



**KAMPAI PROJECT - JICA/SATREPS
2016 - 2020**



6th December 2016

**Visualization of impact of chronic / latent
chemical hazard and Geo-Ecological
Remediation in Zambia**

**Collaborative research between the University of Zambia and
Hokkaido University**

**Funding: Japan International Cooperation Agency (JICA) and Japan Science
and Technology (JST)**

Duration: 2016-2022

Site: Kabwe City, Central Province, Zambia

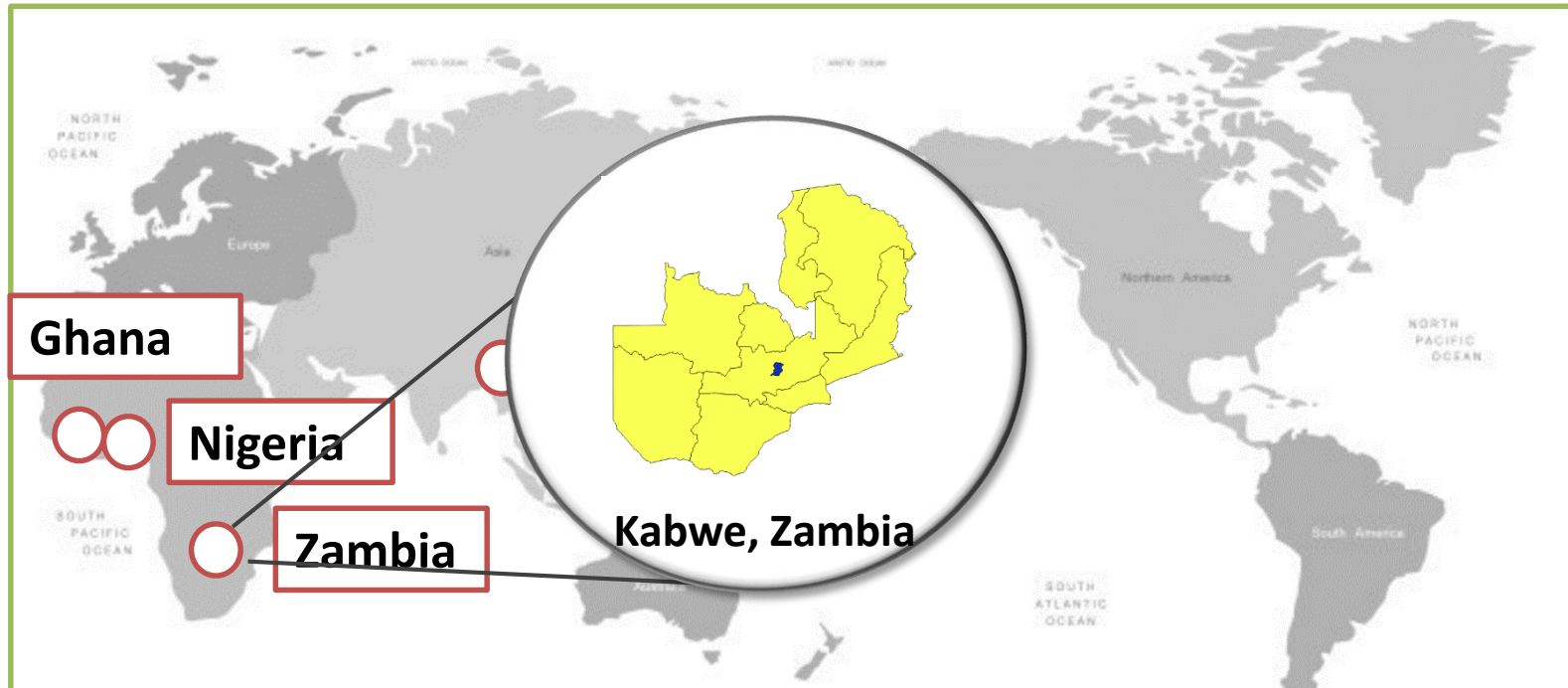


Project participants from Zambia



- 1) The University of Zambia
- 2) Ministry of Higher Education
- 3) Kabwe Municipal Council (KMC)
- 4) Ministry of Health (MOH)
- 5) Ministry of Mines and Minerals Development
- 6) Ministry of Lands, Natural Resources and Environmental Protection
- 7) Zambia Environmental Management Agency (ZEMA)
- 8) National Remote Sensing Centre

Examples of toxic metal diseases (Pb, Hg, Cd, As)



- **Cadmium (Cd)** toxicity (>100 deaths) - *Itai itai* disease (Japan, 1967)
- **Methylmercury (Hg)** toxicity (>1000 deaths) - *Minamata* disease (Japan, 1956)
- **Lead (Pb)** toxicity (>400 children died) - Nigeria (2010)
- **Arsenic (As)** toxicity (>1000 deaths) - Bangladesh (1970-)

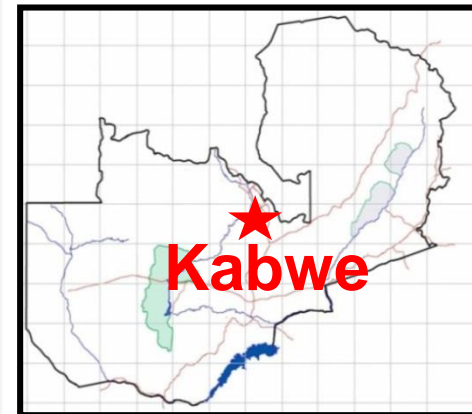
Background - Kabwe City

- ❑ Long history of Pb-Zn mining

 - From 1902 to 1994

- ❑ Extensive Pb contamination of township soils in the vicinity of the mine

- ❑ Kabwe has attracted **worldwide attention**





Pb exposure factors



Inhalation exposure
through dusts?





