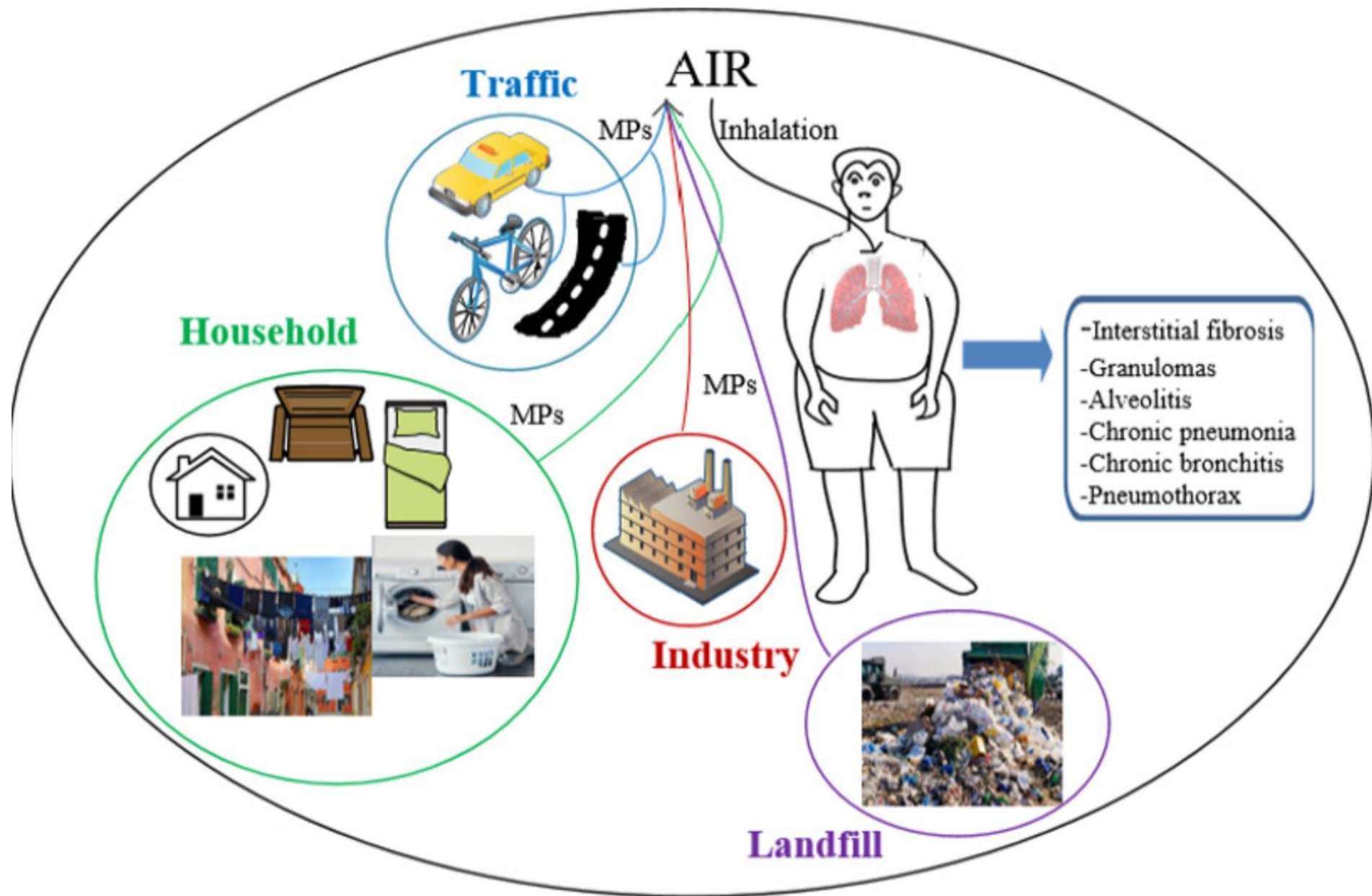
3.1 billion nanoplastics per one cup of tea

# Exposure to microplastics

- Drinking-water
- Food (seafood)
- Food packaging
- Indoor/outdoor air

*Microplastic in drinking water, WHO, 2019*

*Dietary and inhalation exposure to nano- and microplastic particles and potential implications for human health, WHO 2022*



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Plastics

## Microplastics found in human blood for first time

**Exclusive: The discovery shows the particles can travel around the body and may lodge in organs**



Microplastics cause damage to human cells in the laboratory. Photograph: David Kelly/Photograph David Kelly

### Most viewed



**Live** India v Australia: first Test, day two - live



'He's really dangerous': fear as Wagner convict soldiers return from Ukraine



UK narrowly avoids recession after figures show growth flatlining



**Live** Russia-Ukraine war live: Moldova summons Russian ambassador after missile crosses its airspace



**Live** Turkey and Syria earthquake updates: Assad makes first visit to disaster area as US grants aid licence pausing Syrian sanctions - live

## Detection and Analysis of Microplastics in Human Sputum

Shumin Huang,<sup>∇</sup> Xiaoxin Huang,<sup>∇</sup> Ran Bi, Qiuxia Guo, Xiaolin Yu, Qinghui Zeng, Ziyu Huang, Tianming Liu, Haisheng Wu, Yuliang Chen, Jialong Xu, Ying Wu,<sup>\*,○</sup> and Pi Guo<sup>\*,○</sup>



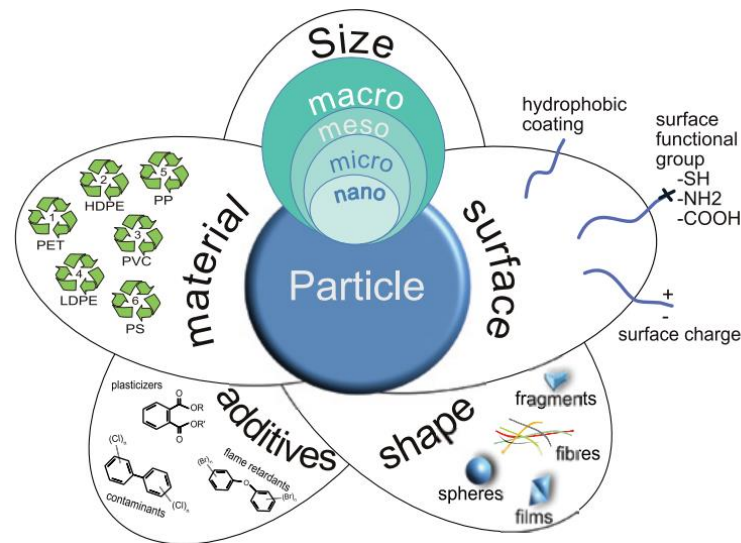
*Article*

# First Evidence of Microplastics in Human Urine, a Preliminary Study of Intake in the Human Body

Concetta Pironti <sup>1,†</sup>, Valentina Notarstefano <sup>2,†</sup> , Maria Ricciardi <sup>3</sup> , Oriana Motta <sup>1,\*</sup> , Elisabetta Giorgini <sup>2</sup>   
and Luigi Montano <sup>4,5,\*</sup> 

# Definitions

- Microplastic (MP) : plastic particles < 5mm in diameter
- Nanoplastic (NP) : plastic particle < 1000nm (1µm) in diameter

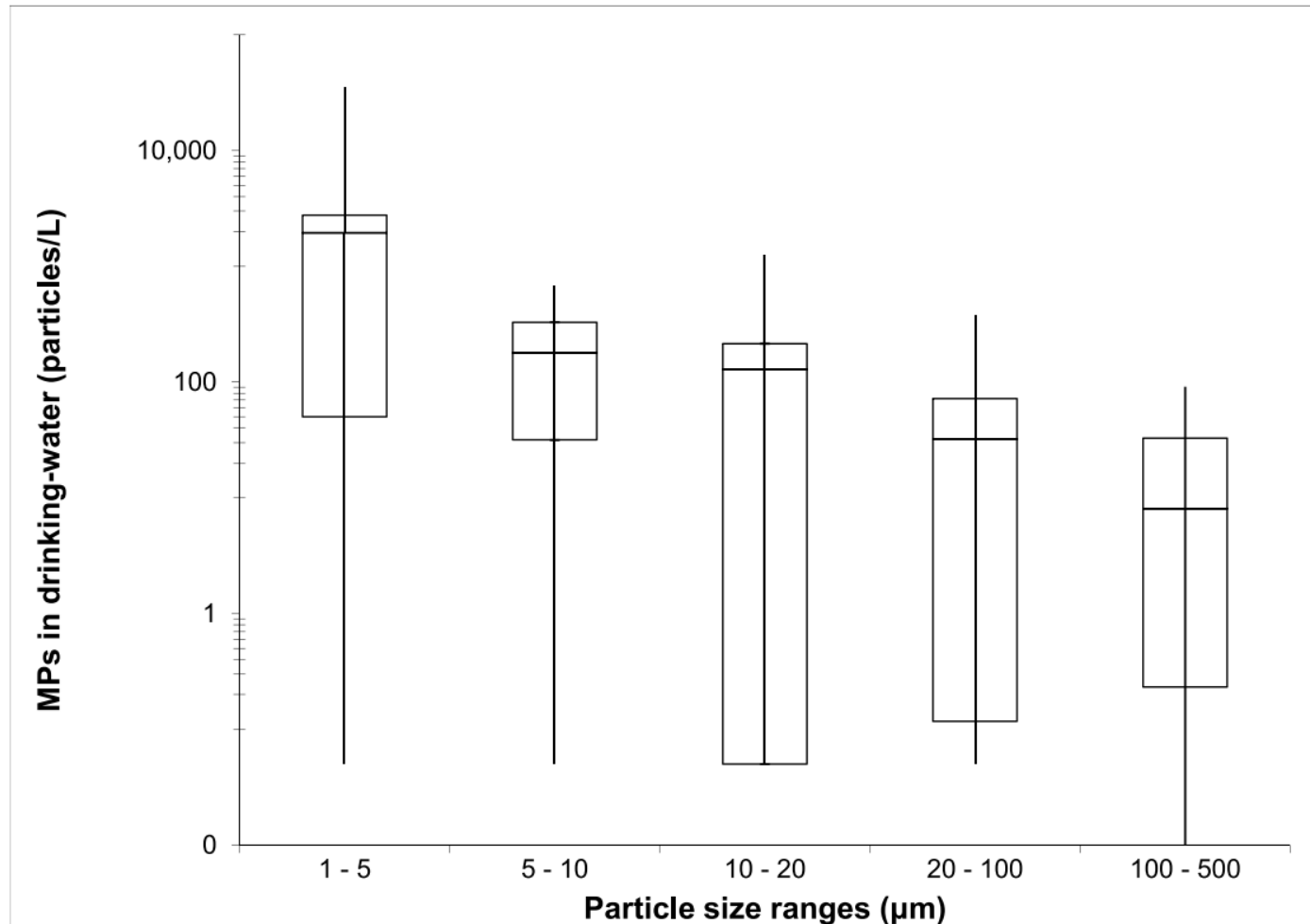


Attributes of NMP to be considered in assessing both exposure and hazard

**Table 2. Recent studies on the numbers and characteristics of microplastic or microplastic-like particles in drinking-water**

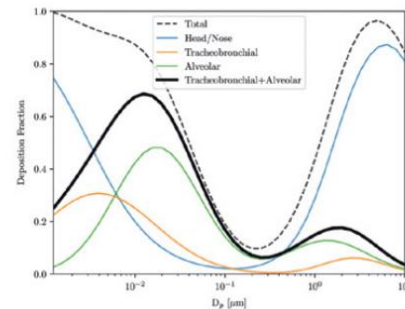
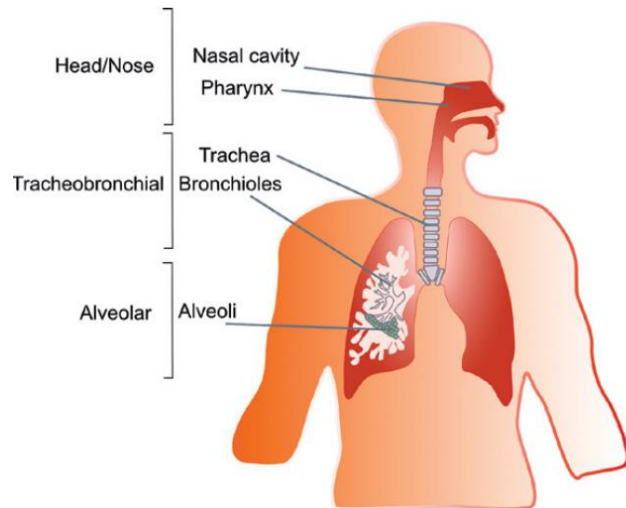
Reference	Water type	Lower size bound (µm)	Particles/L in sample (average)	Particles/L in blanks (average)	Particle size (µm)	Predominant particle shape	Predominant polymer type	Quality score (TAS) <sup>a</sup>
105	Bottled (mineral water) Glass Single-use PET Reusable PET	1	3074–6292 2649 4889	384	Most particles < 5 (> 75% in glass and > 95% in plastic bottles)	No discussion of shapes	PET in plastic bottles, polyethylene and styrene butadiene copolymer in glass	13
106	Drinking-water treatment plant from surface sources (3 sites): raw, treated	1	628 338 369	< 5% of counts in samples	≤ 95% of particles 1–10	Fragments, closely followed by fibres	PET but also polypropylene, polyethylene, polyacrylamide	11
107	Bottled Single-use Returnable Glass Beverage carton	5–20	14 118 50 11	14 ± 13	Typically, 40–50% in 5–10 range; > 80% < 20	No discussion of shape; described as fragments	PET but also polypropylene, polyethylene	14
104	Bottled	6.5–100 lower bound microscopically and in software	315	23.5	Not further specified		No characterization	14
102	Tap from groundwater sources	10–100	0.2, 0.8 and 0.0 (LOD, 0.3)	Unknown	Mainly 20–100	Fragments	PET, polypropylene, ABS, polyurethane	14
108	Tap from groundwater sources	20	0.0007	0.67 particles/L 0.3 fibres/L	50–150	Fragments	Polyester, PVC, polyethylene, polyamide, epoxy resin	15
103	Tap from 24 sources	60	Average not reported, as only one result (5.5) > LOQ	0.5 (LOQ = 4.1 LOD = 0.9)	Not specified	Not specified	No characterization	9
104	Bottled	> 100	10.4	4.15	Not further specified	Fragments (66%), fibres (13%), films (12%)	Polypropylene (54%)	14
102	Tap from groundwater sources	> 100 (10-µm sieve size)	0.312 (LOD, 0.58)	0.26	Not further specified	Fibres (82%), fragments (14%), films (4%)	PET, polypropylene, polystyrene	14
91	Tap from unspecified sources	100 (lowest reported)	5.45	0.33 particles/L (5 particles in 30 500-mL blanks)	Fibre lengths, 100–5000	Mainly fibres (98.3%)	No characterization	8
109	Bottled	0.5	5.42 × 10 <sup>7</sup>	1 × 10 <sup>7</sup> (estimated)	Range, 1.28–4.2	Not reported	Not reported	10
110	Tap water	1	440	2.4	3–4453; Mean, 66	> 50% fragments	Polyethylene and polypropylene	13
111	Drinking-water treatment plant: raw and treated	1	6614 ± 1132 (raw) 930 ± 72 (treated)	< 5% of samples	84.4–86.7% 1–5	> 50% fibres	PET, polyethylene, polypropylene	12
112	Bottled	3	148 ± 253	0	≥ 3 µm	Not reported	Not reported	15
113	Bottled	6.5	118 ± 88 14 ± 14 50 ± 52 81.0 ± 3.0 26.0 ± 2.0 12.0 ± 1.0	15 8 6	≥ 5 µm (returnable bottles) ≥ 5 µm (single-use bottles) ≥ 5 µm (glass bottles) 6.5–20 µm 20–50 µm ≥ 50 µm	62.8% fibres, 37.2% fragments	Polyethylene, polypropylene, PET	14
100	Drinking-water treatment plant: raw and treated	25	4.9 (raw) 0.0011 (treated)	Depending on polymer composition. LOD, 1.1–65; LOQ, 3.3–197	> 25	Not reported	ABS, polystyrene	16
114	Tap water	500	18 ± 7 (range, 5–91)	1	50% < 0.5 mm; 25% 0.5–1 mm	Fibres	Poly (trimethylene terephthalate); epoxy resin	14
115	Tap water from groundwater wells	Not defined	2.8	Not reported	Not reported	Fibres	Polyethylene	6
116	Tap water	10	0.7 ± 0.6 (range, 0.3–1.6)	Not reported	≥ 500 µm (> 50%)	Fibres (99.2%)	PET and rayon	11
117	Tap and bottled water	25	2.1 ± 5.0 (range, 0.99–26)	Not reported	25–500	Not reported	Polyethylene, polystyrene, PET	10
118	Tap water	50	0.6 (range, 0.24–1.00)	Not reported	≥ 100 µm (> 80%)	Fragments (77.5–93.6%)	Polyethylene, PET, polypropylene	11
119	Tap water	1	343.5	1–7	1–10 (85%)	Fragments	Polyethylene, polypropylene, PET	11
120	Bottled	15	6–58	Not reported	40–723	Fragments and Fibres	Not reported	6
121	Tap water	Not defined	39 ± 44 (range, 1.9–225)	Not reported	19.2–4200	Fragments	polystyrene, styrene-butylene, polypropylene, polyester	11
122	Groundwater	Not defined	38 ± 8 (range, 16–97)	Not reported	18–491	Fragments (94%)	Polyethylene, polypropylene, PVC, nylon, PET	15
123	Tap water		13.23	< 5%	100–200	Fragments	Nylon, polyester	9

**Fig. 3 Concentrations of MP in drinking-water according to particle size in studies with a total assessment score  $\geq 11$  and in which particles were verified as plastic**



# Occurrence in air

- Inhalable fraction : 2.5-10µm
- Microplastic < 5 µm : cannot be cleared by nasal mucus and can be inhaled directly into the lungs



**Table 3. Studies with a total assessment score > 10 of microplastic particles in indoor and outdoor air at urban and rural sites**

Reference	Sample type	Lower size bound (µm)	Particle concentration (average)	Number of particles in blanks (average)	Particle size (µm) <sup>a</sup>	Predominant particle shape	Predominant polymer type	Quality score <sup>b</sup>
157	Air (indoor and outdoor)	10	1583 ± 1181 MP/m <sup>3</sup> (indoor); 189 ± 85 MP/m <sup>3</sup>	3.3 ± 1.8 MP/filter	> 90% < 100 µm, the 5–30 µm fraction representing 54.1–65.2% of total	Fragments > 80%	Indoor: Polyester, polyamide, polypropylene Outdoor: Polyethylene, polystyrene, polyester	18
158	Air (outdoor)	10	282 ± 127 MP/m <sup>3</sup> (range, 104–650)	3.9 ± 2.2 MP/filter	73.5–96.6% represented by 5–30-µm fraction	Fragments (88.2%)	Polyethylene, polyester, polystyrene	18
159	Air (indoor)	11	9.3 ± 5.8 particles/m <sup>3</sup>	7.7 ± 3.8 MP/blank, data not corrected	36 and 21 for the major and minor dimensions	13% fibres, 87% fragments	81% polyester, 6% polyethylene, 5% polyamide, 2% polypropylene and 6% other polymers; non-synthetic, 95% protein, 5% cellulose; MP > 4% total particles	15
154	Air (indoor and outdoor)	20	3.3 fibres and 12.6 fragments/m <sup>3</sup> indoors; 0.6 fibres and 5.6 fragments/m <sup>3</sup> outdoors	2.4 fibres and 12.2 fragments per filter indoors; 0.4 fibres and 6.3 fragments per filter outdoors	Fibre lengths: indoors 641 µm; outdoor 616 µm; approx. 30% of fibres 100–300 µm Fragments: outdoors 104 µm; indoors 58.6 µm	Fragments	Polystyrene, PET, polyethylene	15
156	Air (outdoor)	12	0.41 MP/m <sup>3</sup> (0–2 MP/m <sup>3</sup> )	No MP in one blank collected	246.52 µm (12.35–2191.32 µm)	Fibres (43%), fragments (48%), beads (9%)	PET (51%), epoxy resin (19%), polyethylene (12%), alkyd resin (8%); fibrous PET (87%)	13
142	Deposition	10	365 ± 69 particles/m <sup>2</sup> per day (range, 29–462)	3 ± 1 fibres, 1 ± 1 film and 8 ± 1 fragments per filter	Most MP < 50 µm, fibre lengths predominantly 100–200 µm and 200–300 µm (max, 3000 µm); films, 50–200 µm	Fragments > fibres > films	Polystyrene (as fragments) followed by polyethylene	12



