



Proceeding Paper

Air Pollution, Its Health Effects on Residents of Patna and Air Quality Forecasting of The City[†]

Krishna Neeti¹, Mohammad Minhaj Faisal¹ and Reena Singh², *

- ¹Research Scholar, Department of Civil Engineering, National Institute of Technology Patna, Patna, Bihar 800005, India; mohammadf.pg21.ce@nitp.ac.in (M.M.F); krishnan.phd19.ce@nitp.ac.in (K.N.)
- ²Assistant Professor, Department of Civil Engineering, National Institute of Technology Patna, Patna, Bihar 800005, India;
- * Correspondence: reena@nitp.ac.in; Tel.: +91-9006463991
- [†]Presented at the the 6th International Electronic Conference on Atmospheric Sciences (ECAS 2023), 15 Oct–30 Oct 2023; Available online: https://ecas2023.sciforum.net/

Abstract: Air pollution is a serious issue in most parts of Bihar, especially in its capital city, Patna. The air quality in Patna has significantly worsened due to factors like rapid urbanization, increased traffic, and various natural and human-related causes. This decline in air quality has led to several negative health effects. In light of this, the aim of this study was to examine how air pollution affects the long-term health of Patna's residents, taking into account age and exposure time as important factors. We gathered data from one busy intersection in Patna, specifically Danapur. Health effects from air pollution was collected from the residents by a formatted questionnaire. To analyse the relationship between age, exposure time, and the health effects reported by the participants, we used a statistical test called the chi-square test of independence. The findings of the study revealed a clear link between age, exposure time, and the health status of the participants. We concluded that older individuals and those with longer exposure times faced a higher risk associated with the increasing air pollution levels. This study provides a foundation for raising awareness among both authorities and the general public of the adverse health impacts associated with declining air quality, emphasizing the urgency in taking appropriate measures to counter this challenge.

Keywords: Air Pollution; Short Term effects; Long Term Effects; Chi Square Test; Extrapolation; Air Quality Forecasting

1. Introduction

Bihar's capital city Patna, India particularly, bears the brunt of air pollution, a burgeoning concern across numerous regions worldwide [1]. Several factors, including rapid urbanization, an increase in vehicular traffic, and a blend of natural and anthropogenic sources, have resulted in significant deterioration of Patna's air quality [2]. Multifaceted challenges have been posed as a result of deteriorating air quality, especially in the context of public health. The purpose of this study was to examine the complex relationship between air pollution and well-being in Patna, especially regarding the effects over long periods of time, taking age and exposure period into account [3]. The ambient air conditions were reflected in the data collected from the bustling district of Danapur Cant. within Patna. Through a meticulously designed questionnaire, we obtained firsthand accounts from the local population regarding the health effects associated with air pollution, in addition to objective data. A rigorous statistical framework was used to explore the intricate relationship between age, exposure duration, and health implications [4]. Among the analytical tools available, the chi-square test of independence proved most effective in establishing patterns and correlations within the dataset. Based on the results of this comprehensive analysis, it was revealed that extended periods of exposure to high

Citation: To be added by editorial staff during production.

Academic Editor: Firstname Lastname

Published: date



Copyright: © 2023 by the authors. Submitted for possible open access publication under the terms and conditions of the Creative Commons Attribution (CC BY) license (https://creativecommons.org/license s/by/4.0/).

pollution levels are connected to advancing age of individuals, further exposing their heightened vulnerability to health problems. There is an imperative need for strategic intervention, highlighting an imperative step towards resolving this complex challenge and enhancing Patna's well-being.

2. Method

The area selected for our study was Marshall Bazaar at Danapur cantt. The area was so chosen as they usually had high vehicular density and had markets in and around it. A structured questionnaire was prepared which was then used to collect data from individuals like auto rickshaw drivers, shop owners, vendors etc. to assess the short term and long-term effects of air pollution on their health.

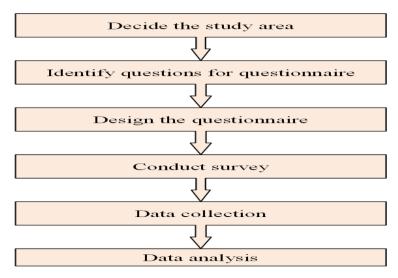


Figure 1. Flowchart used in the study.

3. Survey Data

Survey data is collected using face to face interview method. The questionnaire is based on asking age, exposure time and the health problems they are facing. Health problems are of 2 types – Short term diseases which include Headache, coughing, sneezing, ENT irritation etc. while long term diseases include Asthma, Bronchitis, Lung Cancer and other respiratory problems.