Pb exposure factors



Our research activities in Kabwe City



PAST

PRESENT

FUTURE

Outline of PAST studies

2009~2011

**Pb & Cd
contamination in
chicken goat**



**Pb poisoning in
children?**



2012~

**Soil contamination
and diffusion**



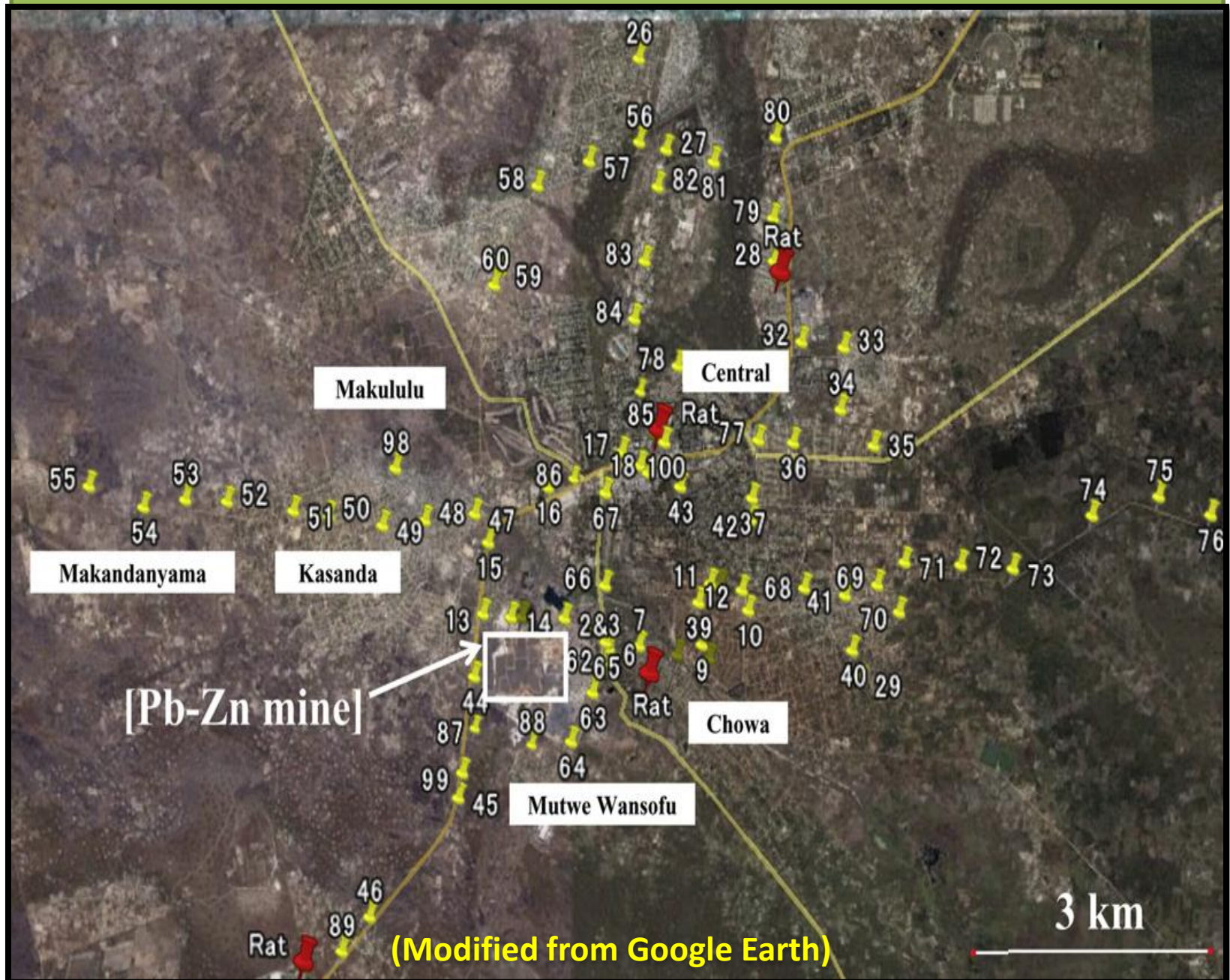
2008~2009

Kabwe Pb & Zn Mining

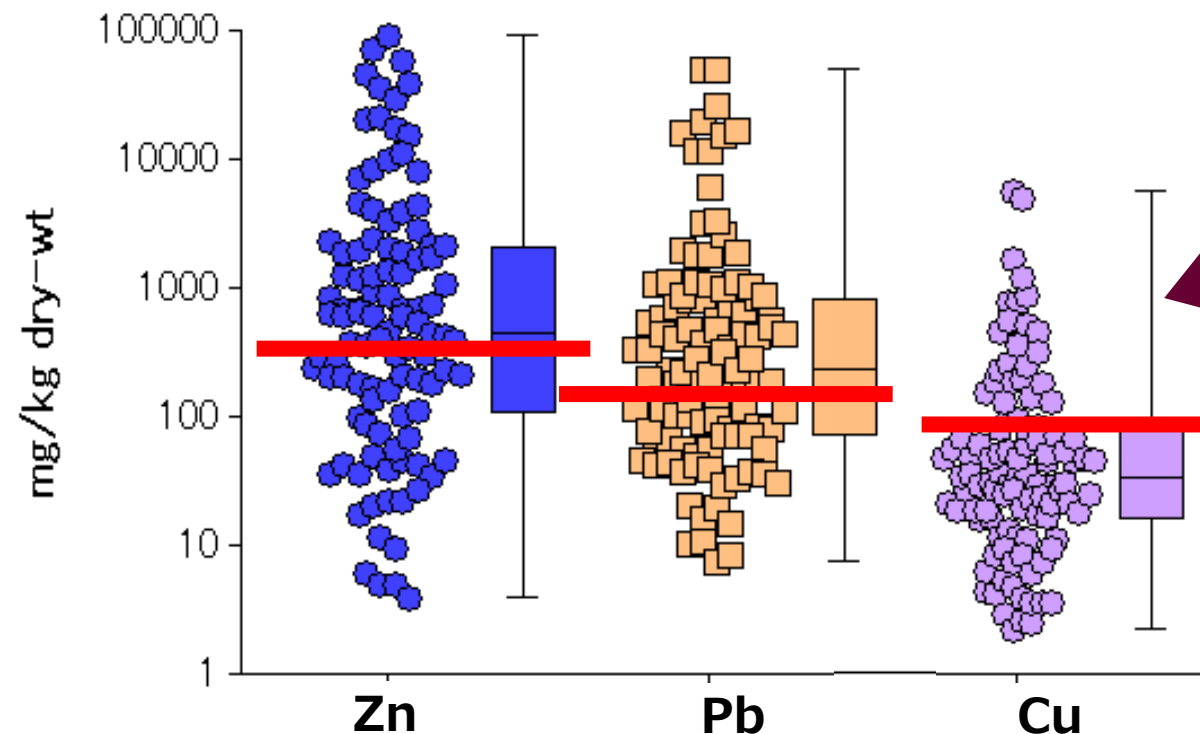
**Pb & Cd
contamination
in cattle**