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## Airborne microplastics in indoor and outdoor environments of a coastal city in Eastern China

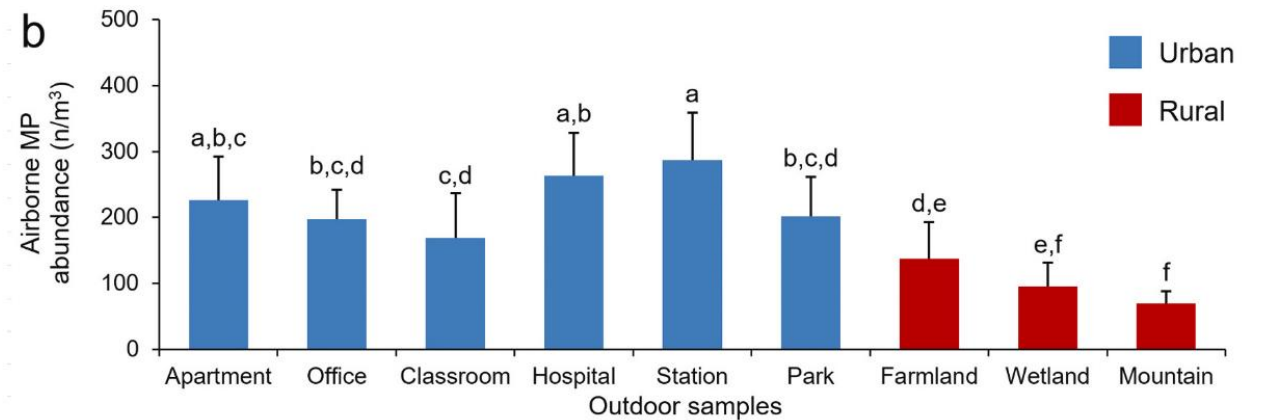
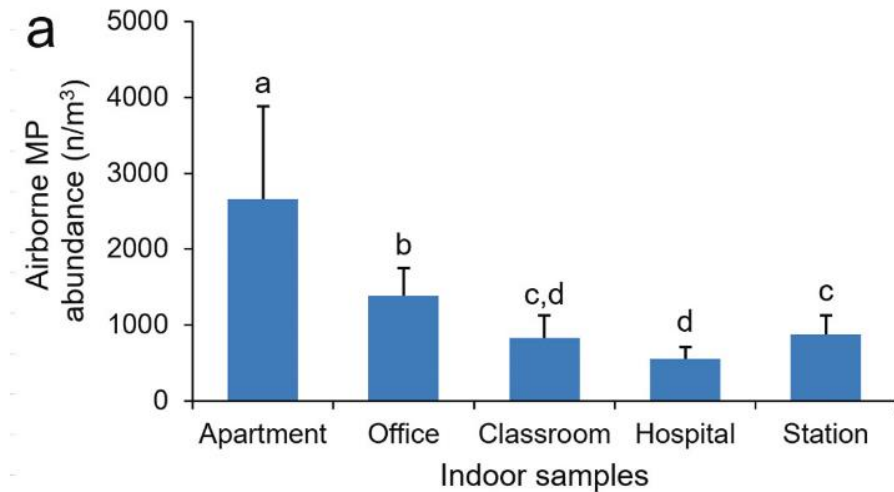
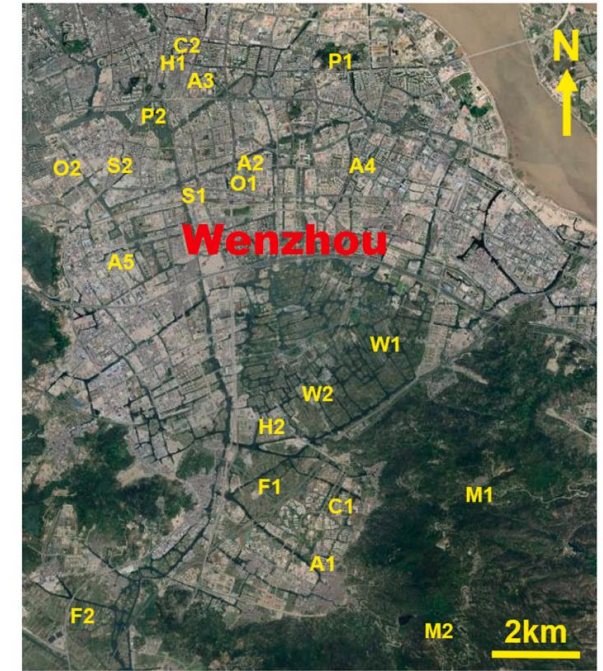
Zhonglu Liao<sup>a</sup>, Xiaoliang Ji<sup>a</sup>, Yuan Ma<sup>a</sup>, Baoqiang Lv<sup>b</sup>, Wei Huang<sup>c</sup>, Xuan Zhu<sup>a</sup>, Mingzhu Fang<sup>a</sup>, Qi Wang<sup>b</sup>, Xuedong Wang<sup>a,\*</sup>, Randy Dahlgren<sup>a,d</sup>, Xu Shang<sup>a,\*</sup>

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<sup>b</sup> School of Life and Environmental Science, National & Local Joint Engineering Research Center for Ecological Treatment Technology of Urban Water Pollution, Wenzhou University, Wenzhou 325035, China

<sup>c</sup> Laboratory of Marine Ecosystem and Biogeochemistry, Second Institute of Oceanography SOA, Hangzhou 310012, China

<sup>d</sup> Department of Land, Air and Water Resources, University of California Davis, CA 95616, USA



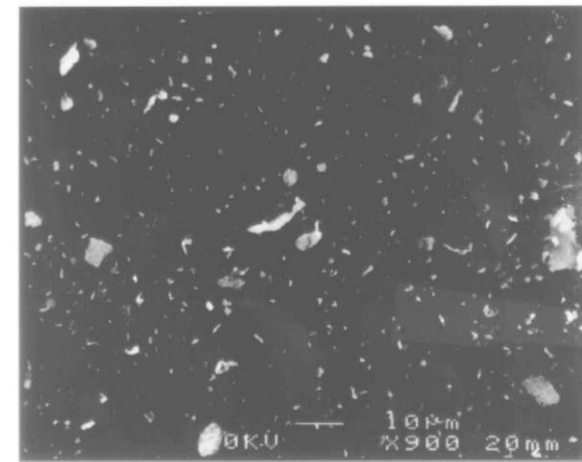
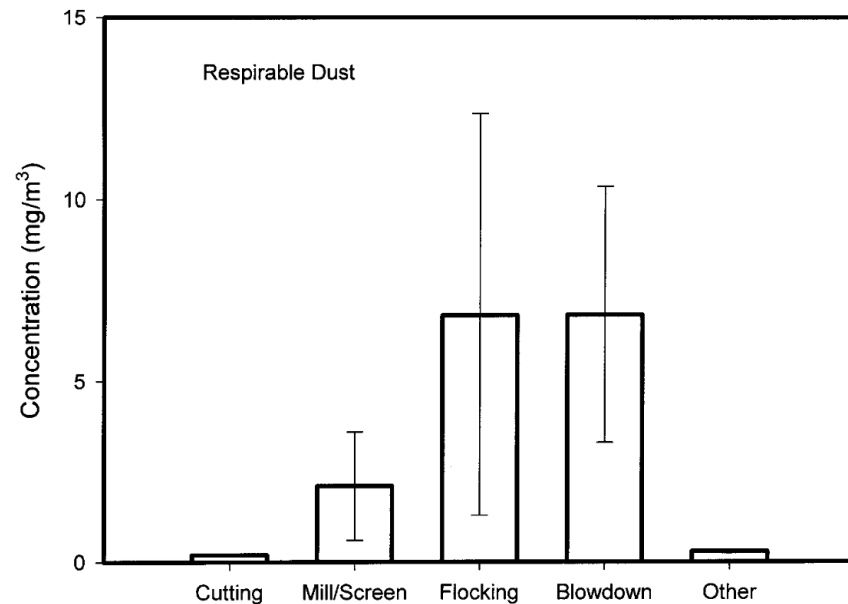
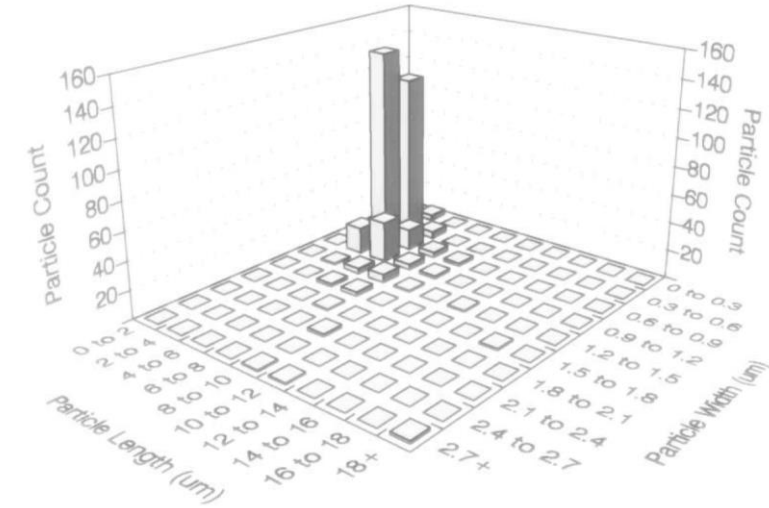
Summary of airborne MP characteristics compiled from previous studies.

Study area	Local environment	Abundance (n/m <sup>3</sup> )	Size range	Dominant size	Dominant shape	Dominant polymer composition	References
Paris, France	Indoor	1–60	50–3250 µm	50–450 µm: > 80%	Fiber	PP	<a href="#">Dris et al. (2017)</a>
Aarhus, Denmark	Outdoor	0.3–1.5	50–1650 µm		Fiber		
	Indoor	9.3 ± 5.8	11–370 µm	Median: 68 µm for fragment and 237 µm for fiber	Fiber: 13% Fragment: 87%	Polyester, PE, Nylon	<a href="#">Vianello et al. (2019)</a>
West Pacific Ocean	Outdoor	0–1.37	16–2087 µm	< 500 µm: > 50%	Fiber: 60% Fragment: 31%	PET: 57% PE: 10%	<a href="#">Liu et al. (2019b)</a>
Shanghai, China	Outdoor	1.42 ± 1.42	23–9555 µm	23–500 µm: > 50%	Fiber: 67% Fragment: 30%	PET, PE, PES, PAN, PAA, Rayon	<a href="#">Liu et al. (2019a)</a>
Surabaya, Indonesia	Outdoor	55.93–174.97	< 500–5000 µm	< 1500 µm: ~48%	Fiber	Cellophane, PE, PET	<a href="#">Syafei et al. (2019)</a>
Beijing, China	Outdoor	4500–7200	5–200 µm	< 20 µm: > 80%	Only fibers studied	N/A	<a href="#">Li et al. (2020)</a>
Wenzhou, China	Indoor	1583.3 ± 1180.6	5–4665 µm	< 30 µm: 60.4% 30–100 µm: 28.5%	Fiber: 10.4% Fragment: 89.6%	Polyester, PA, PP	This study
	Outdoor	188.7 ± 84.8	5–1794 µm	< 30 µm: 65.1% 30–100 µm: 29.4%	Fiber: 5.8% Fragment: 94.2%	PE, PS, Polyester	

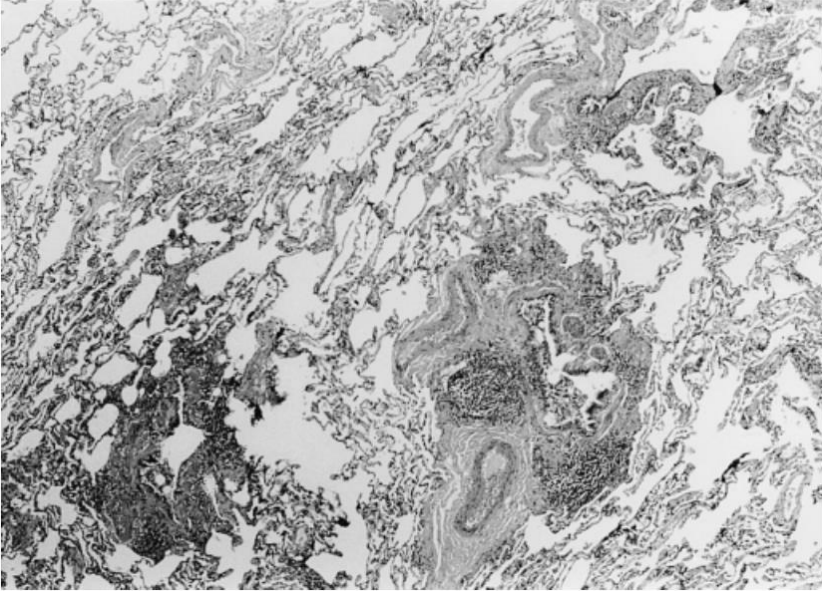
Little data on hazardous effect of NMP in human

# Observations from epidemiology

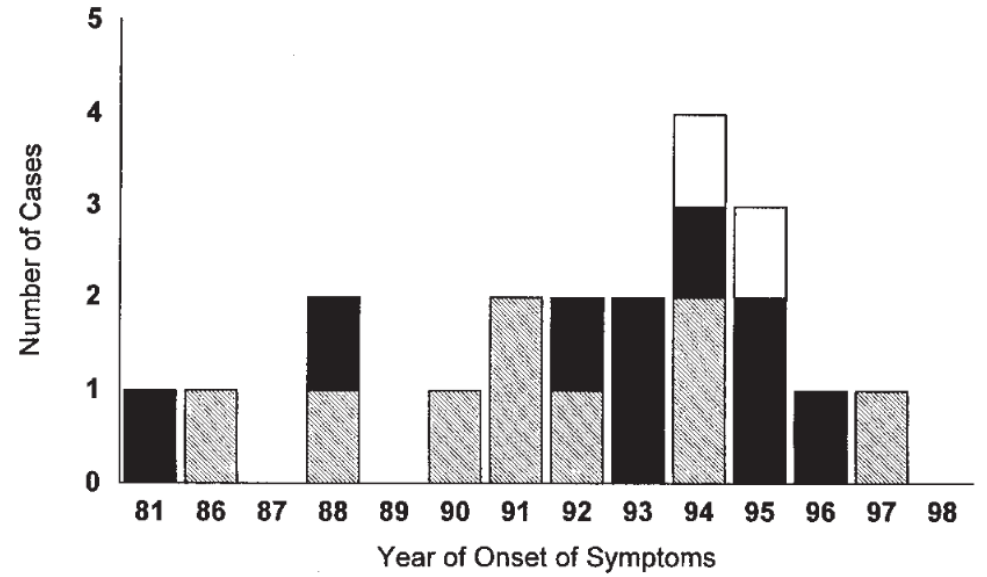
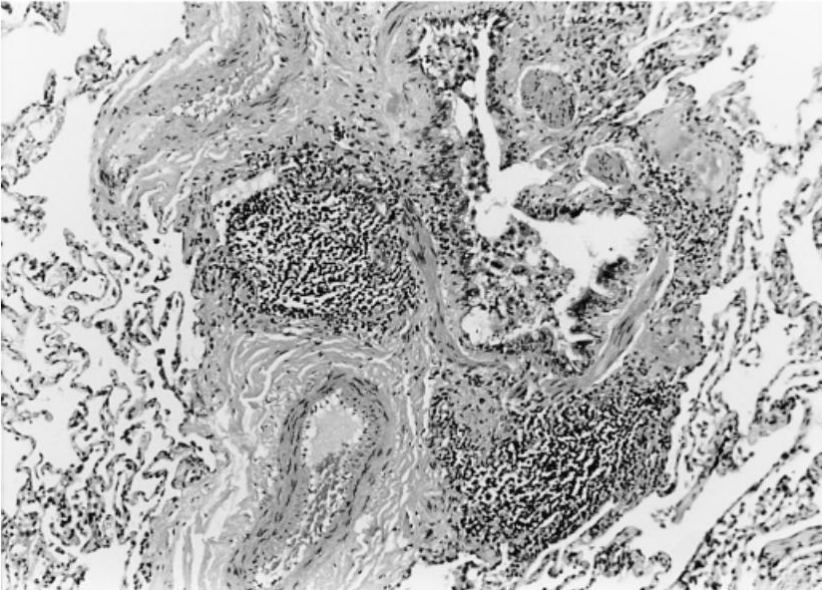
## Flock worker's lung



A



B



**A****B**

**Figure 4.** (A) Chest radiograph and (B) CT scan results for one of the cases of interstitial lung disease associated with nylon flock processing. The diffuse interstitial involvement is predominantly in a peripheral pattern.

**CASE STUDY**

**Polyethylene flock-associated interstitial lung disease  
in a Spanish female**

E. Barroso\*, M.D. Ibañez#, F.I. Aranda<sup>†</sup>, S. Romero\*

AMERICAN JOURNAL OF INDUSTRIAL MEDICINE 50:274–284 (2007)

**Rayon Flock: A New Cause of Respiratory  
Morbidity in a Card Processing Plant**

**Vinicius C.S. Antao**, MD, MSc, PhD,<sup>\*</sup> **Chris A. Piacitelli**, CIH, **William E. Miller**, MS,  
**Germania A. Pinheiro**, MD, MSc, PhD, and **Kathleen Kreiss**, MD

Eur Respir J 2005; 25: 110–117  
DOI: 10.1183/09031936.04.00138403  
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The respiratory effects of occupational  
polypropylene flock exposure

**S. Atis\***, **B. Tutluoglu#**, **E. Levent<sup>†</sup>**, **C. Ozturk<sup>+</sup>**, **A. Tunaci<sup>§</sup>**, **K. Sahin<sup>†</sup>**, **A. Saral<sup>f</sup>**, **I. Oktay<sup>†</sup>**, **A. Kanik\*\*** and  
**B. Nemery###**



*Am J Ind Med. 2007 Apr;50(4):274-84. doi: 10.1002/ajim.20440.*  
*Eur Respir J. 2002 Dec;20(6):1610-2.*  
*Eur Respir J. 2005 Jan;25(1):110-7.*

# Association with lung cancer

Original Articles

## A Retrospective Cohort Study of Lung Cancer Incidence in Nylon Flock Workers, 1998–2008

David G. Kern, Eli Kern, Robert S. Crausman & Richard W. Clapp

Pages 345-351 | Published online: 19 Jul 2013

[Download citation](#)

### ORIGINAL ARTICLE

## Cancer mortality in a synthetic spinning plant in Besançon, France

M Hours, J Févotte, S Lafont, A Bergeret

*Occup Environ Med* 2007;**64**:575–581. doi: 10.1136/oem.2006.028282

### Original article

## Lung cancer and occupational exposures other than cotton dust and endotoxin among women textile workers in Shanghai, China

H Checkoway,<sup>1,2</sup> R M Ray,<sup>3</sup> J I Lundin,<sup>1</sup> G Astrakianakis,<sup>4</sup> N S Seixas,<sup>1</sup> J E Camp,<sup>1</sup> K J Wernli,<sup>5</sup> E D Fitzgibbons,<sup>5</sup> W Li,<sup>2,3</sup> Z Feng,<sup>3</sup> D L Gao,<sup>6</sup> D B Thomas<sup>2,3</sup>

Lung cancer incidence : 5 vs 1.61  
(IRR 3.1, 95%CI 1.01-7.23)

### Mortality from lung cancer

- "hot -line fitters"  
(RR = 2.13; 1.06 to 4.29)
- "fibre-drawing workers"  
(RR = 1.83;1.09 to 3.07)

No associations between lung cancer with wool, silk or synthetic fibre dusts, or with most other agents

*Occup Environ Med*. 2007 Sep;**64**(9):575-81.