Table 1. Occurrences of diseases	in people owing to Air	r pollution with their age as variable
----------------------------------	------------------------	--

Headache							
Age Group	Never	Rare	Often	Frequent	Always	Total People surveyed	
15-30	4	6	7	6	8	31	
31-45	9	5	3	8	7	32	
46-60	3	2	2	10	8	25	
>60	1	3	6	8	11	29	
Total	17	16	18	32	34	117	
	ENT						
Age Group	Never	Rare	Often	Frequent	Always	Total People surveyed	
15-30	5	6	5	9	6	31	
31-45	7	4	6	8	7	32	
46-60	6	4	2	4	9	25	
>60	6	2	5	6	10	29	
Total	24	16	18	27	32	117	

Never Rare Often Frequent Always Total People surveyed	Respiratory Problem								
31-45	Age Group	Never	Rare				Total People surveyed		
A6-60	15-30	4	4	7	8	8	31		
>60 3 4 5 9 8 29 Total 19 16 19 30 33 117 Asthma Age Group Never Rare Often Frequent Always Total People surveyed 15-30 4 4 5 10 8 31 31-45 6 7 6 9 4 32 46-60 5 5 3 6 6 25 >60 5 3 5 7 9 29 Total 20 19 19 32 27 117 Bronchitis Age Group Never Rare Often Frequent Always Total People surveyed 15-30 14 11 4 2 0 31 31-45 15 9 5 3 0 32 46-60 6 5 7 <t< td=""><td>31-45</td><td>6</td><td>6</td><td>4</td><td>7</td><td>9</td><td>32</td></t<>	31-45	6	6	4	7	9	32		
Total 19 16 19 30 33 117 Asthma Age Group Never Rare Often Frequent Always Total People surveyed 15-30 4 4 5 10 8 31 31-45 6 7 6 9 4 32 46-60 5 5 3 6 6 25 >60 5 3 5 7 9 29 Total 20 19 19 32 27 117 Bronchitis Age Group Never Rare Often Frequent Always Total People surveyed 15-30 14 11 4 2 0 31 31-45 15 9 5 3 0 32 46-60 6 5 7 7 0 25 >60 10 8 6	46-60	6	2	3	6	8	25		
Age Group Never 15-30 Rare 4 Often 4 Frequent 5 Always 4 Total People surveyed 3 15-30 4 4 5 10 8 31 31-45 6 7 6 9 4 32 46-60 5 5 3 6 6 25 >60 5 3 5 7 9 29 Total 20 19 19 32 27 117 Bronchitis Age Group Never Rare Often Frequent Always Total People surveyed 15-30 14 11 4 2 0 31 31-45 15 9 5 3 0 32 46-60 6 5 7 7 0 25 >60 10 8 6 5 0 29 Total 45 33 22 17 0	>60	3	4	5	9	8	29		
Age Group Never Rare Often Frequent Always Total People surveyed 15-30 4 4 5 10 8 31 31-45 6 7 6 9 4 32 46-60 5 5 3 6 6 25 >60 5 3 5 7 9 29 Total 20 19 19 32 27 117 Bronchitis Age Group Never Rare Often Frequent Always Total People surveyed 15-30 14 11 4 2 0 31 31-45 15 9 5 3 0 32 46-60 6 5 7 7 0 25 >60 10 8 6 5 0 29 Total 45 33 22 17 0 117<	Total	19	16	19	30	33	117		
15-30					Asthma				
31-45 6 7 6 9 4 32 46-60 5 5 3 6 6 25 >60 5 3 5 7 9 29 Total 20 19 19 32 27 117 Bronchitis Age Group Never Rare Often Frequent Always Total People surveyed 15-30 14 11 4 2 0 31 31-45 15 9 5 3 0 32 46-60 6 5 7 7 0 25 >60 10 8 6 5 0 29 Total 45 33 22 17 0 117 Lung's cancer Age Group Never Rare Often Frequent Always Total People surveyed 15-30 31 0 <t< td=""><td>Age Group</td><td>Never</td><td>Rare</td><td>Often</td><td>Frequent</td><td>Always</td><td>Total People surveyed</td></t<>	Age Group	Never	Rare	Often	Frequent	Always	Total People surveyed		
46-60 5 5 3 6 6 25 >60 5 3 5 7 9 29 Total 20 19 19 32 27 117 Bronchitis Age Group Never Rare Often Frequent Always Total People surveyed 15-30 14 11 4 2 0 31 31-45 15 9 5 3 0 32 46-60 6 5 7 7 0 25 >60 10 8 6 5 0 29 Total 45 33 22 17 0 117 Lung's cancer Age Group Never Rare Often Frequent Always Total People surveyed 15-30 31 0 0 0 32 46-60 25 0 0 <td>15-30</td> <td>4</td> <td>4</td> <td>5</td> <td>10</td> <td>8</td> <td>31</td>	15-30	4	4	5	10	8	31		