Soil sampling (n=101, May 2009)



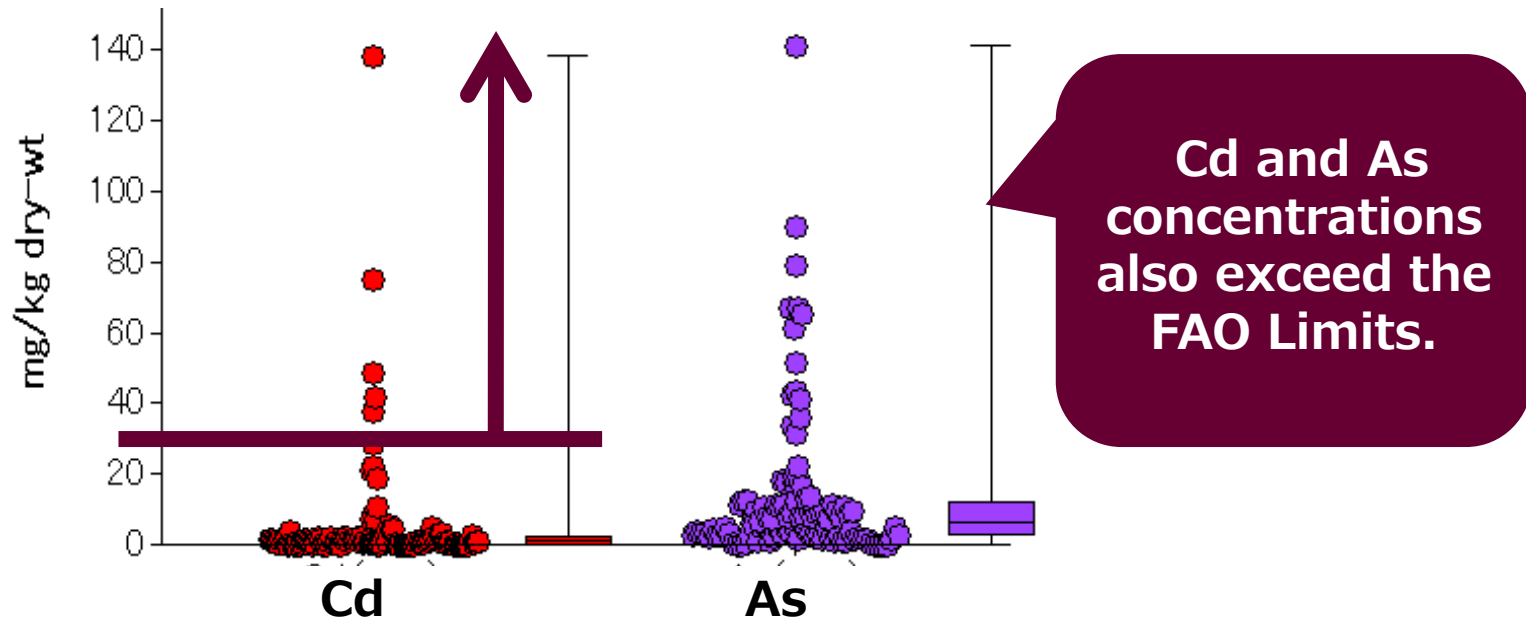
Zn, Pb and Cu concentrations in Kabwe soils



Zn, Cu and Pb concentrations in soil exceeded the FAO Limits.

	Zn	Pb	Cu
Range	<u>5 – 91,000</u>	<u>9 – 51,000</u>	<u>2 – 5,000</u>
Median	610	280	40
FAO Limits	500	150	100

Cd and As in Kabwe soil



	Cd	As
Range	<u>0.01 - 140</u>	<u>0.04 - 140</u>
Median	1	7
FAO Limits	1.6	18

Pb pollution in
children?