*Occup Environ Med*. 2011 Jun;**68**(6):425-9.

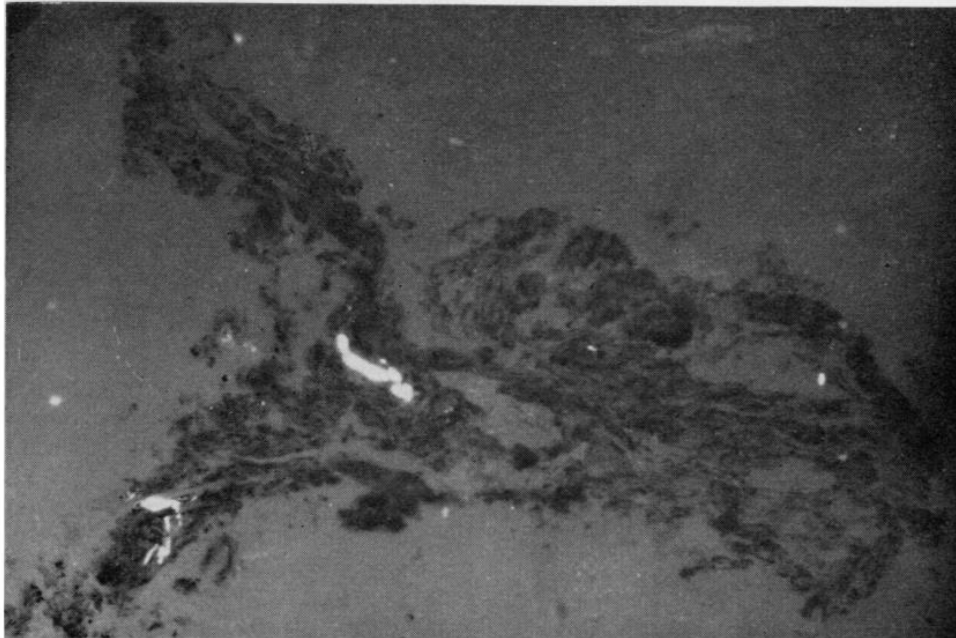
*Int J Occup Environ Health*. 2011 Oct-Dec;**17**(4):345-51.

## Respiratory disease caused by synthetic fibres: a new occupational disease<sup>1</sup>

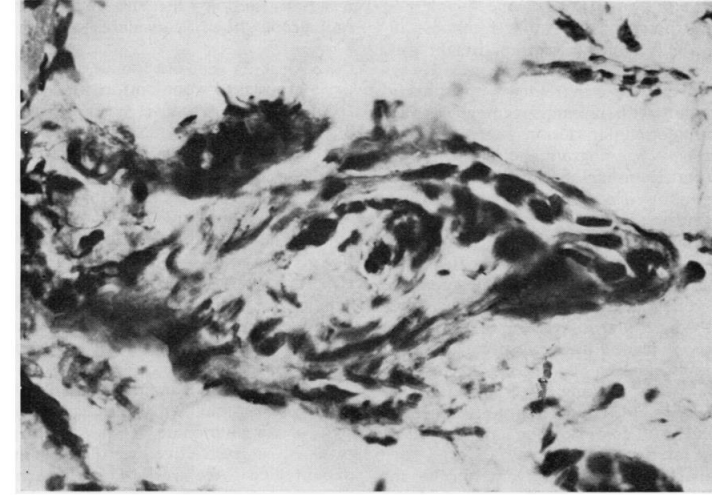
J. CORTEZ PIMENTEL, RAMIRO AVILA,  
and A. GALVÃO LOURENÇO

*IANT (Department of Pathology of Sanatorio D. Carlos I), Institute of Pathology and  
Department of Chest Diseases, Lisbon University Faculty of Medicine*

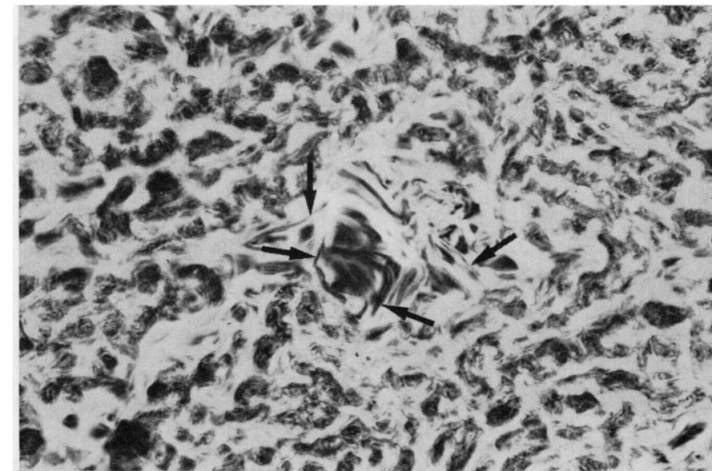
**Pimentel, J. C., Avila, R., and Lourenço, A. G. (1975). *Thorax*, 30, 204–219. Respiratory disease caused by synthetic fibres: a new occupational disease. Seven patients exposed to**



**FIG. 11.** Case 6. View of the lung lesions. Numerous inclusions of polyester fibres (polarized light) (H and E  $\times 75$ ).



**FIG. 1.** Case 1. Detail of granuloma of the interalveolar septa. Cellular proliferation made up of histiocytes and fibroblasts. Note the presence of slits where the Orlon fibres lay (H and E  $\times 550$ ).



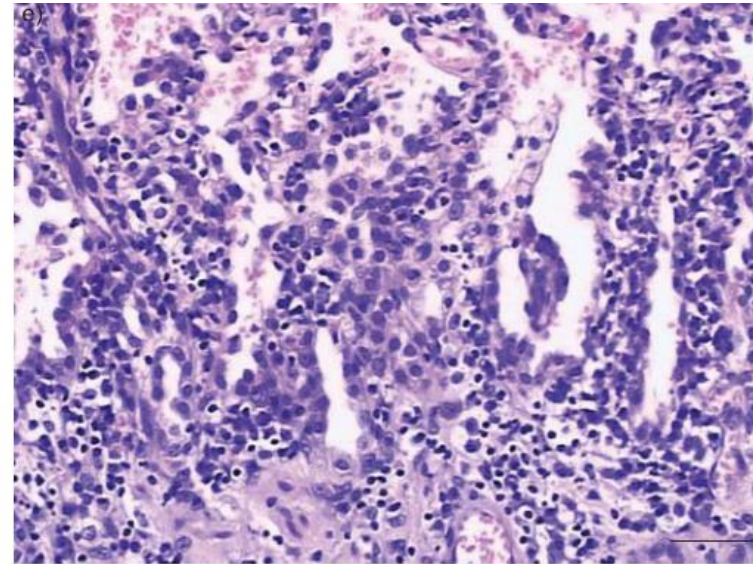
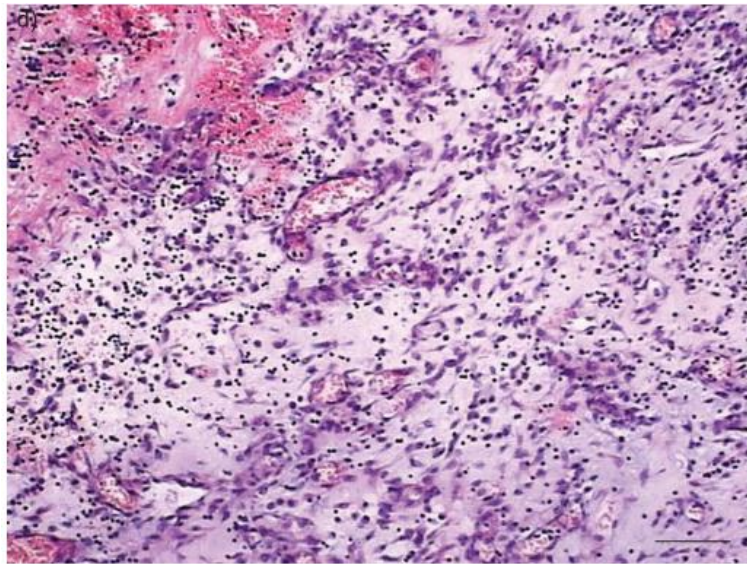
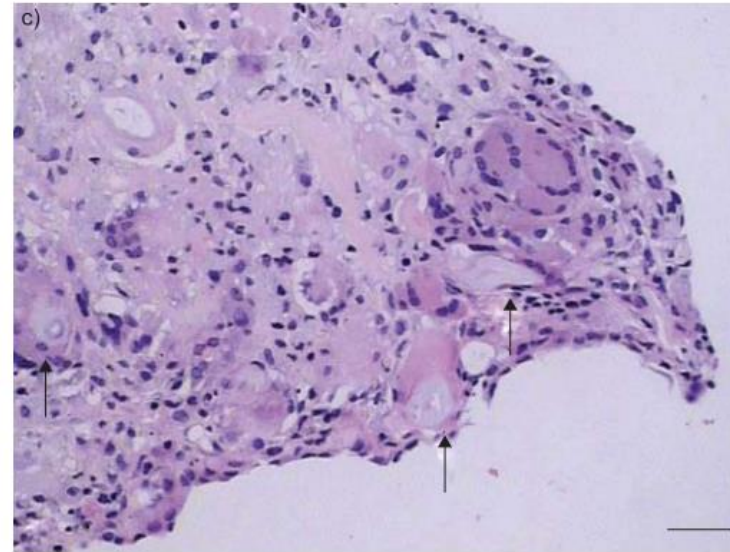
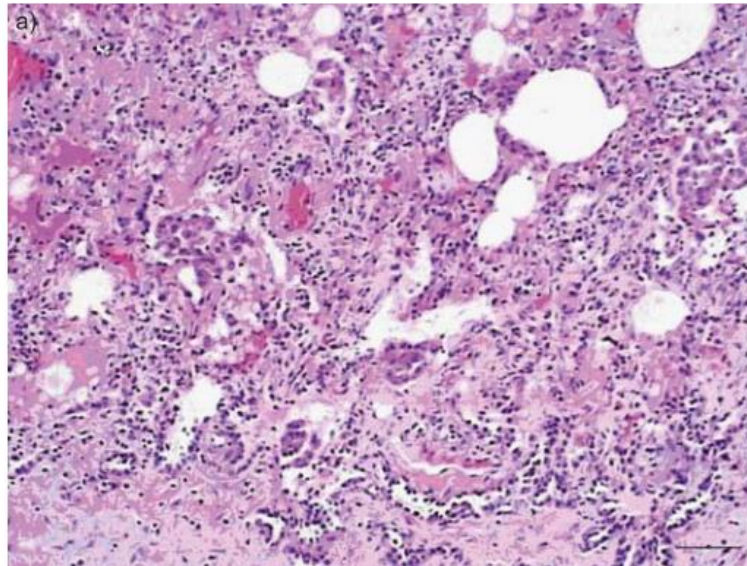
**FIG. 2.** Case 1. Detail of a granuloma of the interalveolar septa (phase contrast). Arrows show Orlon fibres. (H and E  $\times 500$ ).

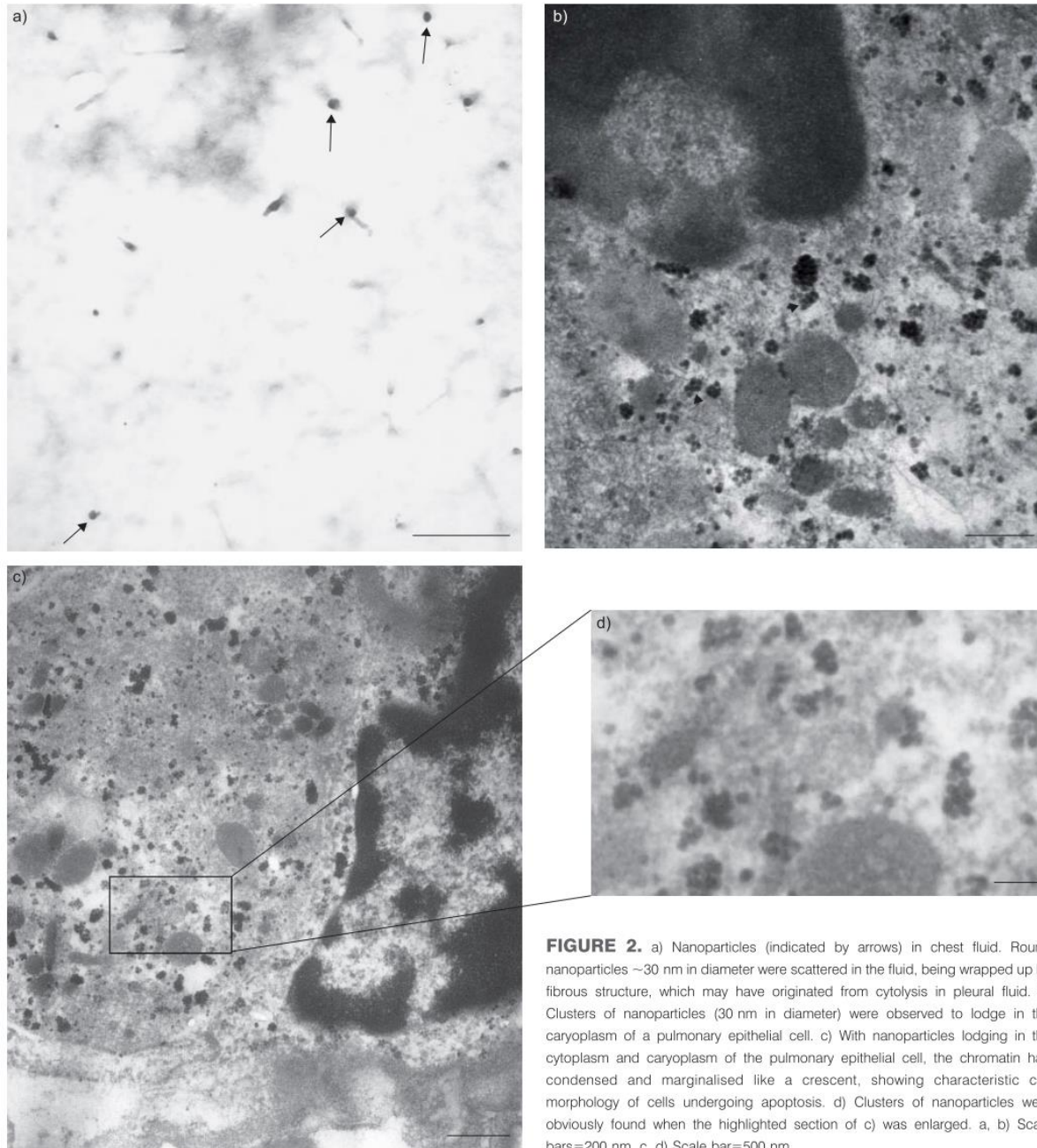


## Exposure to nanoparticles is related to pleural effusion, pulmonary fibrosis and granuloma

Y. Song\*, X. Li<sup>#</sup> and X. Du\*

- 7 young female patients, working in the same department in a print plant, were admitted to our hospital (Beijing Chaoyang Hospital, Beijing, China).
- All had
  - same symptoms : shortness of breath
  - same clinical findings : pleural effusion and pericardial effusion.
- Polyacrylate, consisting of nanoparticles, was confirmed in the workplace.





**FIGURE 2.** a) Nanoparticles (indicated by arrows) in chest fluid. Round nanoparticles ~30 nm in diameter were scattered in the fluid, being wrapped up by fibrous structure, which may have originated from cytolysis in pleural fluid. b) Clusters of nanoparticles (30 nm in diameter) were observed to lodge in the caryoplasm of a pulmonary epithelial cell. c) With nanoparticles lodging in the cytoplasm and caryoplasm of the pulmonary epithelial cell, the chromatin had condensed and marginalised like a crescent, showing characteristic cell morphology of cells undergoing apoptosis. d) Clusters of nanoparticles were obviously found when the highlighted section of c) was enlarged. a, b) Scale bars=200 nm. c, d) Scale bar=500 nm.



ELSEVIER



Research Paper

## Presence of airborne microplastics in human lung tissue

Luís Fernando Amato-Lourenço<sup>a,b,\*</sup>, Regiani Carvalho-Oliveira<sup>a</sup>, Gabriel Ribeiro Júnior<sup>a</sup>,  
Luciana dos Santos Galvão<sup>c</sup>, Rômulo Augusto Ando<sup>d</sup>, Thais Mauad<sup>a,b</sup>

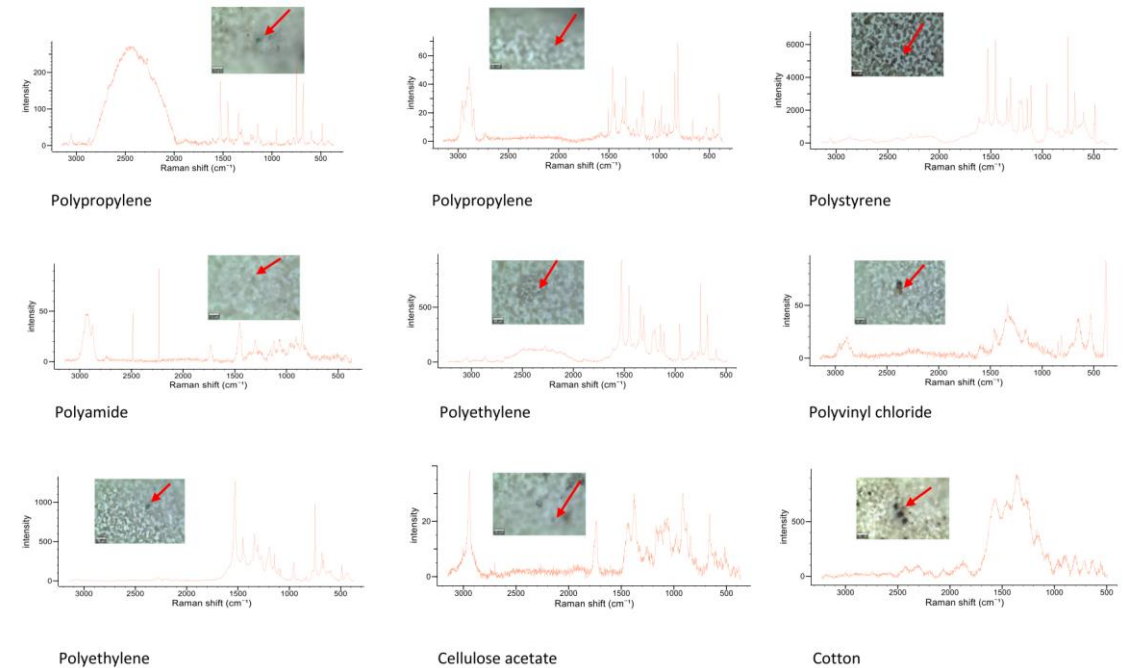
- 20 Non-smokers → Autopsy
- Lived in Sao Paulo for more than 10 years