>60 5 3 5 7 9 29 Total 20 19 19 32 27 117 Bronchitis Age Group Never Rare Often Frequent Always Total People surveyed 15-30 14 11 4 2 0 31 31-45 15 9 5 3 0 32 46-60 6 5 7 7 0 25 >60 10 8 6 5 0 29 Total 45 33 22 17 0 117 Lung's cancer Age Group Never Rare Often Frequent Always Total People surveyed 15-30 31 0 0 0 31 31-45 32 0 0 0 32 46-60 25 0 0 0 0	31-45	6	7	6	9	4	32		
Total 20 19 19 32 27 117 Bronchitis Age Group Never Rare Often Frequent Always Total People surveyed 15-30 14 11 4 2 0 31 31-45 15 9 5 3 0 32 46-60 6 5 7 7 0 25 >60 10 8 6 5 0 29 Total 45 33 22 17 0 117 Lung's cancer Age Group Never Rare Often Frequent Always Total People surveyed 15-30 31 0 0 0 31 31-45 32 0 0 0 32 46-60 25 0 0 0 25 >60 29 0 0 0 0 29 <td>46-60</td> <td>5</td> <td>5</td> <td>3</td> <td>6</td> <td>6</td> <td>25</td>	46-60	5	5	3	6	6	25		
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	>60	5	3	5	7	9	29		
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	Total	20	19	19	32	27	117		
15-30 14 11 4 2 0 31 31-45 15 9 5 3 0 32 46-60 6 5 7 7 0 25 >60 10 8 6 5 0 29 Total 45 33 22 17 0 117 Lung's cancer Age Group Never Rare Often Frequent Always Total People surveyed 15-30 31 0 0 0 31 31-45 32 0 0 0 32 46-60 25 0 0 0 25 >60 29 0 0 0 0 29				I	Bronchitis				
31-45 15 9 5 3 0 32 46-60 6 5 7 7 0 25 >60 10 8 6 5 0 29 Total 45 33 22 17 0 117 Lung's cancer Age Group Never Rare Often Frequent Always Total People surveyed 15-30 31 0 0 0 31 31-45 32 0 0 0 32 46-60 25 0 0 0 25 >60 29 0 0 0 29	Age Group	Never	Rare	Often	Frequent	Always	Total People surveyed		
46-60 6 5 7 7 0 25 >60 10 8 6 5 0 29 Total 45 33 22 17 0 117 Lung's cancer Age Group Never Rare Often Frequent Always Total People surveyed 15-30 31 0 0 0 31 31-45 32 0 0 0 32 46-60 25 0 0 0 25 >60 29 0 0 0 0 29	15-30	14	11	4	2	0	31		
>60 10 8 6 5 0 29 Total 45 33 22 17 0 117 Lung's cancer Age Group Never Rare Often Frequent Always Total People surveyed 15-30 31 0 0 0 31 31-45 32 0 0 0 32 46-60 25 0 0 0 25 >60 29 0 0 0 0	31-45	15	9	5	3	0	32		
Total 45 33 22 17 0 117 Lung's cancer Age Group Never Rare Often Frequent Always Total People surveyed 15-30 31 0 0 0 31 31-45 32 0 0 0 32 46-60 25 0 0 0 25 >60 29 0 0 0 29	46-60	6	5	7	7	0	25		
Lung's cancer Age Group Never Rare Often Frequent Always Total People surveyed 15-30 31 0 0 0 0 31 31-45 32 0 0 0 0 32 46-60 25 0 0 0 0 25 >60 29 0 0 0 0 29	>60	10	8	6	5	0	29		
Age Group Never Rare Often Frequent Always Total People surveyed 15-30 31 0 0 0 0 31 31-45 32 0 0 0 0 32 46-60 25 0 0 0 0 25 >60 29 0 0 0 0 29	Total	45	33	22	17	0	117		
15-30 31 0 0 0 0 31 31-45 32 0 0 0 0 32 46-60 25 0 0 0 0 25 >60 29 0 0 0 0 29		Lung's cancer							
31-45 32 0 0 0 0 32 46-60 25 0 0 0 0 25 >60 29 0 0 0 0 29	Age Group	Never	Rare	Often	Frequent	Always	Total People surveyed		
46-60 25 0 0 0 0 25 >60 29 0 0 0 0 29	15-30	31	0	0	0	0	31		
>60 29 0 0 0 0 29	31-45	32	0	0	0	0	32		
	46-60	25	0	0	0	0	25		
Total 117 0 0 0 0 117	>60	29	0	0	0	0	29		
	Total	117	0	0	0	0	117		

Table 2. Occurrences of diseases in people owing to Air pollution with their exposure time as variable.