**Pb & Cd
contamination
in chicken**



2009~2011



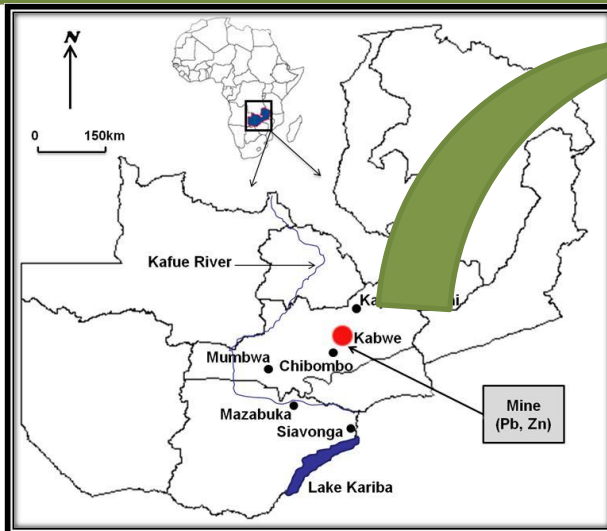
**Pb & Cd
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Soil contamination
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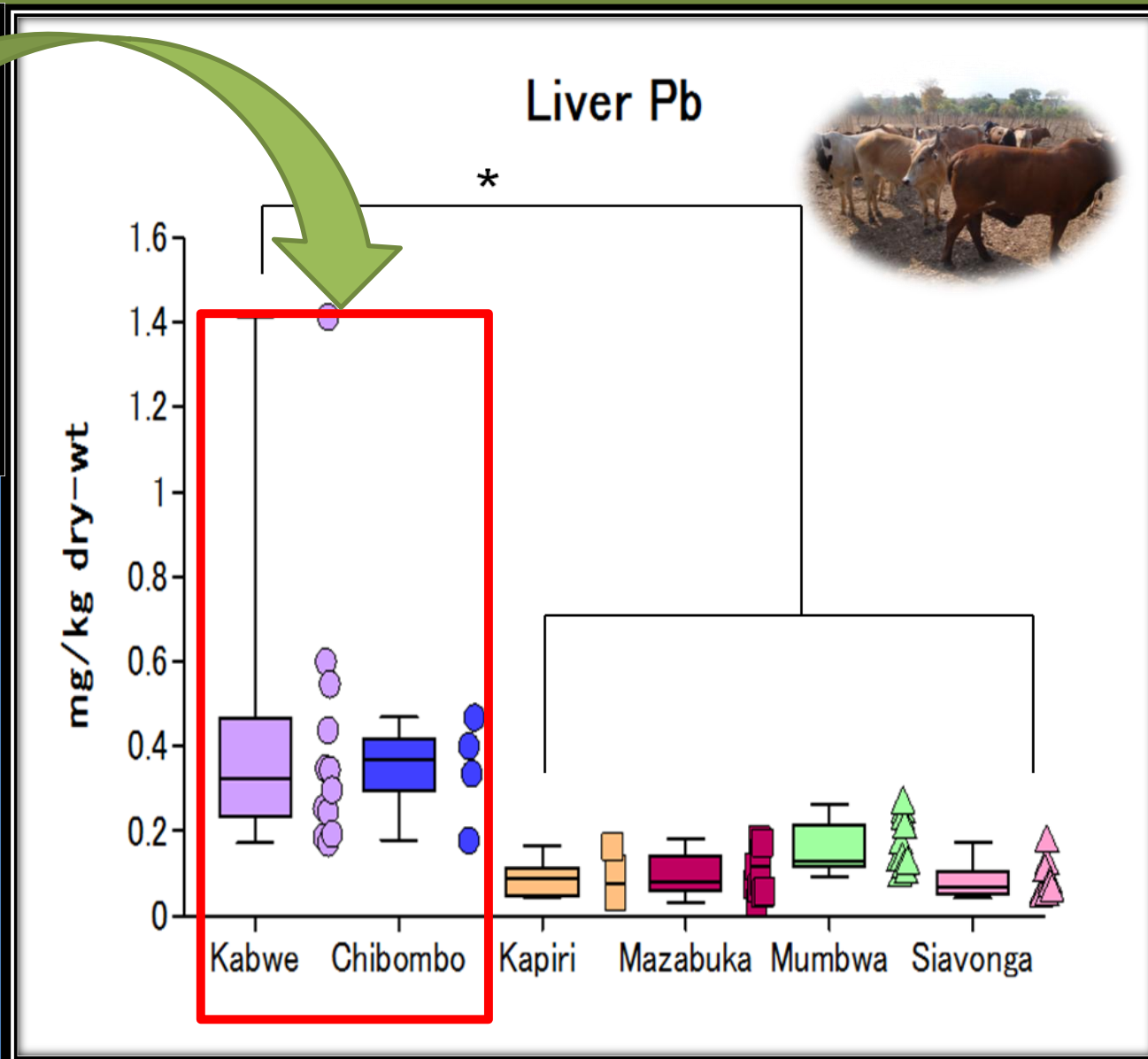
Kabwe Pb & Zn Mining