**Table 1**  
Demographic information of the 20 decedents. \*Histological analysis not performed.

Case	Demographic data			Underlying diseases	Cause of death	Histological findings	Pulmonary tissue weight (g)	Died at hospital? (yes/no)
	Age at death	Gender	Occupation					
1	55	M	Bricklayer assistant	Diabetes, systemic arterial hypertension, hypertensive cardiomyopathy, alcoholism	Pulmonary oedema	*	3.04	No
2	89	M	Salesman	Systemic arterial hypertension, malignant prostate cancer	Pulmonary thromboembolism	Pulmonary thromboembolism, senile emphysema, pneumonia	2.06	No
3	79	M	Construction supervisor	Stroke, prostate cancer	Massive pulmonary thromboembolism	*	3.56	Yes
4	74	M	Accountant	Diabetes, systemic arterial hypertension, stroke	Aspiration pneumonia	Bacterial pneumonia	4.23	No
5	86	F	Housewife	Ruptured brain aneurysm	Cerebral haemorrhage	Senile emphysema	2.10	Yes
6	59	M	Serigrapher	Old myocardial infarction	Acute myocardial infarction	Pulmonary oedema	2.64	No
7	79	M	Bricklayer assistant	Systemic arterial hypertension, stroke	Pulmonary thromboembolism	Pulmonary thromboembolism, bronchopneumonia	3.50	Yes
8	78	F	Housewife	Systemic arterial hypertension	Bronchopneumonia	Bronchopneumonia	2.23	No
9	75	F	Quality inspector	Heart disease, chronic lung disease, cardiac failure	Hydropericardium	Emphysema, chronic bronchitis	2.83	No
10	79	F	Housekeeper	Systemic arterial hypertension, atherosclerotic hypertensive heart disease, stroke	Pulmonary oedema	Pulmonary oedema	3.89	No
11	48	M	Security guard	Diabetes, systemic arterial hypertension, heart disease, Dementia	Pulmonary oedema	Chronic passive congestion of the lung	5.42	No
12	94	F	Housewife		Bilateral bronchopneumonia	*	2.57	Yes
13	74	F	Librarian	Systemic arterial hypertension, ruptured abdominal aortic aneurysm	Hypovolemic shock	Normal histology	3.86	No
14	90	F	Teacher	Systemic arterial hypertension, heart disease	Pulmonary thromboembolism	Pulmonary oedema	4.42	Yes
15	67	F	Farmer	Systemic arterial hypertension, heart disease, stroke, alcoholism,	Abdominal haemorrhage	Pulmonary oedema	3.50	Yes
16	60	F	Housekeeper	Diabetes, systemic arterial hypertension, acute myeloid leukaemia, stroke	Pulmonary oedema	Observations from epidemiology pulmonary oedema	2.04	No
17	79	F	Masseuse	Diabetes, systemic arterial hypertension, cerebral aneurysm	Subarachnoid haemorrhage	Normal histology	2.94	No
18	88	F	Housekeeper	Diabetes, stroke, systemic arterial hypertension, generalized atherosclerosis	Cerebral ischemic infarction	Bronchopneumonia	3.53	No
19	89	F	Cooker	Systemic arterial hypertension, stroke	Pulmonary thromboembolism	Pulmonary thromboembolism	4.45	No
20	78	F	Housewife	Systemic arterial hypertension, stroke, focal necrosis of the small intestine	Acute peritonitis	Pulmonary oedema	2.71	No

**Table 2**  
Morphology and chemical characterization of the identified particles/fibres.

Decedent	Particle/ fibre	Size ( $\mu\text{m}$ )	Polymer matrix	Colour
3	Fibre	16.80	Polypropylene	White/grey
3	Particle	2.82	Cotton	Brown
3	Particle	4.25	Polypropylene	White/grey
4	Particle	5.42	Cotton	Beige
4	Particle	4.20	Polyethylene	Transparent
4	Particle	2.84	Cotton	White
6	Fibre	8.93	Cellulose acetate	Grey
6	Particle	4.30	Polyvinyl chloride	Black
8	Fibre	11.08	Polypropylene	Blue
8	Fibre	8.12	Polypropylene	Blue
8	Particle	4.30	Polyethylene	Transparent
9	Particle	1.98	Cotton	Yellow
9	Particle	4.29	Polyethylene-co- polypropylene	Grey
9	Particle	3.49	Cotton	Brown
10	Particle	3.34	Polypropylene	White/grey
10	Particle	3.55	Polypropylene	White/grey
10	Particle	4.42	Polypropylene	White/grey
10	Particle	5.30	Polypropylene	White/grey
11	Particle	2.40	Polyurethane	Beige
11	Particle	3.47	Polystyrene	Blue
11	Particle	4.12	Cotton	Grey
12	Particle	5.40	Polyethylene	Grey
12	Particle	4.43	Polystyrene-co-polyvinyl chloride	Grey
12	Particle	4.05	Polyethylene	Grey
12	Particle	3.07	Polypropylene	Grey
12	Particle	3.55	Polypropylene	White/grey
12	Particle	3.96	Polypropylene	White/grey
13	Particle	1.60	Polyethylene	Blue
16	Particle	3.26	Polyethylene	Blue
16	Particle	3.54	Polypropylene	Green
16	Particle	5.20	Polyethylene	Blue
16	Particle	3.95	Polyethylene	Grey
17	Particle	4.26	Polyvinyl chloride	Orange
19	Particle	4.52	Cellulose acetate	Grey
20	Particle	2.69	Polyethylene	Grey
20	Particle	5.56	Polypropylene	White/grey
20	Particle	3.85	Polyamide	White/grey



- 31 synthetic polymer particles/fibers were observed in 13/20 autopsied decedents
- The mean particle size was 3.92  $\mu\text{m}$ ,
- The mean fiber length was 11.23  $\mu\text{m}$
- Polypropylene (35.1%) > polyethylene (24.3%) > cotton (16.2)



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### Detection of microplastics in human lung tissue using $\mu$ FTIR spectroscopy

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<sup>c</sup> Department of Cardiothoracic Surgery, Castle Hill Hospital, Cottingham HU16 5JQ, United Kingdom



- Excess human lung tissue was collected from thoracic surgical procedures at Castle Hill Hospital
- A total of 39 MPs were identified within 11 of the 13 human lung tissue samples.

ID	Sex	Lung region	Tissue (g)	MP total	MP polymer	Length, width ( $\mu$ m)	Shape	MP/g <sup>a</sup>	MP/g <sup>b</sup>	MP/g <sup>c</sup>	
1.1	M	R, Low	2.02	8	PET	88, 10	Fibre	3.96	2.97	1.94 based on PP only	
					PP	55, 28	Fragment				
					PP	39, 18	Fragment				
					PP	420, 9	Fibre				
					PP	27, 10	Fragment				
					PS	89, 71	Fragment				
					PTFE	100, 29	Fibre				
					PTFE	92, 88	Film				
					PP	109, 18	Fibre				2.53
TPE	66, 19	Fibre									
2.1	M	R, Low	0.80	3	PP	40, 22	Fragment	3.75	1.25		
					PP	144, 65	Fragment				
2.2		L, Low	0.84	3	PTFE	26, 20	Fragment	3.57	1.19		
					PS	14, 14	Fragment				
					PTFE	96, 5	Fibre				
3.1	M	R, Up	13.33	5	Resin	19, 13	Fragment	0.38	0.23		
					PE	224, 9	Fibre				
					PE	29, 17	Fragment				
					PET	202, 6	Fibre				
					PP	101, 17	Fibre				
					SEBS	83, 18	Film				
4.1	M	R, Up	1.53	2	PS	60, 44	Fragment	1.31	0.65		
					Resin	12, 9	Fragment				
5.1	F	L, Lin	1.37	0	none	none	0.00	0.00			
6.1	M	R, Mid	3.98	2	PE	17, 10	Fragment	0.50	0.25		
7.1	F	R, Up	8.29	1	Resin	20, 15	Fragment	0.12	0.00		
					PES	40, 22	Fragment				
8.1	F	L, Low	5.90	7	PAN	1112, 9	Fibre	1.19	1.19		
					PE	28, 20	Fragment				
					PET	443, 13	Fibre				
					PET	452, 12	Fibre				
					PP	160, 46	Fragment				
					Resin	101, 9	Fibre				
					Resin	261, 22	Fibre				
					PET	897, 10	Fibre			0.73	0.73
					PET	2475, 12	Fibre				
					PMMA	96, 76	Fragment				
PUR	155, 16	Fibre									
Resin	14, 4	Fibre									
10.1	F	R, Up	2.12	1	PET	275, 12	Fibre	0.47	0.47		
11.1	F	R, Up	7.60	0	none	none	0.00	0.00			
Mean $\pm$ SD								1.42 $\pm$ 1.5	0.69 $\pm$ 0.84		

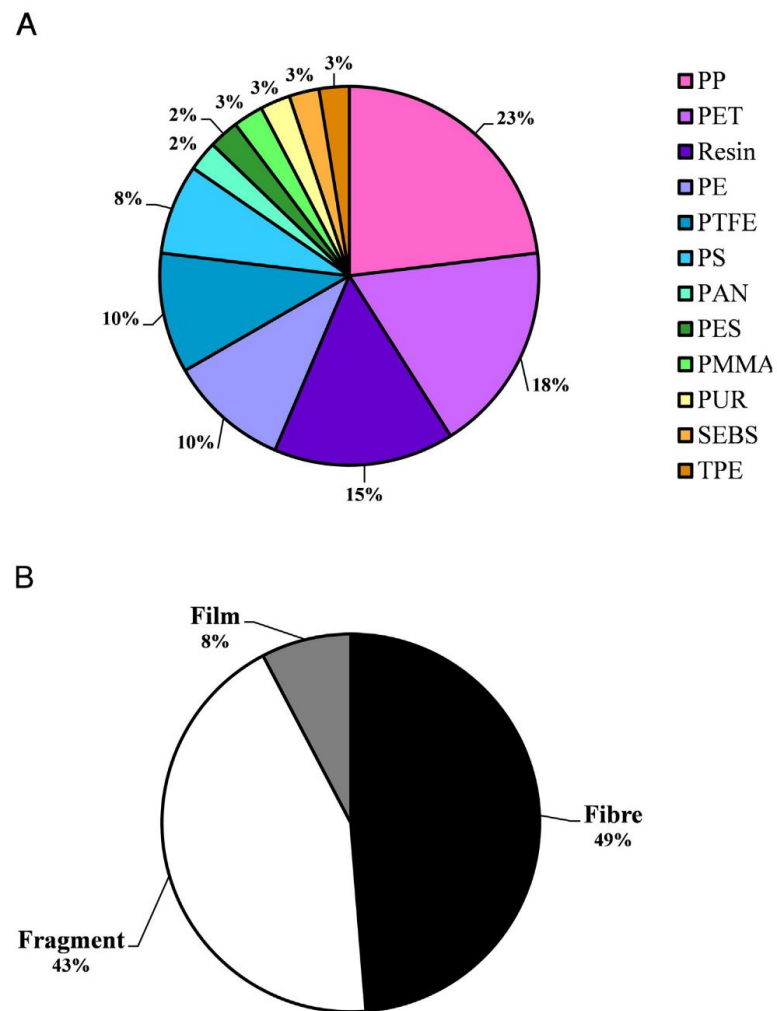


Fig. 1. Polymer types (A) and shapes (B) of the MPs identified within lung tissue samples.

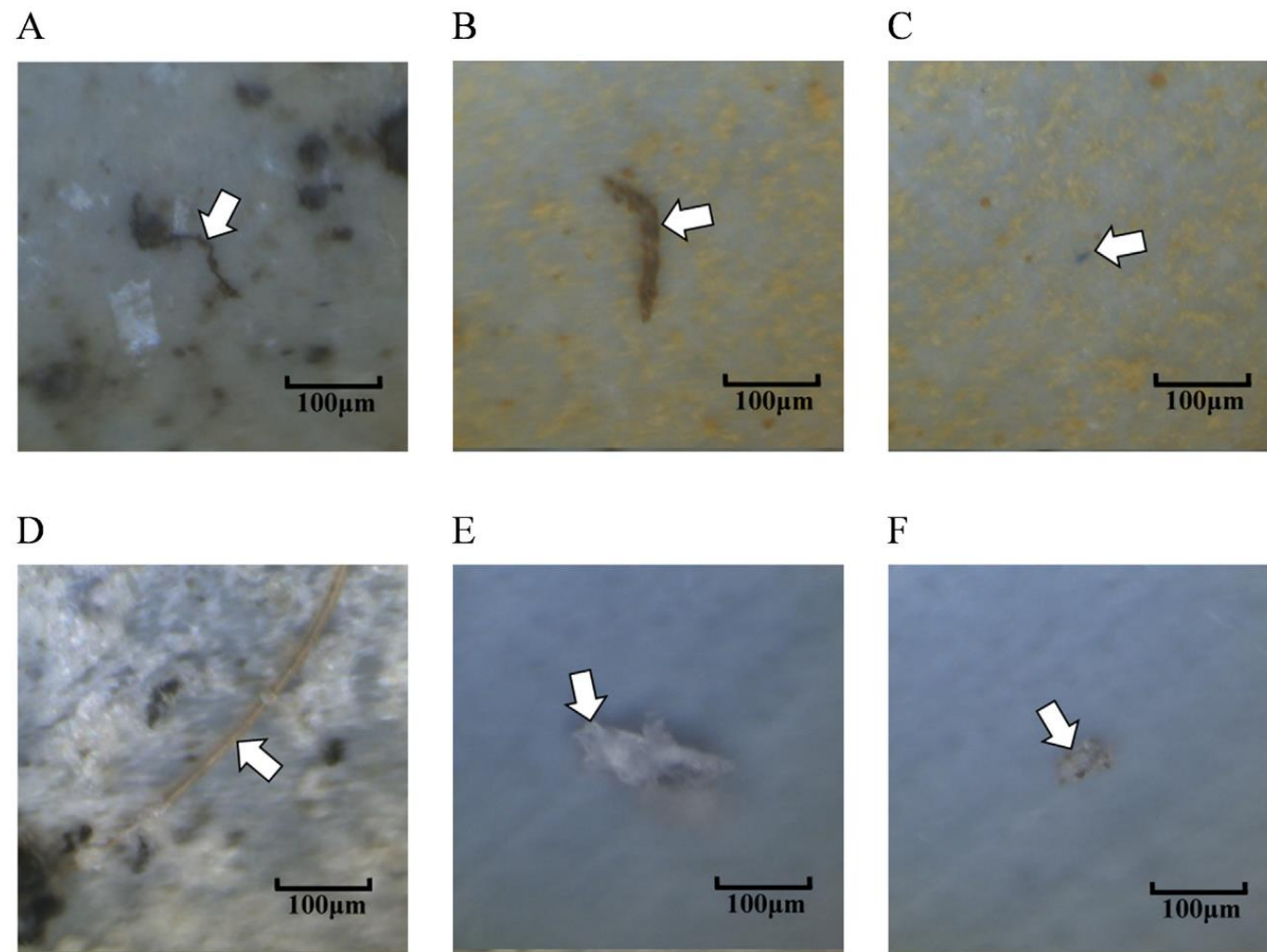


Fig. 2. Images of MPs identified from human lung tissue samples. A, B, C and D = (A = PET) (B = PUR) (C = Resin) (D = PAN). E and F = MPs identified within blanks. (E = PS) (F = PP). Corresponding spectra included in Fig. S2.



Full length article

Discovery and quantification of plastic particle pollution in human blood

Heather A. Leslie<sup>a</sup>, Martin J.M. van Velzen<sup>a</sup>, Sicco H. Brandsma<sup>a</sup>, A. Dick Vethaak<sup>a,b</sup>, Juan J. Garcia-Vallejo<sup>c</sup>, Marja H. Lamoree<sup>a,\*</sup>

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- Measured plastic particles in human whole blood from 22 healthy volunteers.

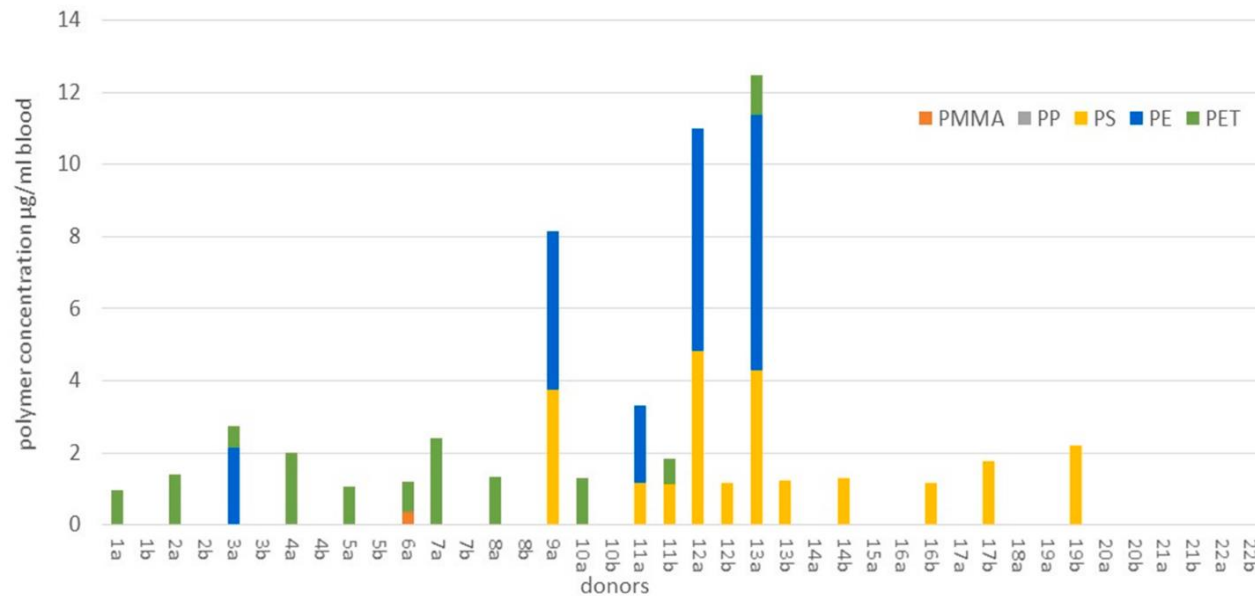
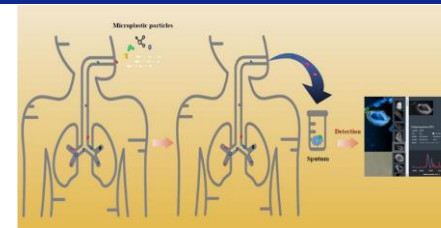


Fig. 1. Concentrations of plastic particles by polymer type in whole blood samples of 22 donors (duplicates a and b, except for No. 6, 9, 15 and 18). All values >LOQ.



## Detection and Analysis of Microplastics in Human Sputum

Shumin Huang,<sup>▽</sup> Xiaoxin Huang,<sup>▽</sup> Ran Bi, Qiuxia Guo, Xiaolin Yu, Qinghui Zeng, Ziyu Huang, Tianming Liu, Haisheng Wu, Yuliang Chen, Jialong Xu, Ying Wu,<sup>\*,○</sup> and Pi Guo<sup>\*,○</sup>

- 22 sputum specimen → 32% detected microplastic
- the size range : 20–500 μm. (median: 75.43 μm; interquartile range: 44.67–210.64 μm)
- 21 types of microplastics were identified,
  - polyurethane > polyester > chlorinated polyethylene > alkyd varnish

**Table 3. Comparisons of the Number of Microplastic Types According to Individual Characteristics of Participants Involved (Unit: particles/10 mL)<sup>a,b</sup>**

characteristics	category	median	IQR	P-value
sex	female	6	1	0.093
	male	7	3	
age (years)	<60	6.5	1	0.439
	≥60	6	3.5	
occupational exposure	no	6	2.5	0.908
	yes	6.5	2.5	
alcohol drinker	no	6	3.5	0.362
	yes	7	0.5	
individual smoking status	no	5.5	2.5	0.022
	yes	7	3	
invasive tracheal examination	no	6	1.5	0.706
	yes	7	8	
having buildings near residential addresses or not	no	6	3	0.609
	yes	6.5	1.25	
PM <sub>2.5</sub> ≥ mean (25.34 μg/m <sup>3</sup> )	no	6	3	0.663
	yes	6	1.5	
having COPD	no	5	1.75	0.531
	yes	6	3.75	
having bronchiectasis	no	5	2	0.433
	yes	5	2	
having COPD and bronchiectasis	no	5	1.75	0.531
	yes	6	3.75	
wearing of face masks within 2 weeks	almost no	7	4	0.867
	occasionally	6	1.5	
	sometimes	6.5	5.5	
	often	6	2	

<sup>a</sup>IQR: interquartile range. COPD: chronic obstructive pulmonary disease. <sup>b</sup>Statistically significant differences between groups were tested using the Mann–Whitney *U*-test (*P* < 0.05).