Lung's cancer						
Exposure Time	Never	Rare	Often	Frequent	Always	Total People surveyed
0-30 Mins	3	9	5	6	1	24
30-60 Mins	6	7	4	5	3	25
1-2 Hrs.	5	5	2	8	6	26
2-4 Hrs.	2	4	3	6	5	20
>4 Hrs.	2	3	4	7	6	22
Total	18	28	18	32	21	117
	ENT					
Exposure Time	Never	Rare	Often	Frequent	Always	Total People surveyed
0-30 Mins	5	2	5	5	7	24
30-60 Mins	6	6	2	6	5	25
1-2 Hrs.	2	5	4	7	8	26
2-4 Hrs.	4	2	3	5	6	20
>4 Hrs.	3	4	4	7	5	22
Total	20	18	18	30	31	117
Respiratory problems						
Exposure Time	Never	Rare	Often	Frequent	Always	Total People surveyed

0-30 Mins	4	6	2	7	5	24
30-60 Mins	4	4	4	7	6	25
1-2 Hrs.	4	3	4	6	3	20
2-4 Hrs.	5	4	6	7	4	26
>4 Hrs.	3	6	3	6	4	22
Total	20	23	19	33	22	117
			Ast	hma		
Exposure Time	Never	Rare	Often	Frequent	Always	Total People surveyed
0-30 Mins	5	5	2	6	6	24
30-60 Mins	5	3	4	7	6	25
1-2 Hrs.	4	3	2	5	6	20
2-4 Hrs.	2	4	8	5	7	26
>4 Hrs.	3	2	4	6	7	22
Total	19	17	20	29	32	117
			Bron	chitis		
Exposure Time	Never	Rare	Often	Frequent	Always	Total People surveyed
0-30 Mins	5	6	5	1	7	24
0-00 1411113	U	U	9			
30-60 Mins	8	7	2	2	6	25
					6 7	
30-60 Mins	8	7	2	2		25
30-60 Mins 1-2 Hrs.	8	7	2	2 4	7	25 20
30-60 Mins 1-2 Hrs. 2-4 Hrs.	8 6 5	7 3 3	2 0 7	2 4 6	7 5	25 20 26
30-60 Mins 1-2 Hrs. 2-4 Hrs. >4 Hrs.	8 6 5 4	7 3 3 2	2 0 7 1 15	2 4 6 6	7 5 9	25 20 26 22
30-60 Mins 1-2 Hrs. 2-4 Hrs. >4 Hrs.	8 6 5 4 28	7 3 3 2 21	2 0 7 1 15 Lung's	2 4 6 6 19 Cancer	7 5 9 34	25 20 26 22
30-60 Mins 1-2 Hrs. 2-4 Hrs. >4 Hrs. Total	8 6 5 4 28	7 3 3 2 21	2 0 7 1 15 Lung's	2 4 6 6 19 Cancer	7 5 9 34	25 20 26 22 117
30-60 Mins 1-2 Hrs. 2-4 Hrs. >4 Hrs. Total Exposure Time	8 6 5 4 28 Never	7 3 3 2 21 Rare	2 0 7 1 15 Lung's Often	2 4 6 6 19 Cancer Frequent	7 5 9 34 Always	25 20 26 22 117 Total People surveyed
30-60 Mins 1-2 Hrs. 2-4 Hrs. >4 Hrs. Total Exposure Time 0-30 Mins	8 6 5 4 28 Never 24	7 3 3 2 21 Rare	2 0 7 1 15 Lung's Often 0	2 4 6 6 19 Cancer Frequent	7 5 9 34 Always 0	25 20 26 22 117 Total People surveyed 24
30-60 Mins 1-2 Hrs. 2-4 Hrs. >4 Hrs. Total Exposure Time 0-30 Mins 30-60 Mins	8 6 5 4 28 Never 24 25	7 3 3 2 21 Rare 0	2 0 7 1 15 Lung's Often 0	2 4 6 6 19 Cancer Frequent 0	7 5 9 34 Always 0	25 20 26 22 117 Total People surveyed 24 25
30-60 Mins 1-2 Hrs. 2-4 Hrs. >4 Hrs. Total Exposure Time 0-30 Mins 30-60 Mins 1-2 Hrs.	8 6 5 4 28 Never 24 25 20	7 3 3 2 21 Rare 0 0	2 0 7 1 15 Lung's Often 0 0	2 4 6 6 19 Cancer Frequent 0 0	7 5 9 34 Always 0 0	25 20 26 22 117 Total People surveyed 24 25 20
30-60 Mins 1-2 Hrs. 2-4 Hrs. >4 Hrs. Total Exposure Time 0-30 Mins 30-60 Mins 1-2 Hrs. 2-4 Hrs.	8 6 5 4 28 Never 24 25 20 26	7 3 3 2 21 Rare 0 0 0	2 0 7 1 15 Lung's Often 0 0	2 4 6 6 19 Cancer Frequent 0 0 0	7 5 9 34 Always 0 0 0	25 20 26 22 117 Total People surveyed 24 25 20 26