Regional difference of Pb in cattle liver in Zambia

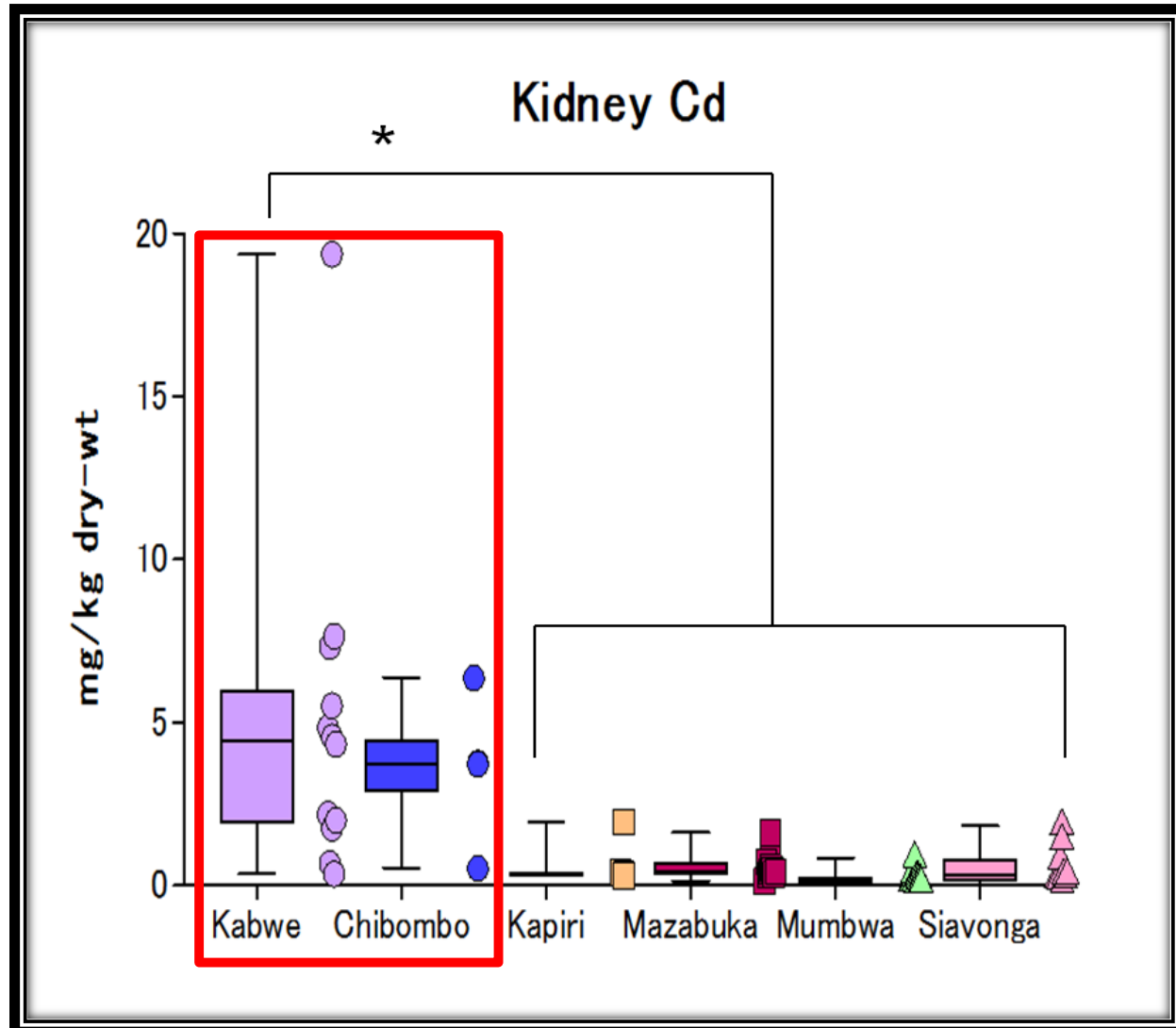


- **Kabwe**
 - higher levels of Pb in the liver
- **Chibombo**
 - Pb levels were similar to Kabwe
- **Other towns**
 - Lower Pb levels
- **Asterisk: $p < 0.001$**

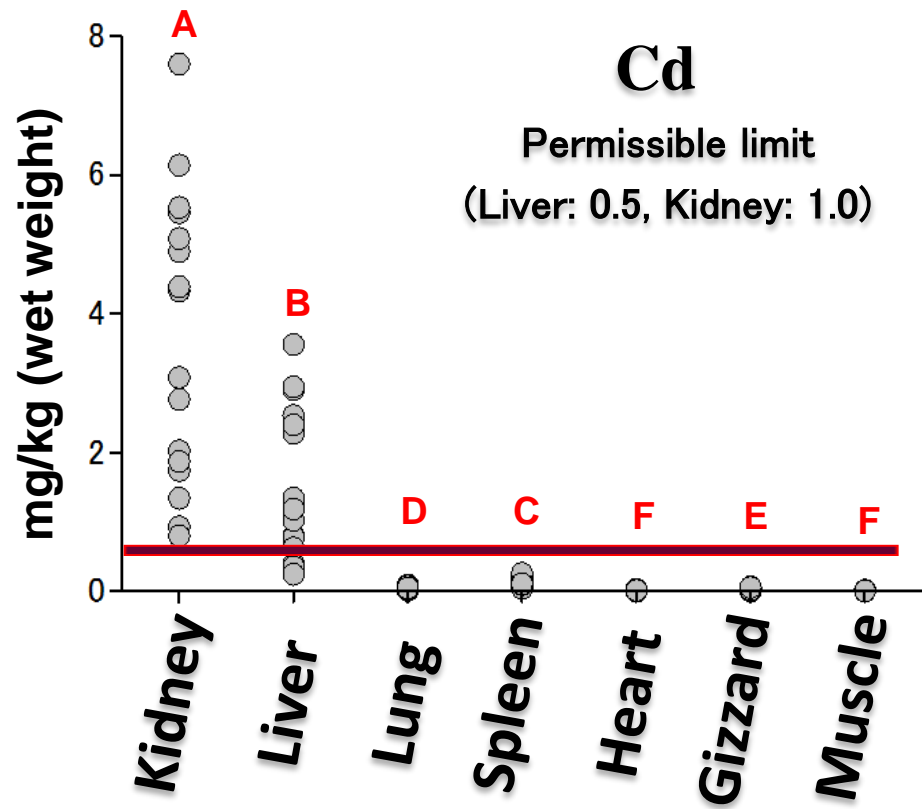
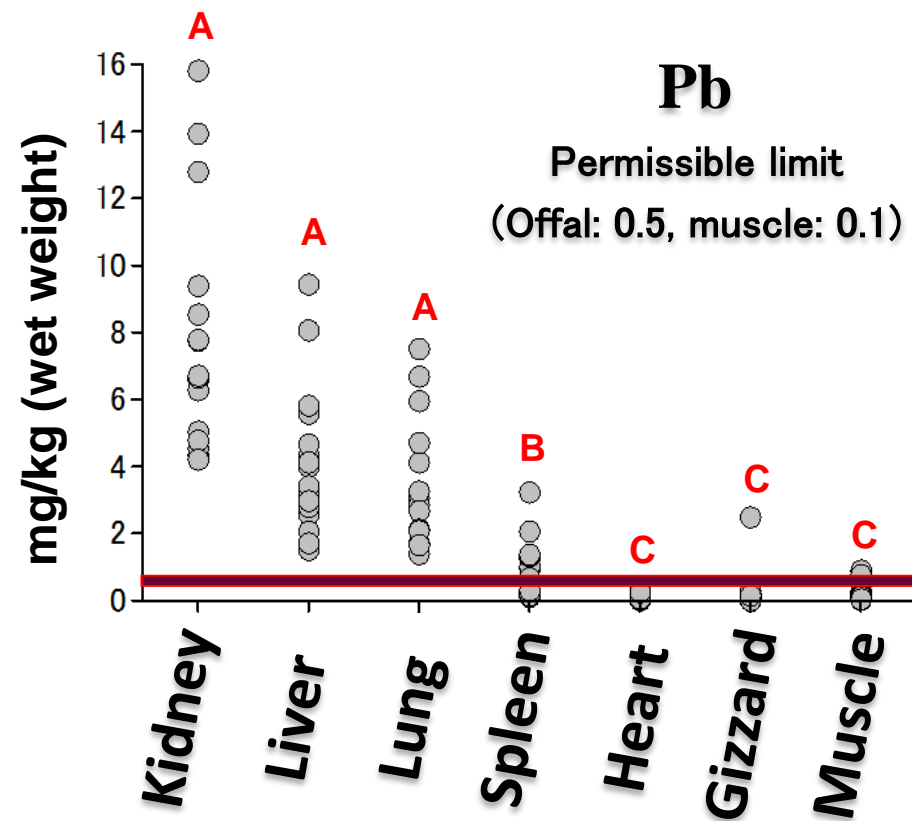