**In vitro studies**



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## Journal of Hazardous Materials

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### Polystyrene microplastic particles: In vitro pulmonary toxicity assessment

Cheng-Di Dong<sup>a</sup>, Chiu-Wen Chen<sup>a</sup>, Yi-Chun Chen<sup>b</sup>, Hung-Hsiang Chen<sup>b</sup>, Jin-Sun Lee<sup>a,\*</sup>,  
Chia-Hua Lin<sup>b,\*</sup>

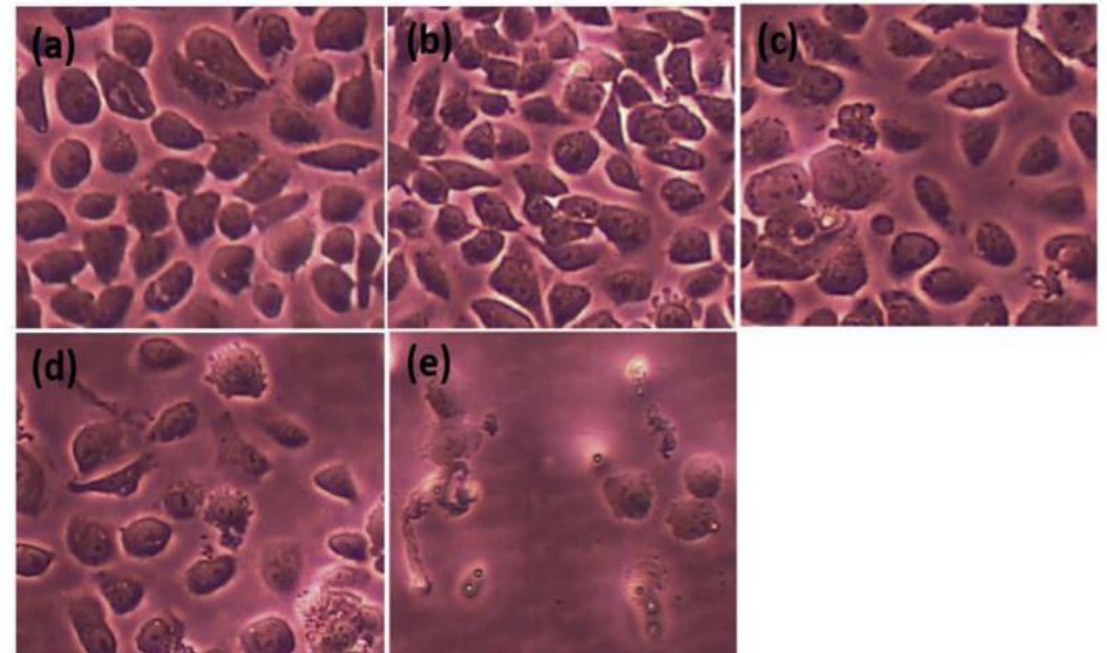
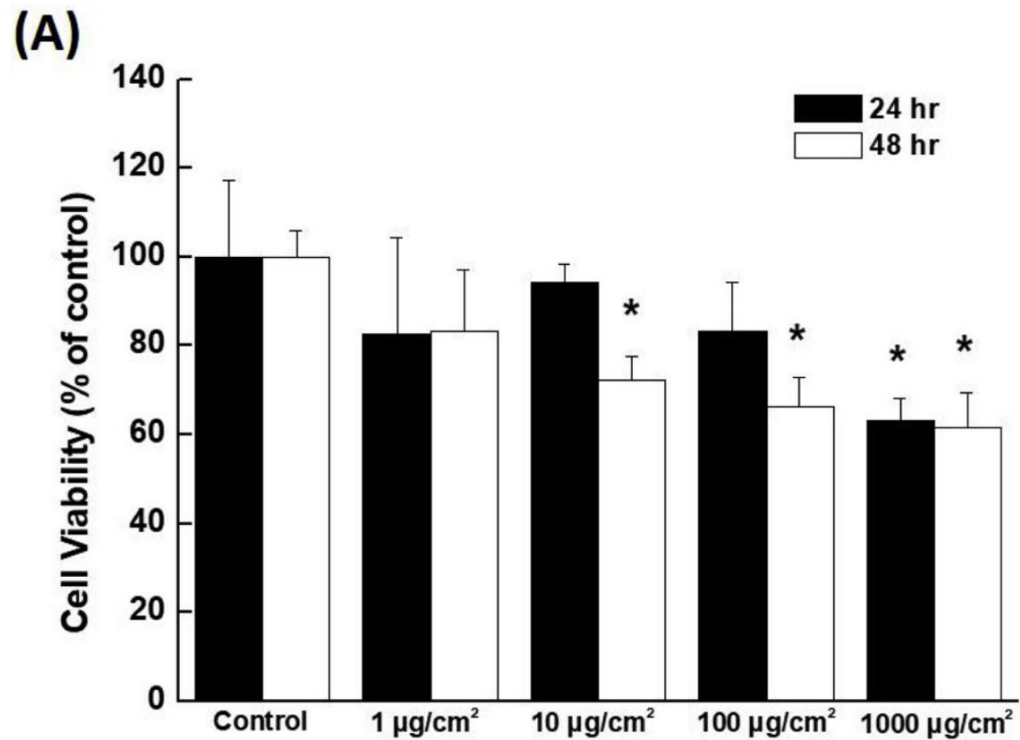


<sup>a</sup> Department of Marine Environmental Engineering, National Kaohsiung University of Science and Technology, Kaohsiung, 81157, Taiwan

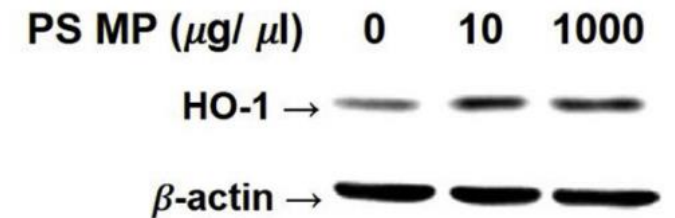
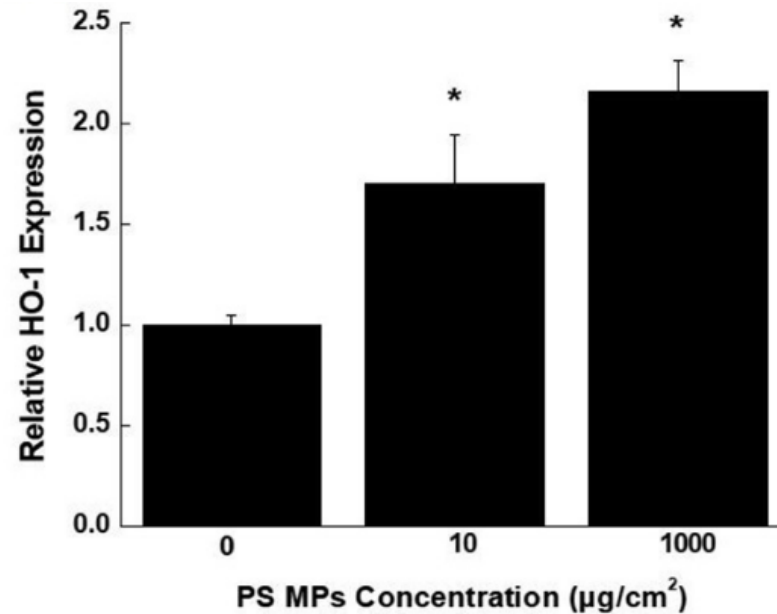
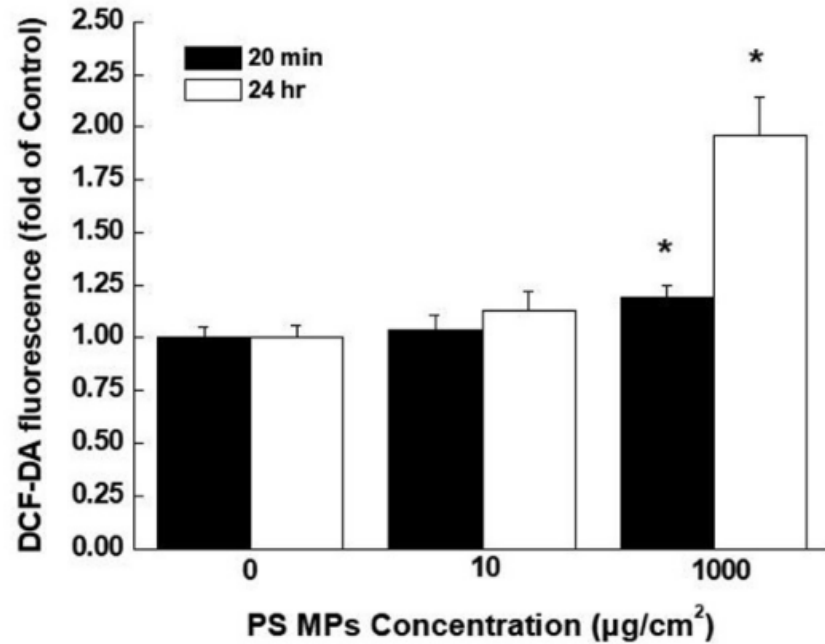
<sup>b</sup> Department of Biotechnology, National Formosa University, Yunlin, 63208, Taiwan

- BEAS-2B (Human lung epithelial cell line) + PS-MP (polystyrene-microplastic)

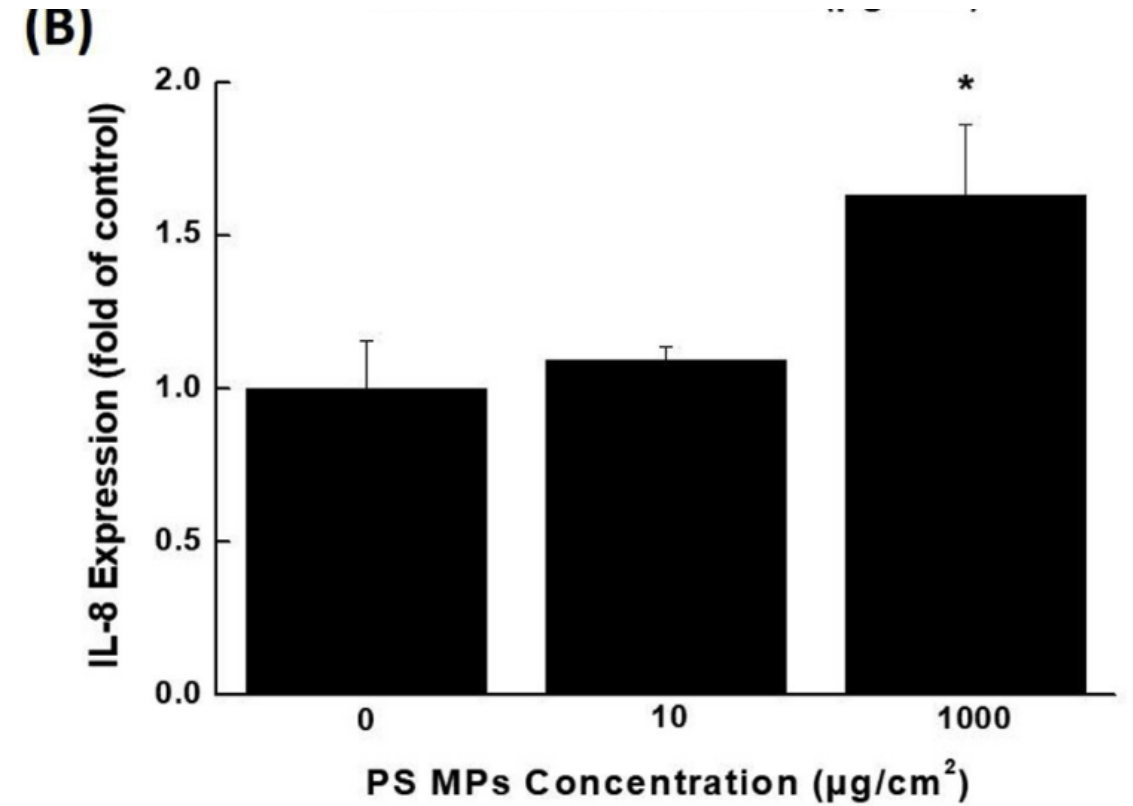
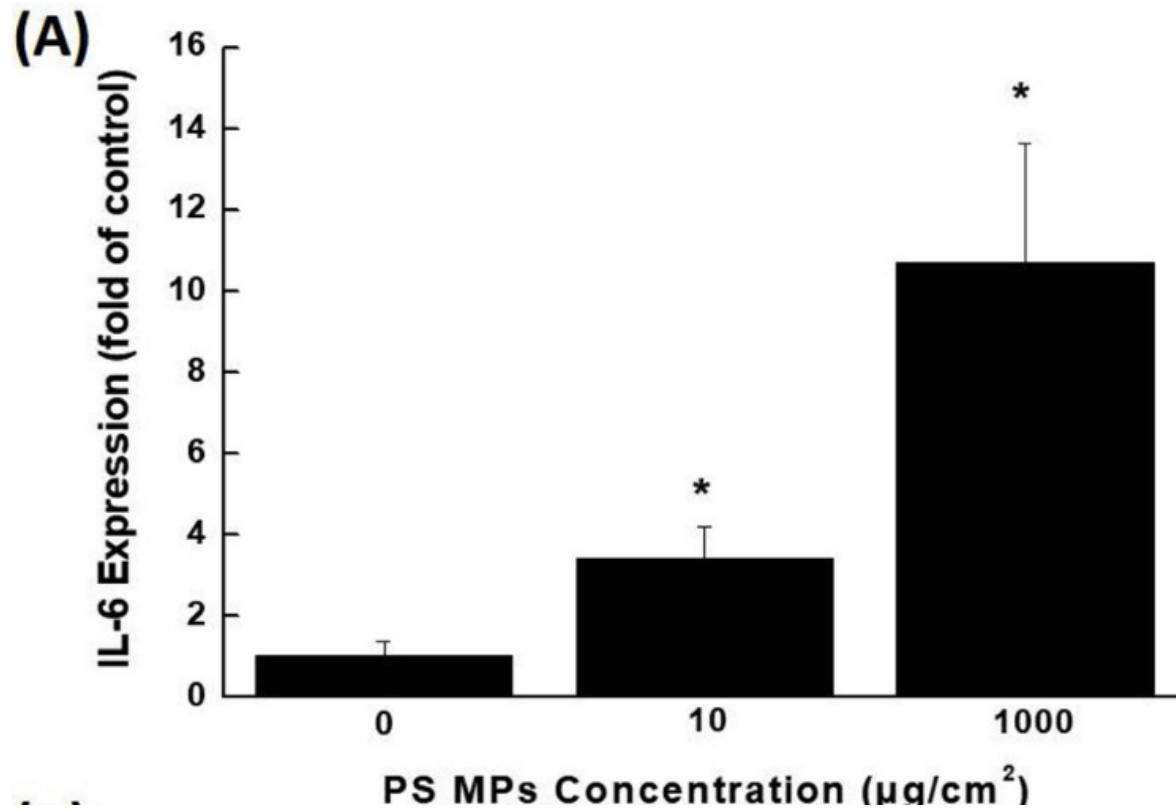
# Cell viability



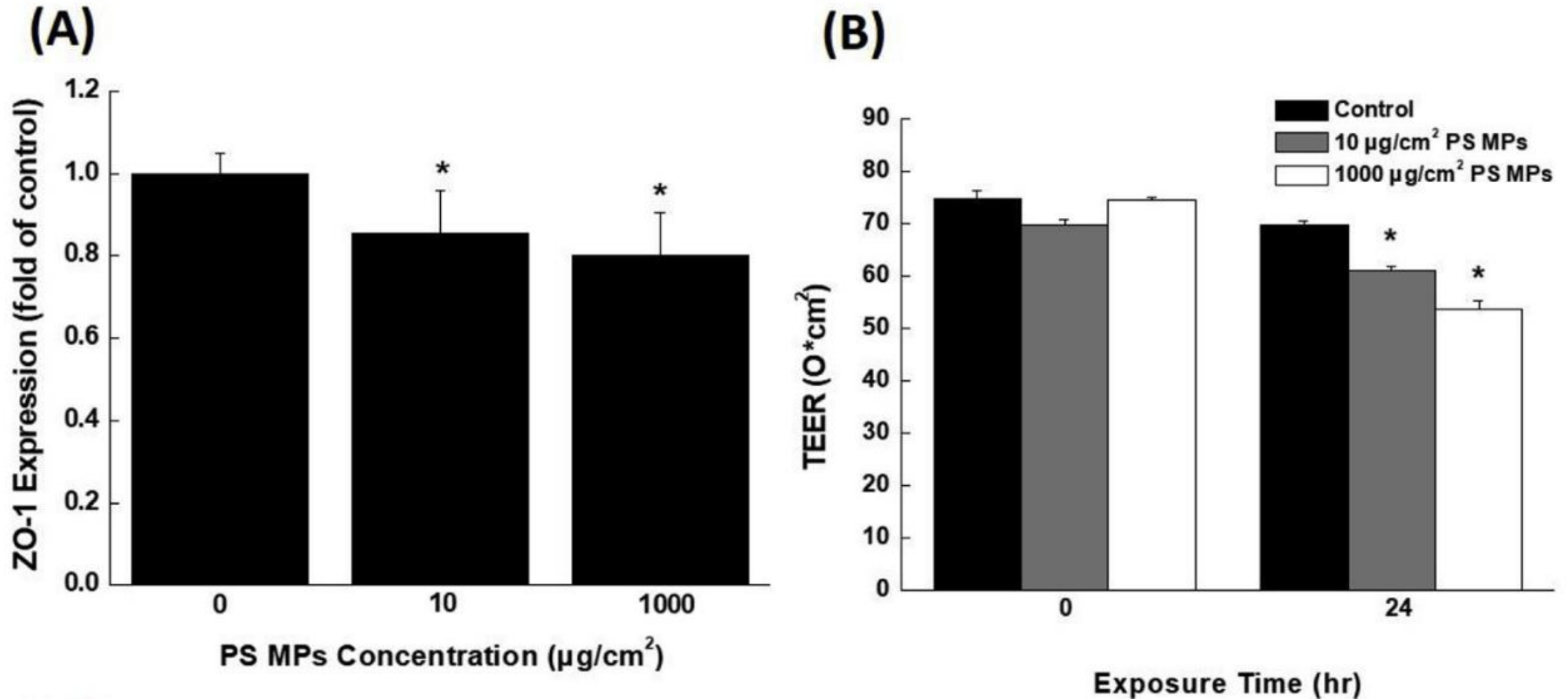
# Oxidative adverse response : HO-1 protein



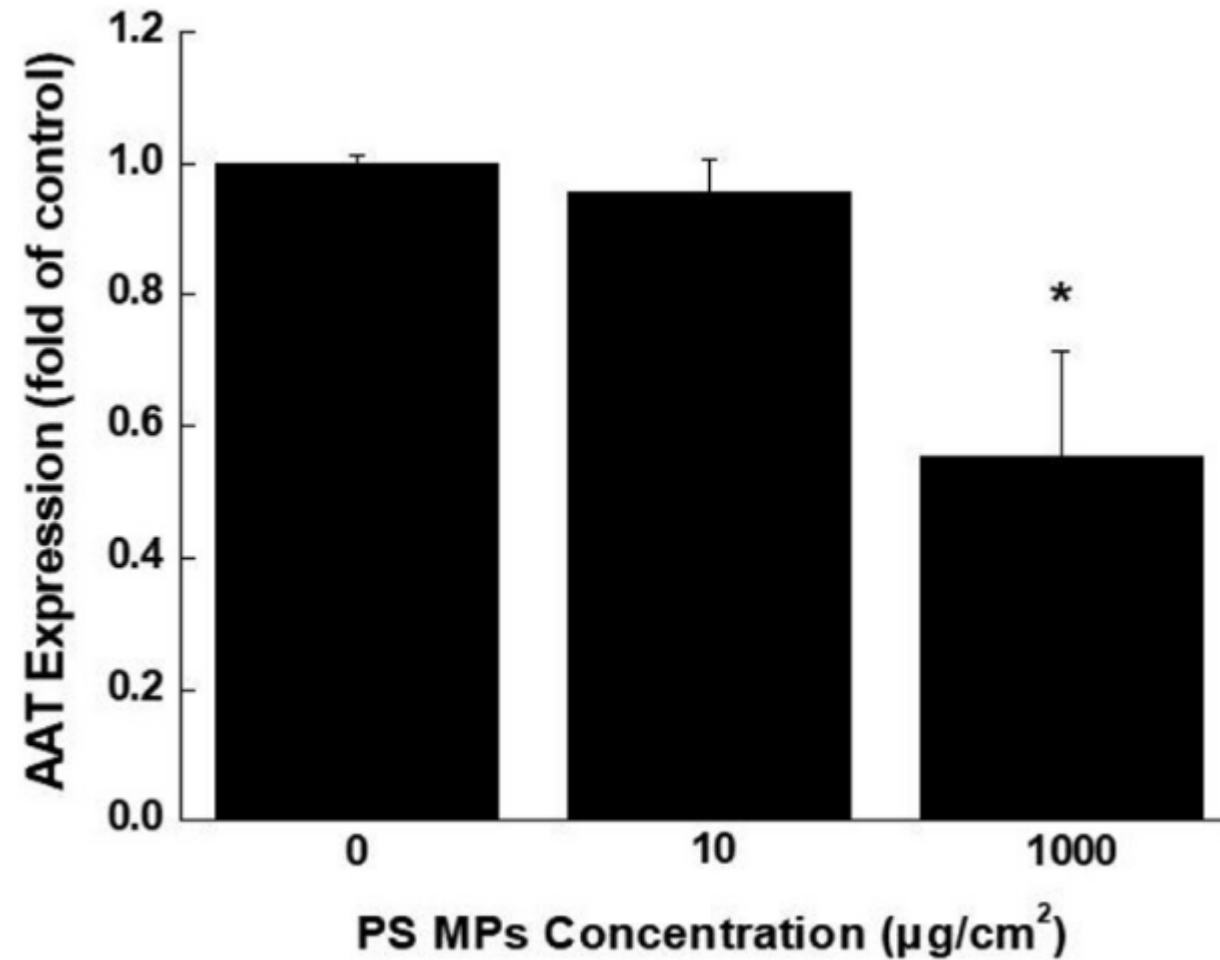
# Pro-inflammatory cytokines



# Epithelial cell barrier integrity biomarker



# Predictive biomarker for COPD



In vivo studies

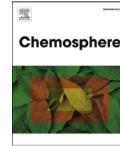


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Inhalation toxicity of polystyrene micro(nano)plastics using modified OECD TG 412