3. Results and Discussions

In this, effect of air pollutants on human health is studied. For this purpose, initially the air quality parameter of the busy business location of Patna is observed. The commonly observed diseases owing to Air pollution is taken from literature & health of people affected due to their exposure to environment is studied through a structured questionnaire.

3.1. Long Term Diseases

Chi square test of independency is adopted to check the dependency of long-term disease with age [5]. When the frequencies of the two data are known, chi square test is best suited method to check the dependency between the given data.

To check the dependency of long-term disease with age, two hypotheses are assumed

- H0 There is no relationship between health of people and age.
- H1 There is a relationship between health of people and age

Table 3. Diseased (Long term) and healthy people in different age group as per survey.

Age (in yrs.)	Diseased	Healthy
15-30	47	14

31-45	42	22
46-60	32	20
>60	41	17

Now, using Chi square test of independence, p value = 0.2924, As p value > 0.05, the null hypothesis is rejected. Thus, occurrence of long-term diseases is dependent on the age group of individuals.

4. Conclusions

In all cases, p value using chi square test of independency is > 0.05. As a result, null hypothesis is rejected. Thus, occurrence of both short terms and long-term diseases is dependent on the age as well as exposure time of individuals.

Author Contributions: Conceptualization, writing—original draft preparation, M.M.F. and K.N.; writing—draft preparation, review, and editing, M.M.F. and K.N.; writing—final draft review and editing, all authors. R.S. contributed equally to this work. All authors have read and agreed to the published version of the manuscript.

Funding: This research received no external funding.

Acknowledgments: The authors are grateful to the Department of Civil Engineering, National Institute of Technology Patna.

Conflicts of Interest: The authors declare no conflict of interest.

References

- 1. Krishnatreya, M.; Kataki, A. Environmental Pollution and Cancers in India. Adv. Hum. Biol. 2020, 10, 95, doi:10.4103/AIHB.AIHB 51 20.
- 2. Rahaman, S.; Jahangir, S.; Chen, R.; Kumar, P.; Thakur, S. COVID-19's Lockdown Effect on Air Quality in Indian Cities Using Air Quality Zonal Modeling. *Urban Clim.* **2021**, *36*, 100802, doi:10.1016/J.UCLIM.2021.100802.
- 3. Bhat, T.H.; Farzaneh, H.; Toosty, N.T. Co-Benefit Assessment of Active Transportation in Delhi, Estimating the Willingness to Use Nonmotorized Mode and Near-Roadway-Avoided PM2.5 Exposure. *Int. J. Environ. Res. Public Heal.* 2022, Vol. 19, Page 14974 2022, 19, 14974, doi:10.3390/IJERPH192214974.
- 4. Boogaard, H.; Patton, A.P.; Atkinson, R.W.; Brook, J.R.; Chang, H.H.; Crouse, D.L.; Fussell, J.C.; Hoek, G.; Hoffmann, B.; Kappeler, R.; et al. Long-Term Exposure to Traffic-Related Air Pollution and Selected Health Outcomes: A Systematic Review and Meta-Analysis. *Environ. Int.* **2022**, *164*, 107262, doi:10.1016/J.ENVINT.2022.107262.
- 5. Wang, S.; Gao, S.; Li, S.; Feng, K. Strategizing the Relation between Urbanization and Air Pollution: Empirical Evidence from Global Countries. *J. Clean. Prod.* **2020**, 243, 118615, doi:10.1016/j.jclepro.2019.118615.

Disclaimer/Publisher's Note: The statements, opinions and data contained in all publications are solely those of the individual author(s) and contributor(s) and not of MDPI and/or the editor(s). MDPI and/or the editor(s) disclaim responsibility for any injury to people or property resulting from any ideas, methods, instructions or products referred to in the content.