Regional difference of Cd in cattle kidney in Zambia

- **Kabwe**
 - Higher levels of Cd in kidneys
- **Chibombo**
 - Cd levels were similar to Kabwe
- **Other towns**
 - Lower Cd levels
- **Asterisk: $p < 0.001$ (Dunettee test)**



High Pb and Cd levels in muscle and offal of Free-range chickens (n=17) in Kabwe



(Tukey test)

Scavenging
Free-range
chicken

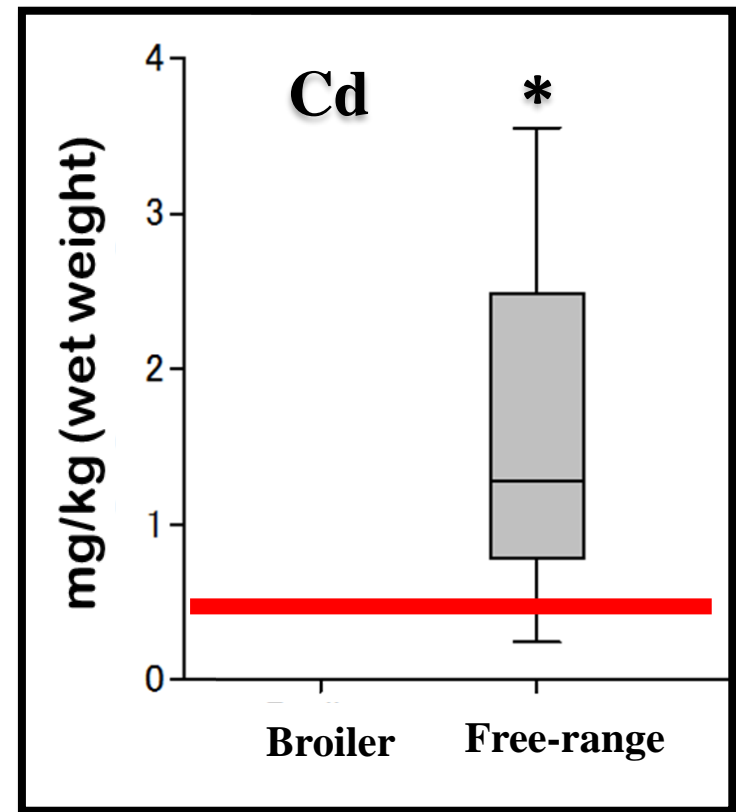
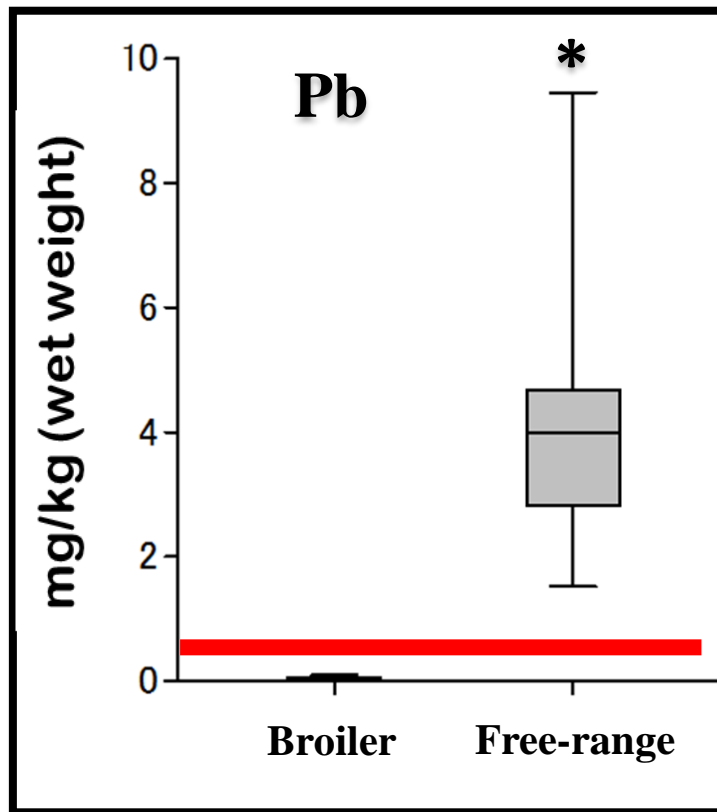