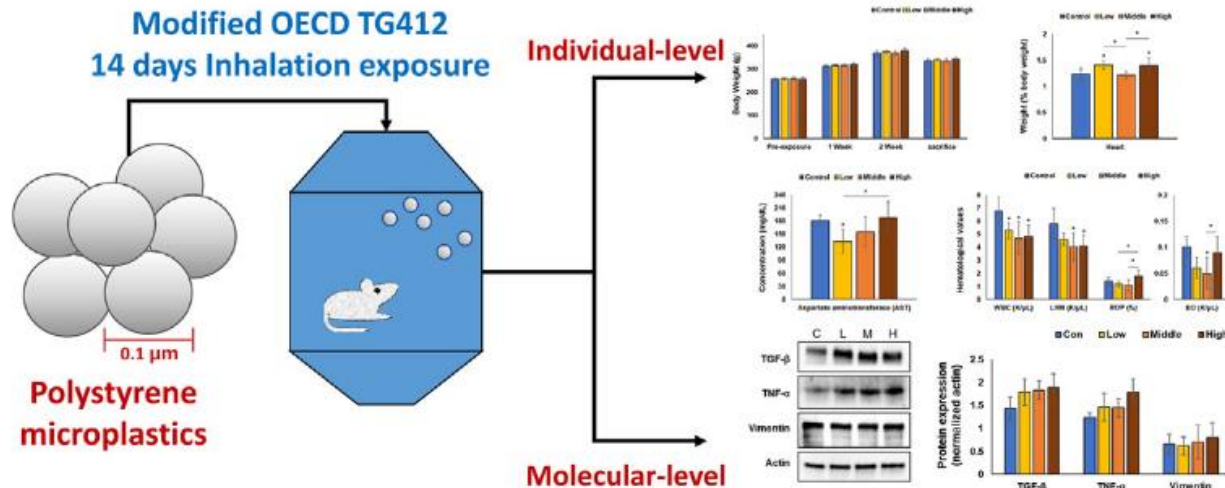
Dongyoung Lim <sup>a,1</sup>, Jaeseong Jeong <sup>a,1</sup>, Kyung Seuk Song <sup>b</sup>, Jae Hyuck Sung <sup>b</sup>, Seung Min Oh <sup>c</sup>, Jinhee Choi <sup>a,\*</sup>

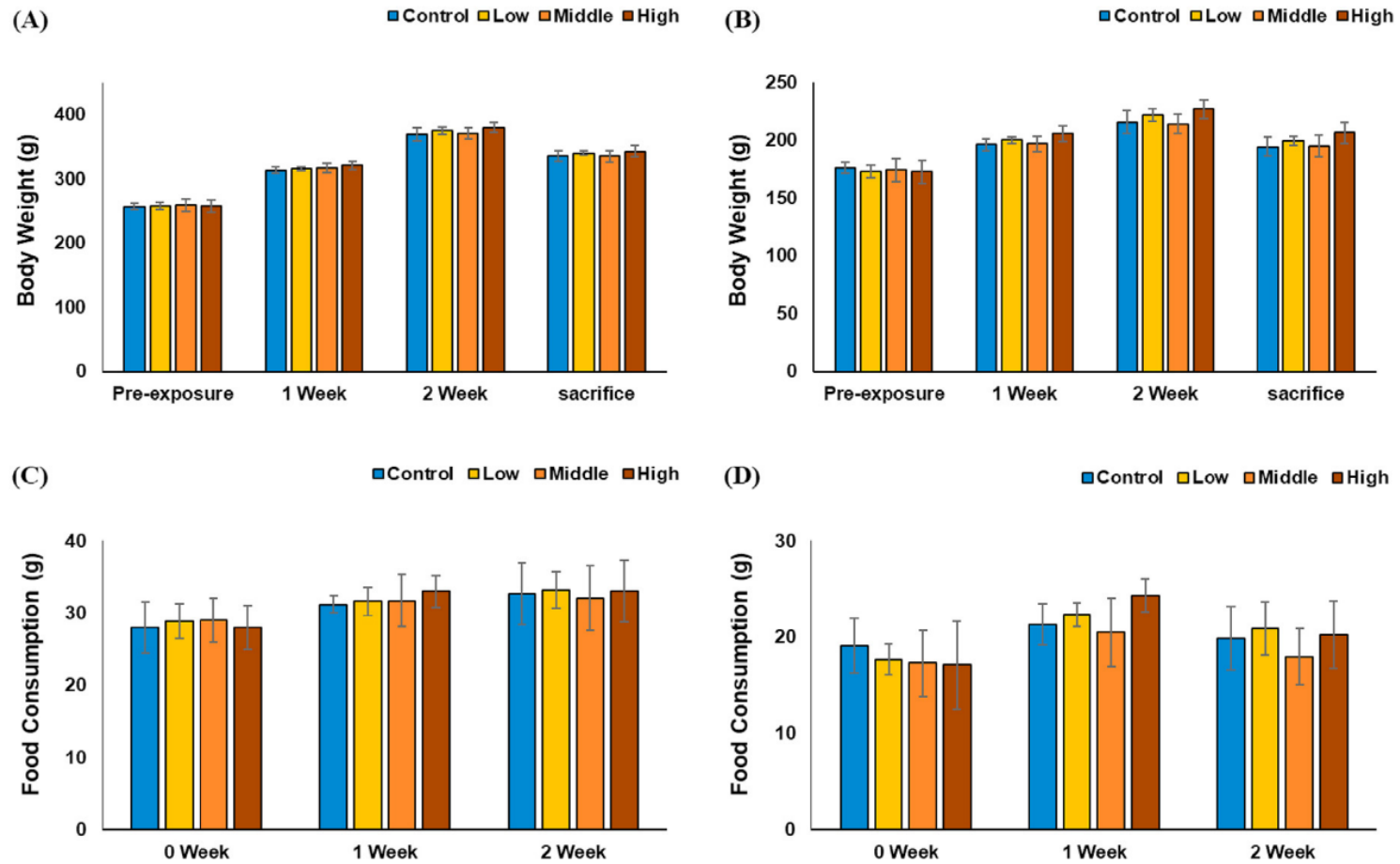
<sup>a</sup> School of Environmental Engineering, University of Seoul, 163 Seoulsiripdae-ro, Dongdaemun-gu, Seoul, 02504, Republic of Korea

<sup>b</sup> Bio Technology Division, Korea Conformity Laboratories, 8, Gaetbeol-ro 145beon-gil, Yeonsu-gu, Incheon, 21999, Republic of Korea

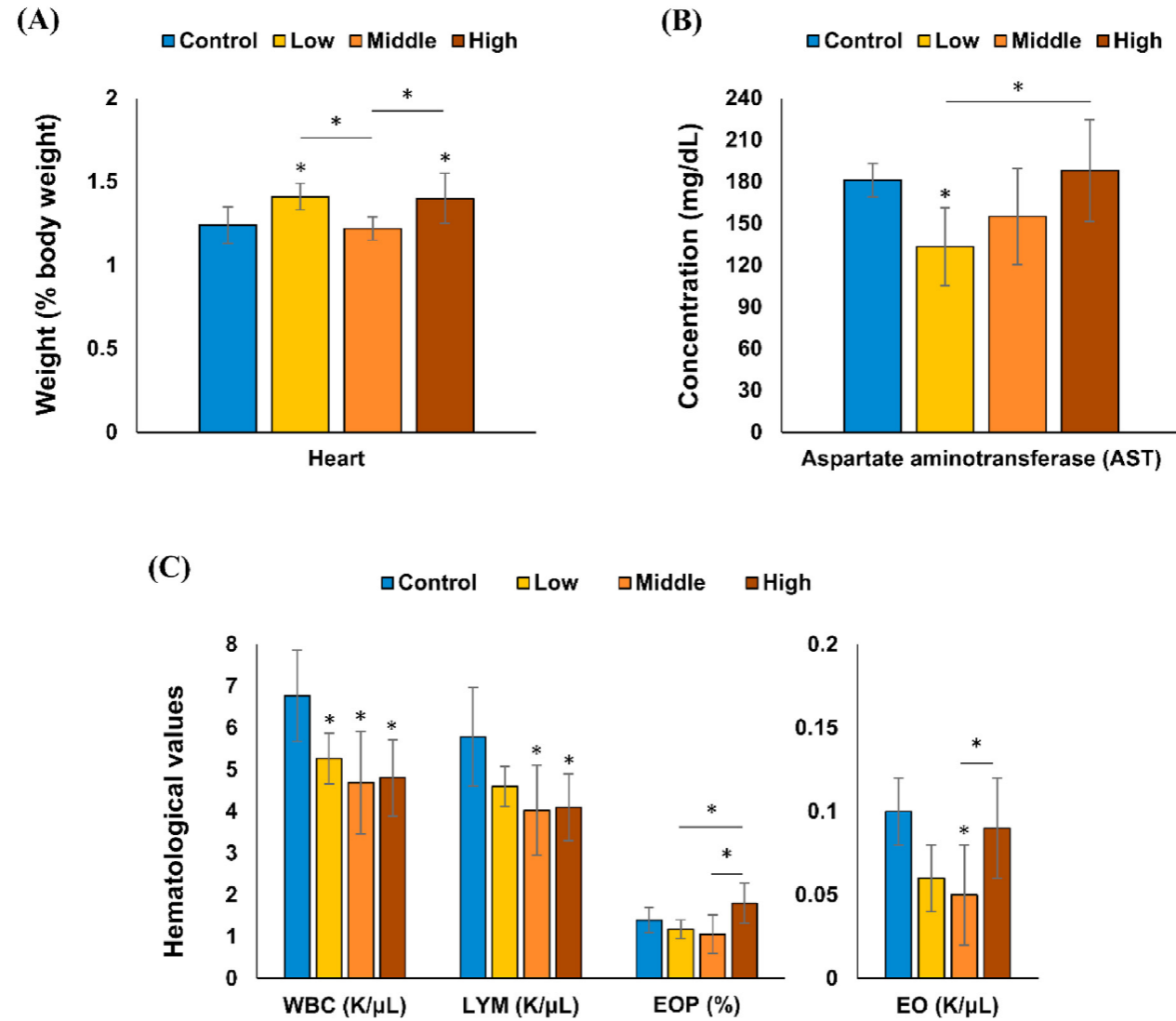
<sup>c</sup> Department of Nanofusion Technology, Hoseo University, 20, Hoseo-ro 79beon-gil, Baebang-eup, Asan, 31499, Republic of Korea

- Six-week-old male and female Sprague-Dawley rats
- Exposed to 3 different concentrations of polystyrene micro(nano)plastics (PSMPs), as well as control
- After 14 days, alterations were observed on several endpoints in physiological, serum biochemical, hematological, and respiratory function markers





**Fig. 3.** Effect of micro(nano)plastics on body-weight (**A:** male, **B:** Female) and food consumption (**C:** male, **D:** Female). Body-weight and food consumption were measured on the rats exposed to micro(nano)plastics for 14 days.



**Fig. 4.** Effect of micro(nano)plastics on organ weight of male rats (A), serum biochemical values of male rats (B) and hematological values of female rats (C). Results were measured on the rats exposed to micro(nano)plastics for 14 days. WBC, white blood cell; LYM, lymphocyte; EOP, percent of eosinophil; EO, eosinophil. \* $p < 0.05$ .

**Table 3**  
Effect of micro(nano)plastics on the pulmonary function of rats after inhalation exposure to micro(nano)plastics for 14 days (n = 5 for each group).

GROUP (mean ± S.D)	Male				Female			
	Control	Low	Middle	High	Control	Low	Middle	High
f <sup>a</sup>	117.48 ± 6.58	115.06 ± 4.99	117.52 ± 5.58	116.01 ± 7.13	95.88 ± 3.83	103.51 ± 11.71	94.33 ± 3.76	<b>102.56 ± 8.39*</b>
TV <sup>b</sup>	1.42 ± 0.26	1.44 ± 0.23	1.37 ± 0.22	1.39 ± 0.32	1.39 ± 0.32	1.40 ± 0.37	1.18 ± 0.13	1.33 ± 0.35
MV <sup>c</sup>	166.46 ± 32.27	164.51 ± 22.66	183.63 ± 55.97	162.03 ± 38.59	133.96 ± 34.04	147.45 ± 50.76	111.73 ± 14.50	137.22 ± 42.11
Ti <sup>d</sup>	0.24 ± 0.02	<b>0.18 ± 0.05*</b>	<b>0.16 ± 0.04*</b>	<b>0.16 ± 0.03*</b>	0.24 ± 0.01	<b>0.16 ± 0.04*</b>	0.21 ± 0.05	0.21 ± 0.03
Te <sup>e</sup>	0.27 ± 0.02	0.29 ± 0.06	0.27 ± 0.07	0.27 ± 0.05	0.43 ± 0.01	<b>0.30 ± 0.08*</b>	0.38 ± 0.06	<b>0.33 ± 0.02*</b>
PIF <sup>f</sup>	12.74 ± 8.10	18.36 ± 6.22	21.46 ± 14.83	18.91 ± 10.35	13.71 ± 9.24	16.51 ± 5.29	14.35 ± 6.32	13.70 ± 6.38
PEF <sup>g</sup>	11.29 ± 4.62	13.30 ± 6.63	14.75 ± 9.37	13.36 ± 9.38	8.52 ± 4.08	9.30 ± 3.36	9.52 ± 4.42	8.67 ± 4.07

\*: P < 0.05 vs. control group.

<sup>a</sup> Frequency(BPM).

<sup>b</sup> Tidal Volume(ml).

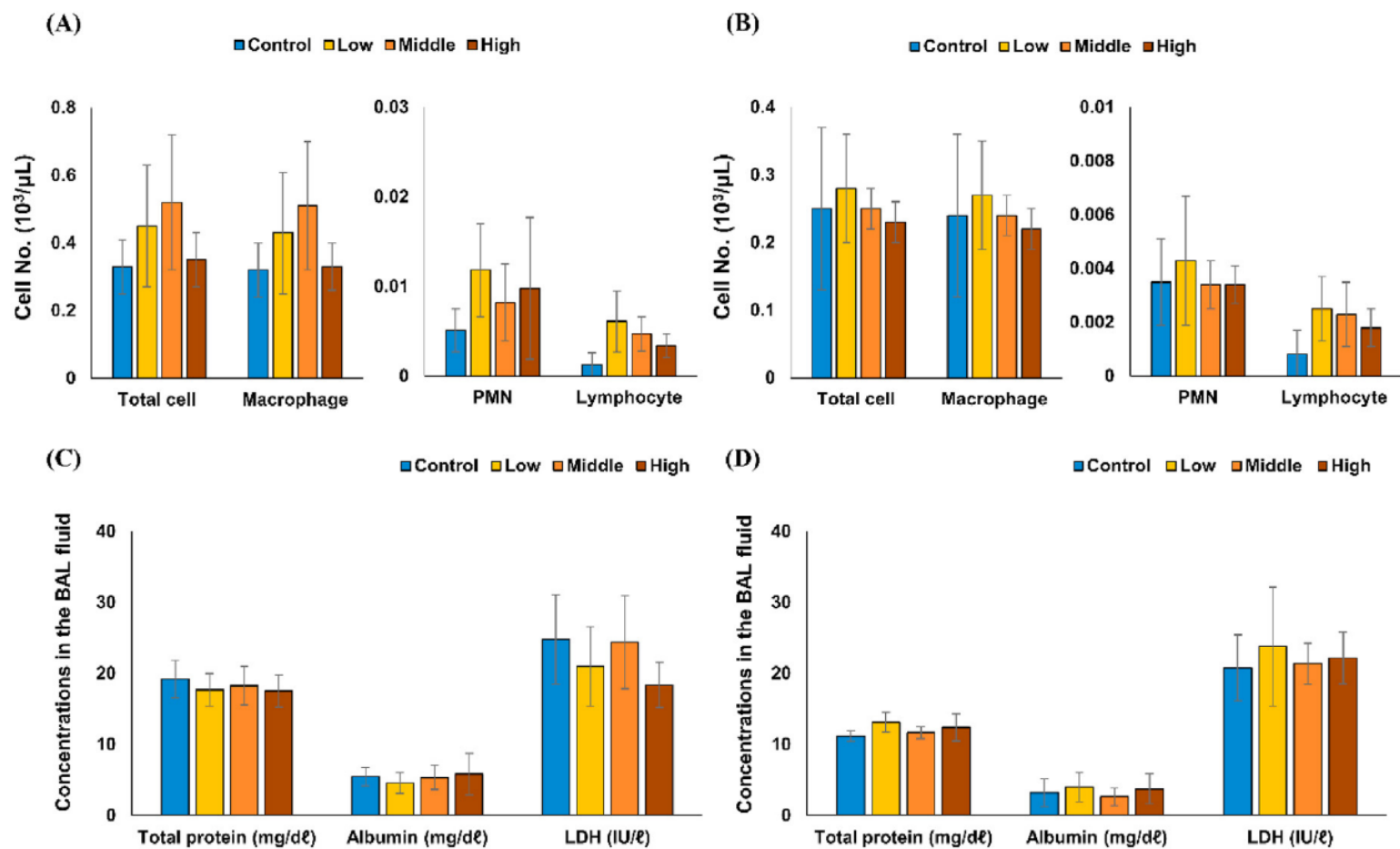
<sup>c</sup> Minute Volume(ml/min).

<sup>d</sup> Inspiratory Time(sec).