Pb and Cd exceeded the permissible limits

Pb and Cd comparison in liver of Broiler (n=32) and Free-range (n=17) in Kabwe

Broiler  **Kept indoors and fed commercial feed**

Free-range  **Roam and scavenge for food in the mine townships**



Outline of PAST studies

Pb poisoning in
children?

Pb & Cd
contamination
in chicken



2012~

Soil contamination
and diffusion

Pb & Cd
contamination
in cattle

Kabwe Pb & Zn Mining





Childhood lead poisoning

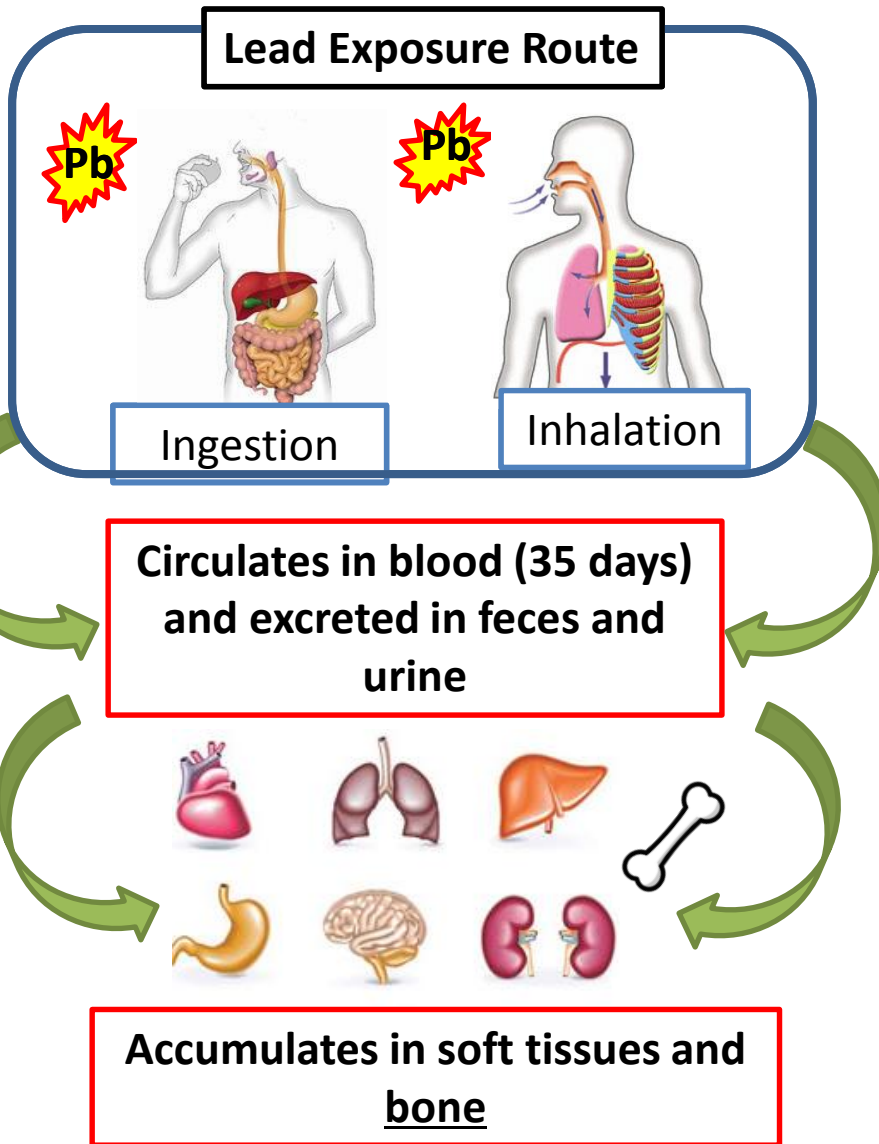


- Childhood lead (Pb) poisoning is a serious public health concern
- Toxicity affects multiple organ systems resulting in numerous morphological, biochemical and physiological changes
 - Hematological disorders
 - Nervous system disturbances
 - Impairment of liver and kidney functions

Young children are vulnerable to Pb poisoning

- Hand-to-mouth activities
- Higher gastrointestinal absorption of Pb (40 – 50%)
- Iron and calcium deficiencies – enhance Pb absorption
- Only 70% of absorbed Pb is stored in bones and teeth
- Constant bone remodeling → “Endogenous contamination”
- Sensitivity of the developing nervous system to Pb toxicity
- Persistent neurological effects after exposure