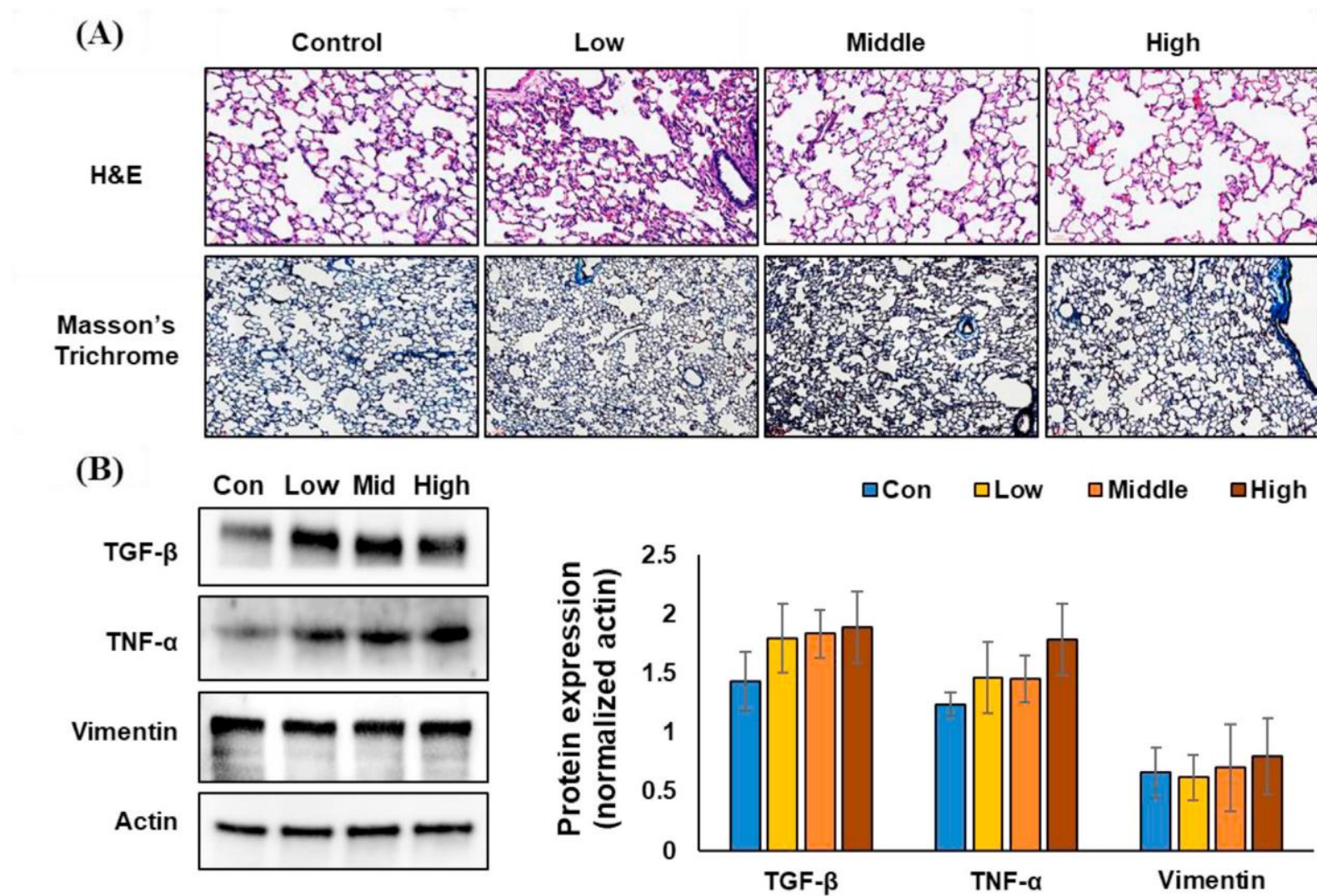
<sup>e</sup> Expiratory Time(sec).

<sup>f</sup> Peak Inspiratory Flow(ml/sec).

<sup>g</sup> Peak Expiratory Flow(ml/sec).



**Fig. 5.** Effect of micro(nano)plastics on cell number in bronchoalveolar lavage (BAL) fluid (**A**: male, **B**: female) and inflammatory markers in BAL fluid (**C**: male, **D**: female). BAL cell number and levels of inflammatory markers were measured after 14 days of inhalation exposure of micro(nano)plastics.



**Fig. 6.** Histopathology of lung (right) tissue (A), and protein expression of TGF- $\beta$ , TNF- $\alpha$ , and vimentin (B). Histological analysis of lung tissue was performed using Hematoxylin-Eosin and Masson's trichrome staining. Lysates of lung tissue (control, low-, middle- and high-concentration) were used for western blotting with indicated antibodies (TGF- $\beta$ , TNF- $\alpha$ , and vimentin). The Western blot band intensities were measured with Image Lab™. TGF- $\beta$ , TNF- $\alpha$ , and vimentin protein levels were normalized to  $\beta$ -actin levels.

**Table 4**

Summary of inhalation toxicity of polystyrene micro(nano)plastics (PSMPs).

Markers	Parameters	Results
General physiology	Body weight	No change
	Food consumption	No change
	Organ weight	Heart weight was increased in male rats
Pulmonary pathology	Serum biochemistry	AST level was decreased in male rats
	Hematology	WBC, LYM, EO level were decreased in female rats
	Lung function	Inspiratory time was decreased in male rats Respiratory frequency was increased, and inspiratory time and expiratory time were decreased in female rats
	BAL cell count	No change
	Collagen	No change
	Inflammation	Increase



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## Journal of Hazardous Materials

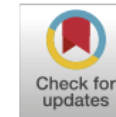
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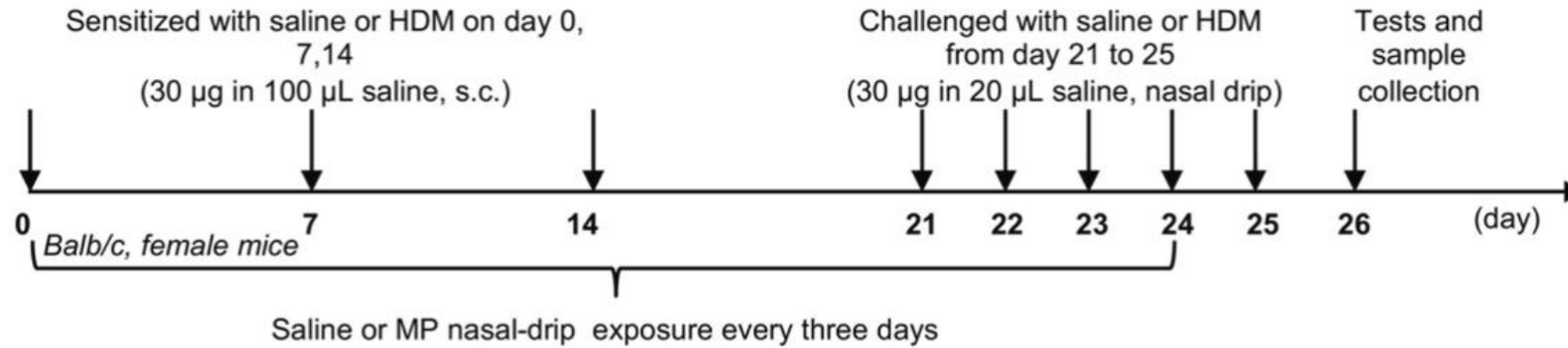
Research Paper

### Detrimental effects of microplastic exposure on normal and asthmatic pulmonary physiology

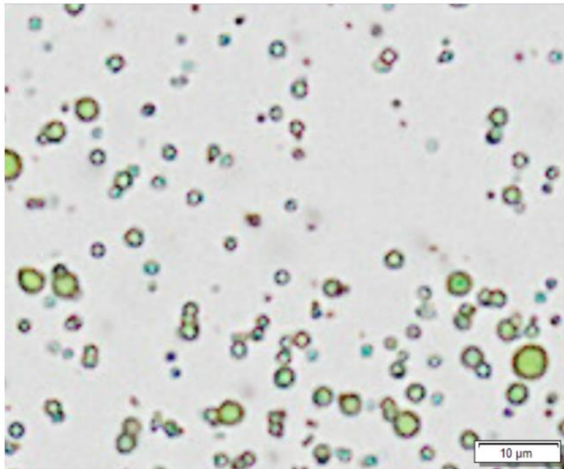
Kuo Lu<sup>a,1</sup>, Keng Po Lai<sup>b,g,1</sup>, Tobias Stoeger<sup>c</sup>, Shuqin Ji<sup>d</sup>, Ziyi Lin<sup>d</sup>, Xiao Lin<sup>e</sup>, Ting Fung Chan<sup>e</sup>, James Kar-Hei Fang<sup>f</sup>, Michael Lo<sup>g</sup>, Liang Gao<sup>d</sup>, Chen Qiu<sup>a</sup>, Shanze Chen<sup>a</sup>, Guobing Chen<sup>a,h</sup>, Lei Li<sup>d,\*</sup>, Lingwei Wang<sup>a,\*\*</sup>



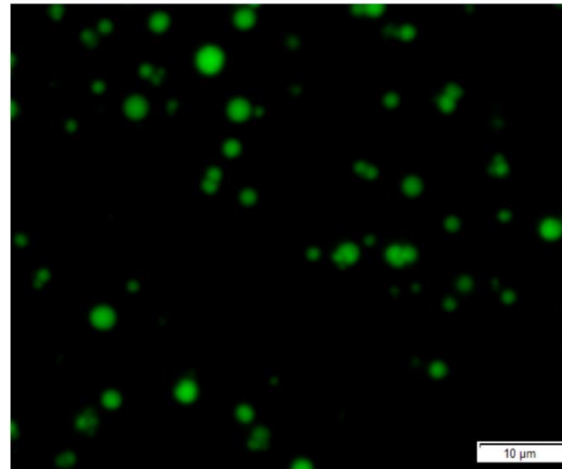
## A Allergic asthma model and MP treatment

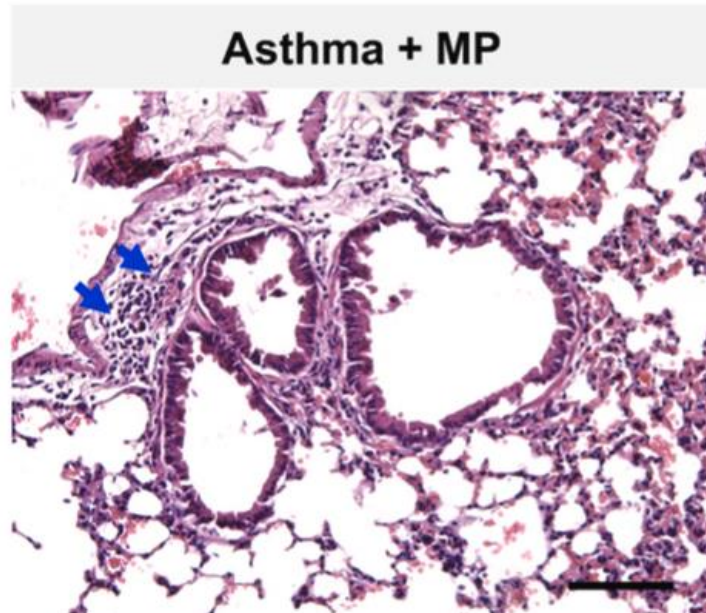
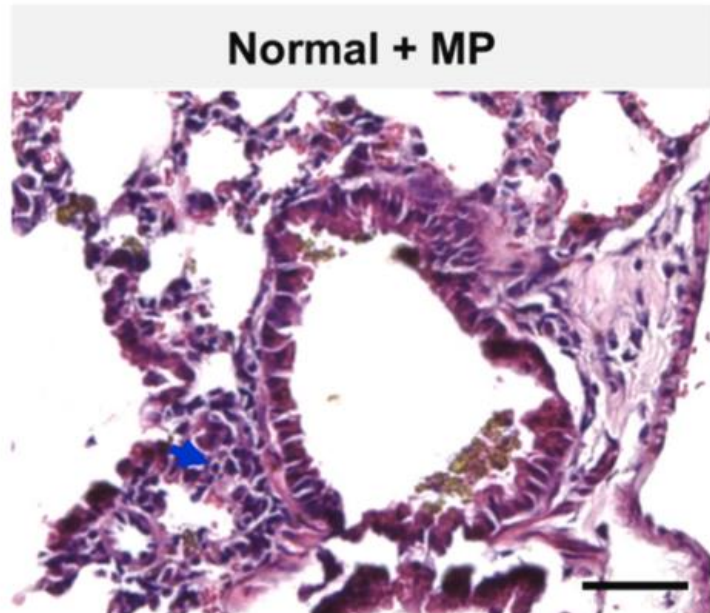
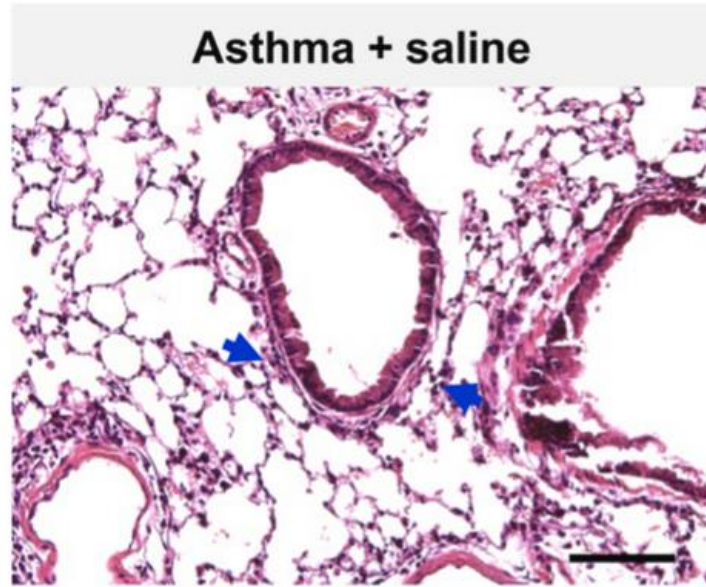
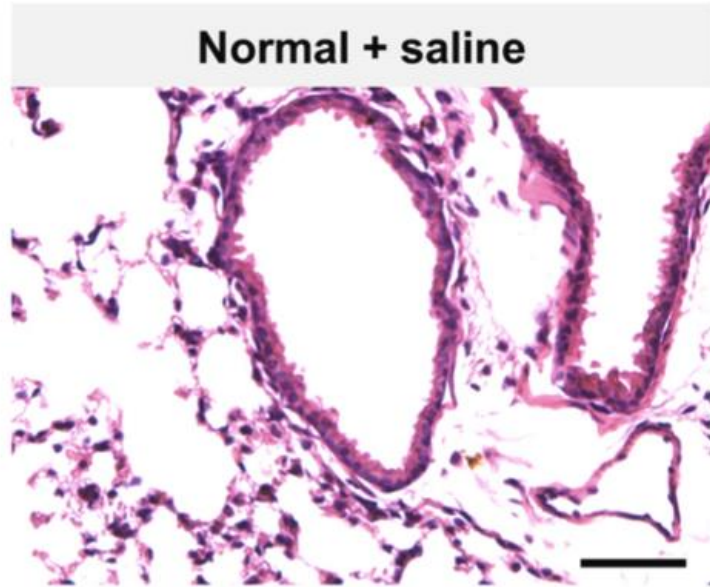


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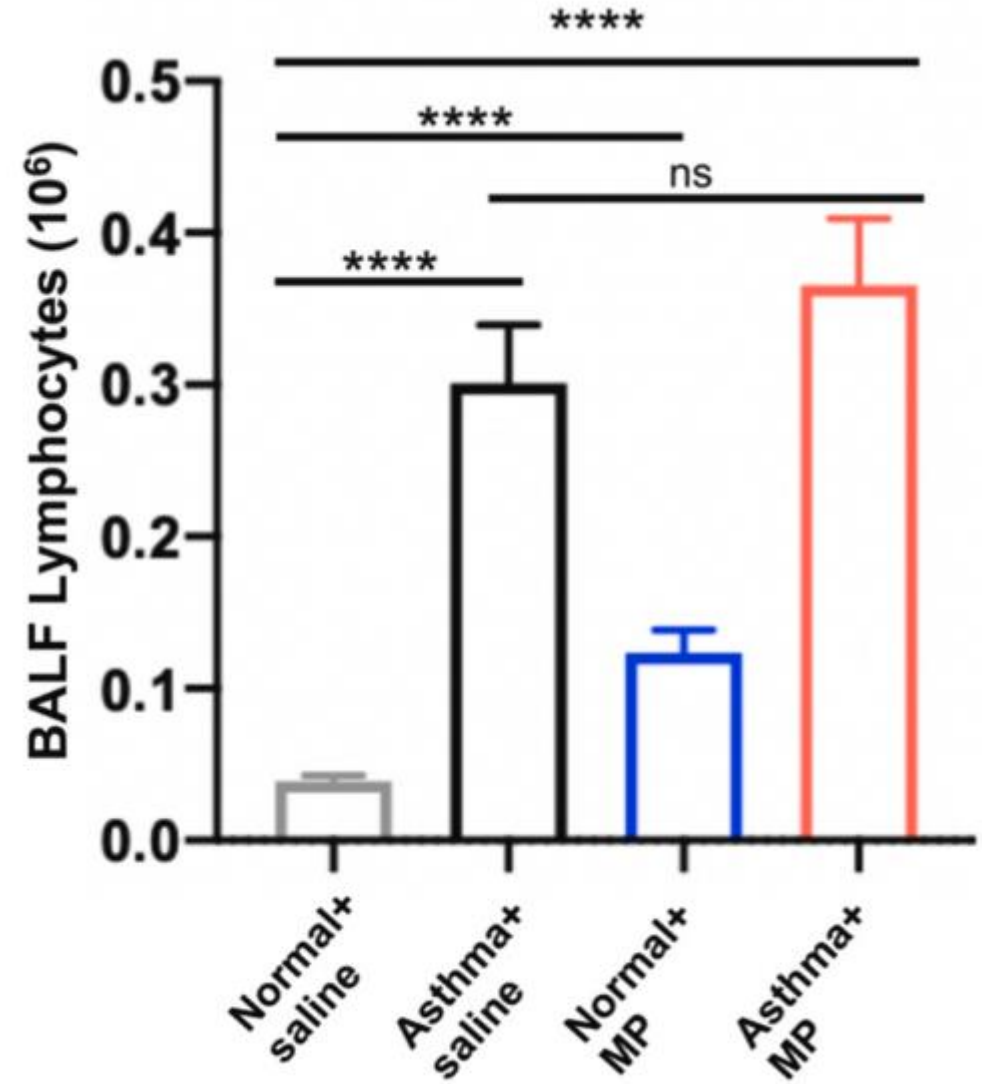
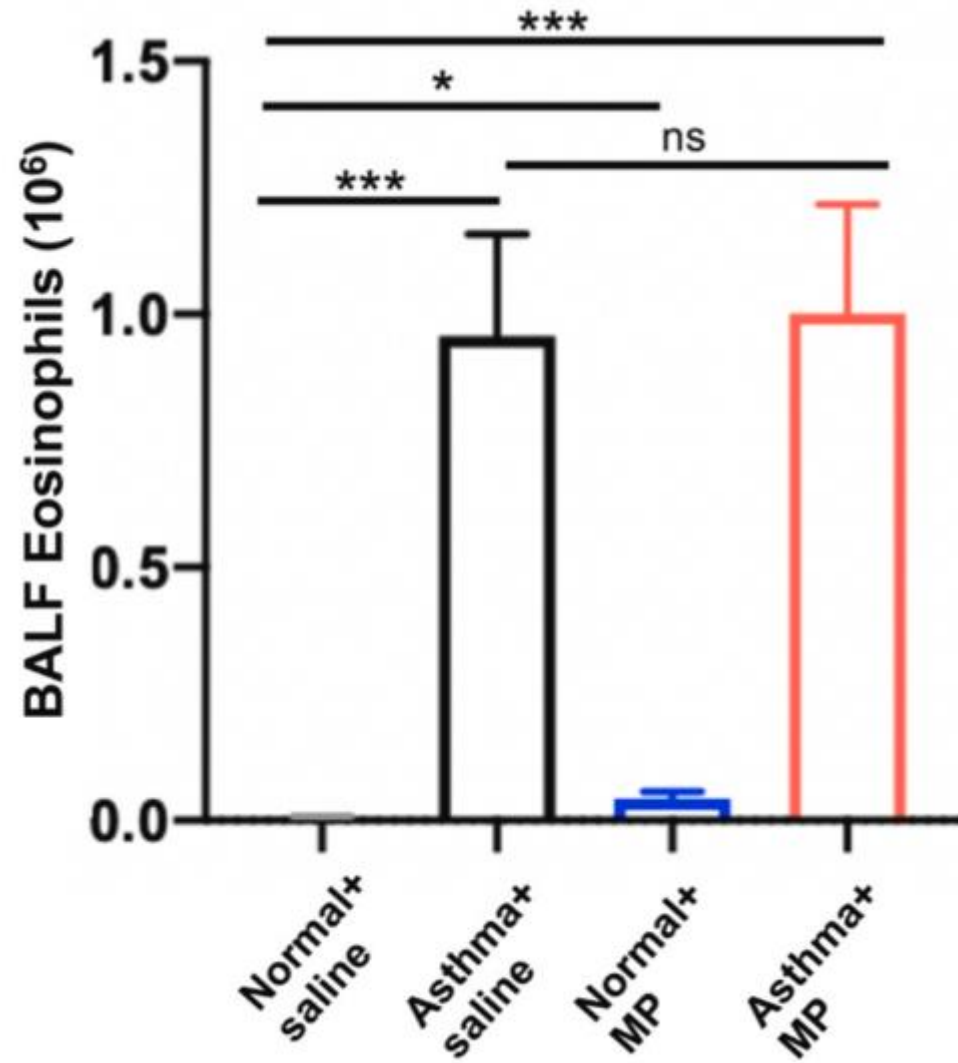


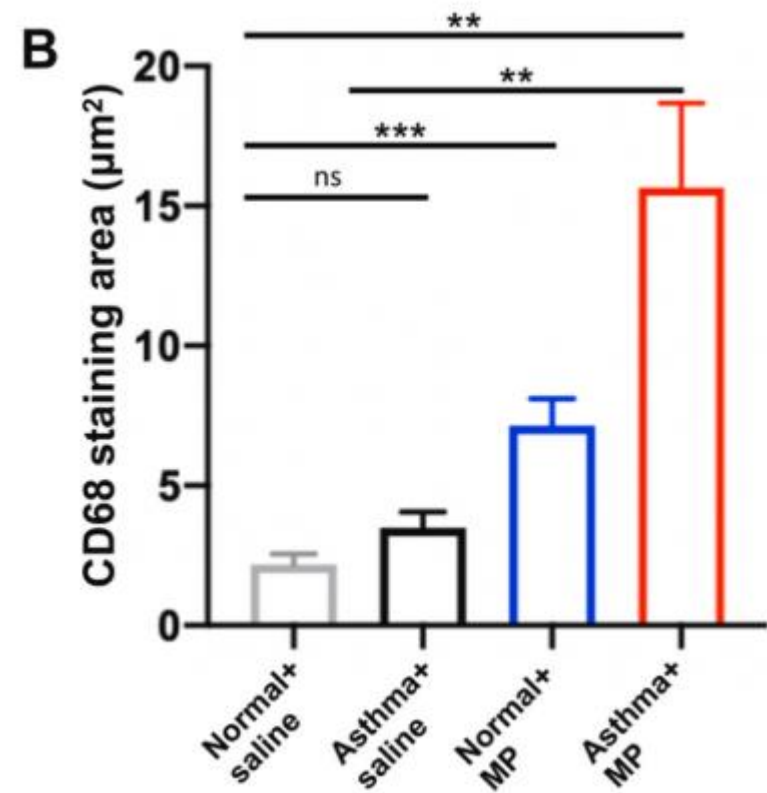
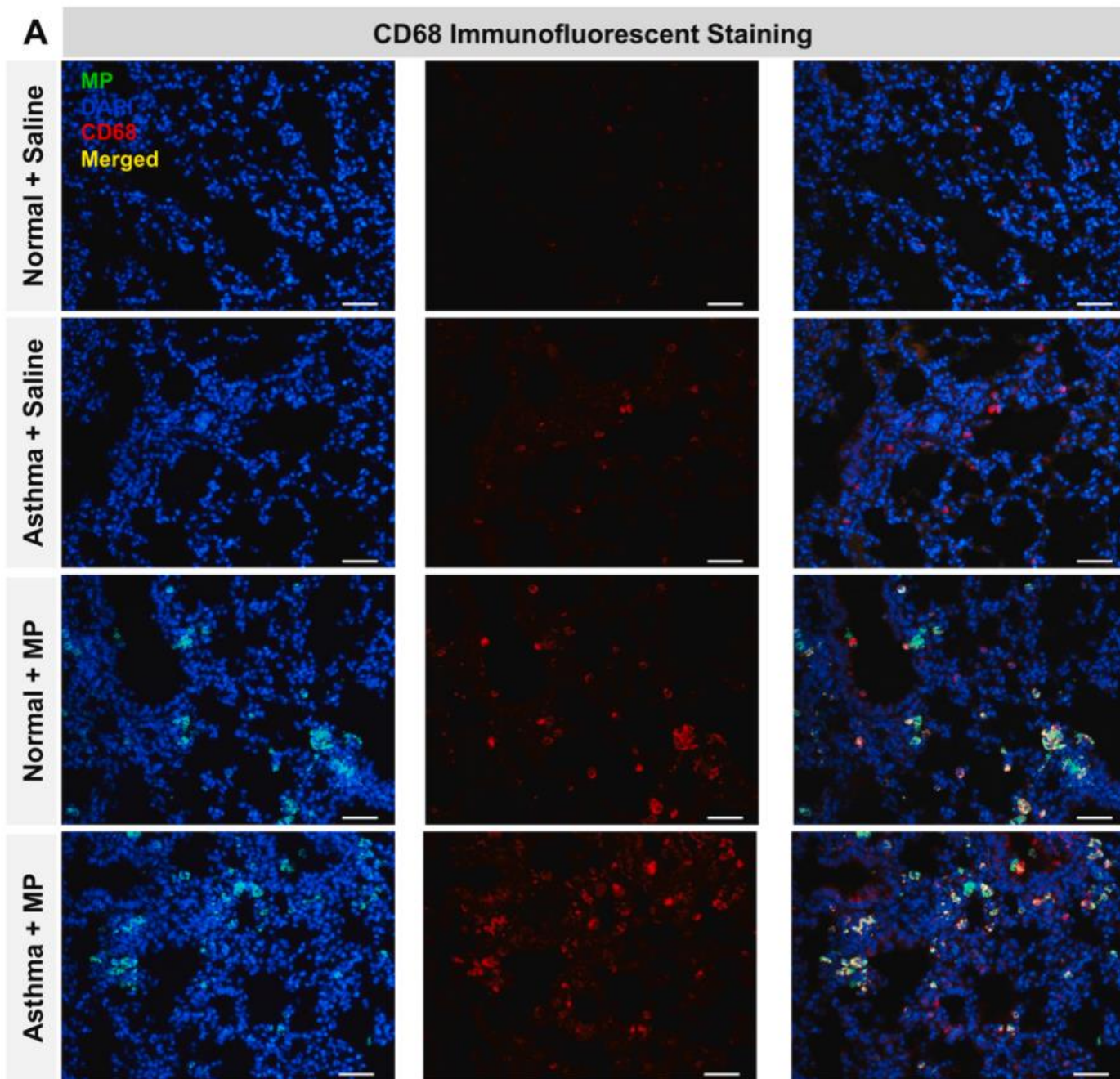
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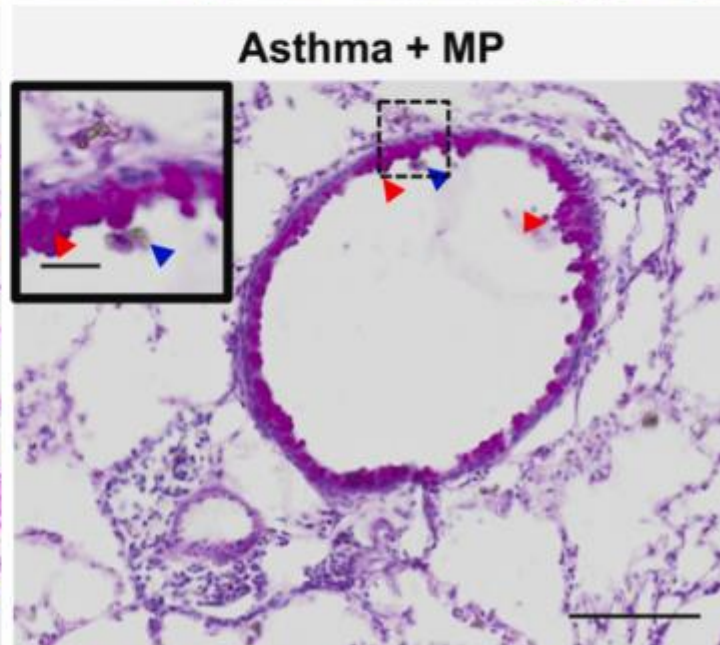
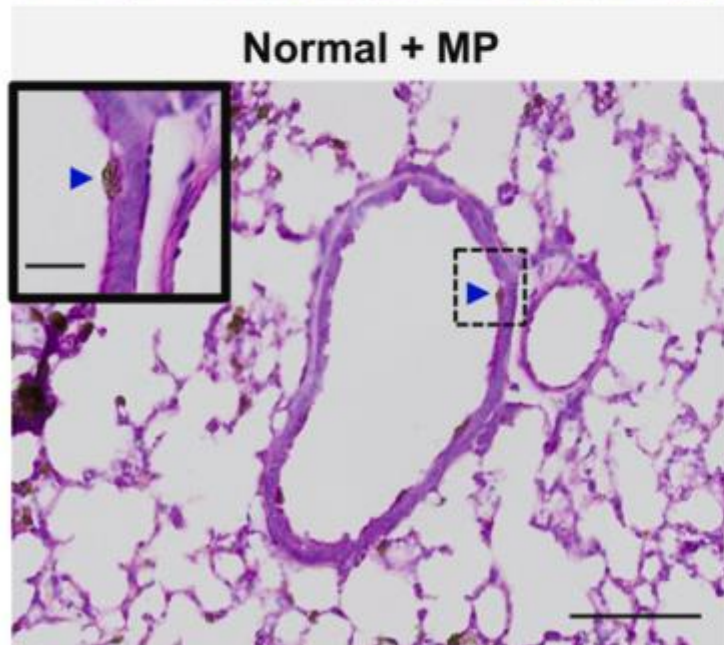
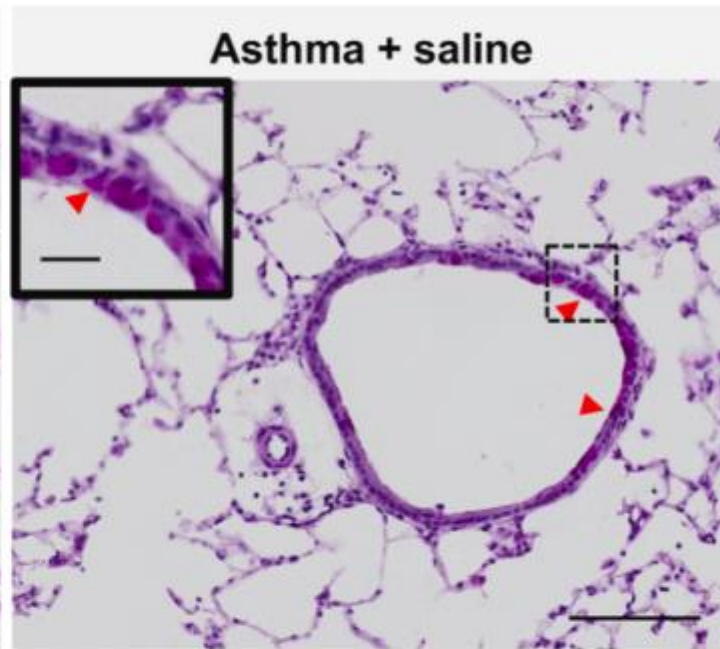
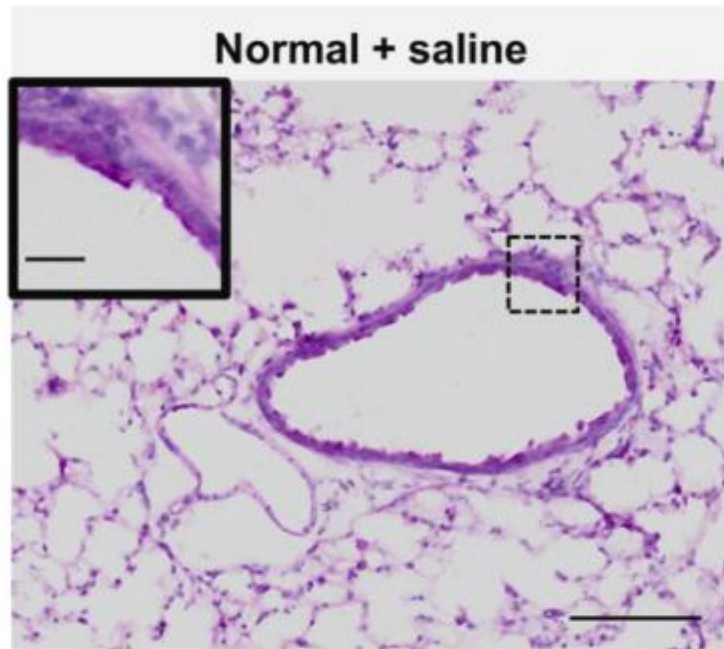


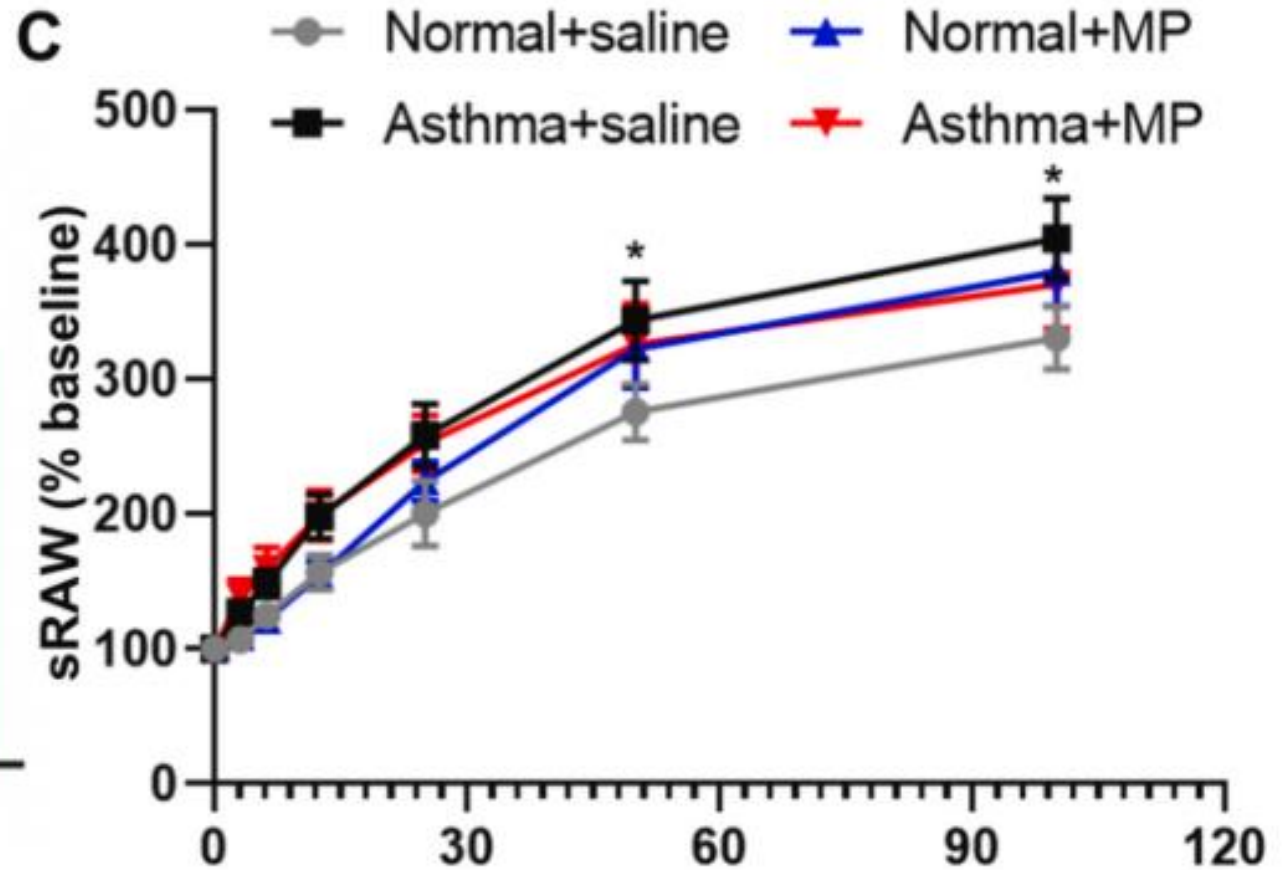
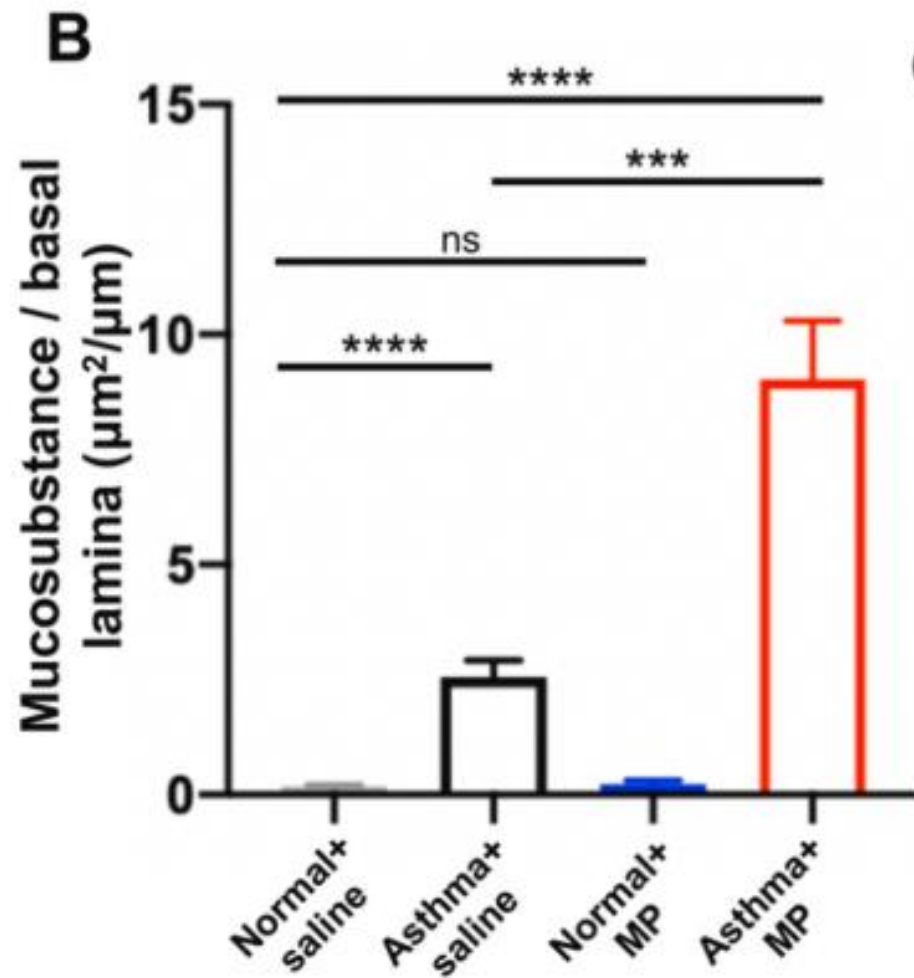


C









(\*normal + saline vs Asthma + MP, analyzed with two-way ANOVA).

- MP exposure caused
  - pulmonary inflammatory cell infiltration,
  - broncho-alveolar macrophage aggregation,
  - increased TNF- $\alpha$  level in bronchoalveolar lavage fluid (BALF)
- MP exposure also affected asthma symptoms
  - increasing mucus production
  - inflammatory cell infiltration
  - notable macrophage aggregation.

# In summary,

- Microplastic everywhere
- Maybe an important PM (particle matter)
- Clue from old epidemiologic studies
  - MP may induce lung fibrosis, granuloma, lung cancer
- Found in human blood, sputum, urine, lung tissue
- In vitro studies
  - MP induces cell death, inflammation, oxidative stress and decrease epithelial integrity
  - Maybe associated with COPD
- In vivo studies
  - Associated with lung inflammation and macrophage aggregation
- Future studies are needed to conclude hazardous effect of MP in human health.