Lead exposure and critical BLLs

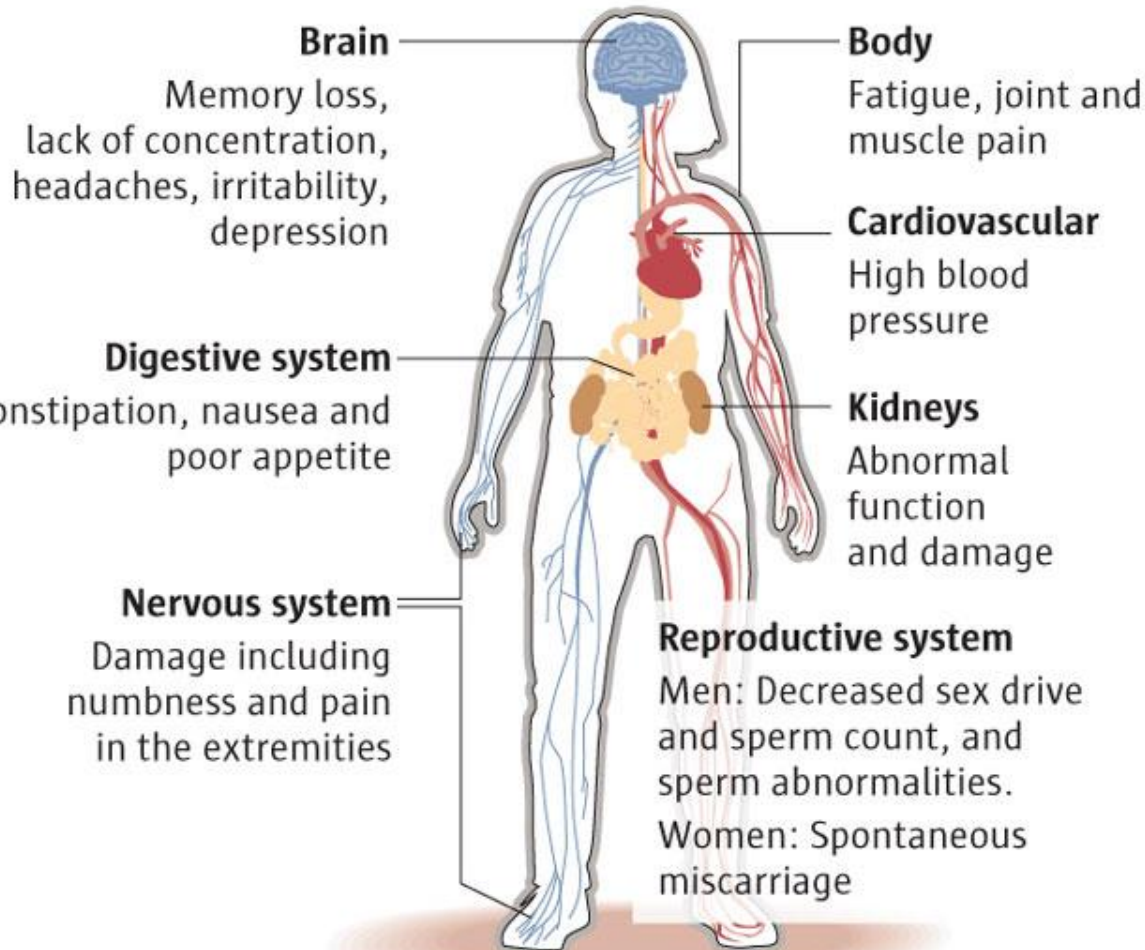


		Blood Lead Levels (BLLs)	
Children	BLLs (µg/dL)		Adults
	150		Encephalopathy Nephropathy
Death →		←	
	100		Frank anemia
Encephalopathy →		←	
Nephropathy →		←	
Frank Anemia →		←	Male Reproductive Effects
	50		↓ Hemoglobin Synthesis and Female Reproductive Effects
↓ Hemoglobin Synthesis →	40		Chelation therapy
↓ Vitamin D Metabolism →	30		← Elevated Blood Pressure
↓ Nerve Conduction Velocity →	20		← ↑ Erythrocyte Protoporphyrin (men)
↑ Erythrocyte Protoporphyrin ↓ Vitamin D Metabolism(?) →			← ↑ Erythrocyte Protoporphyrin (women)
Developmental Toxicity →	10		
↓ IQ, ↓ Hearing, ↓ Growth			
Transplacental Transfer →	5		

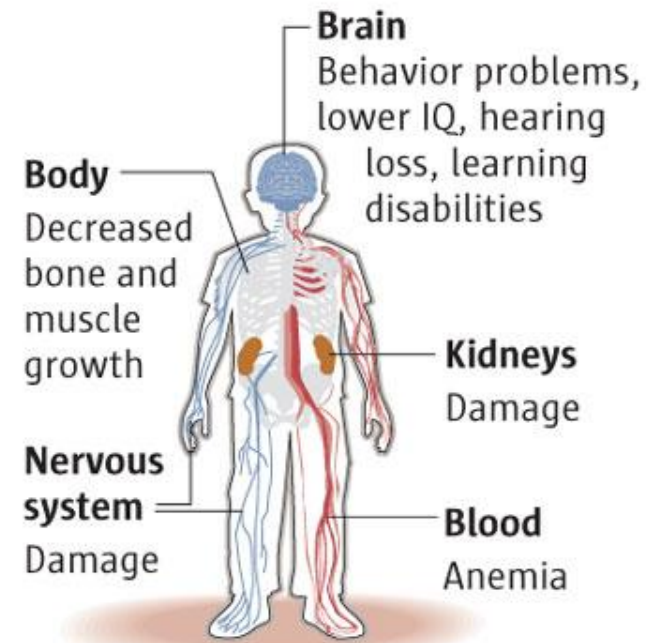
Clinical signs/symptoms are non specific
Clinical diagnosis of lead poisoning is difficulty

Clinical signs and symptoms

ADULTS

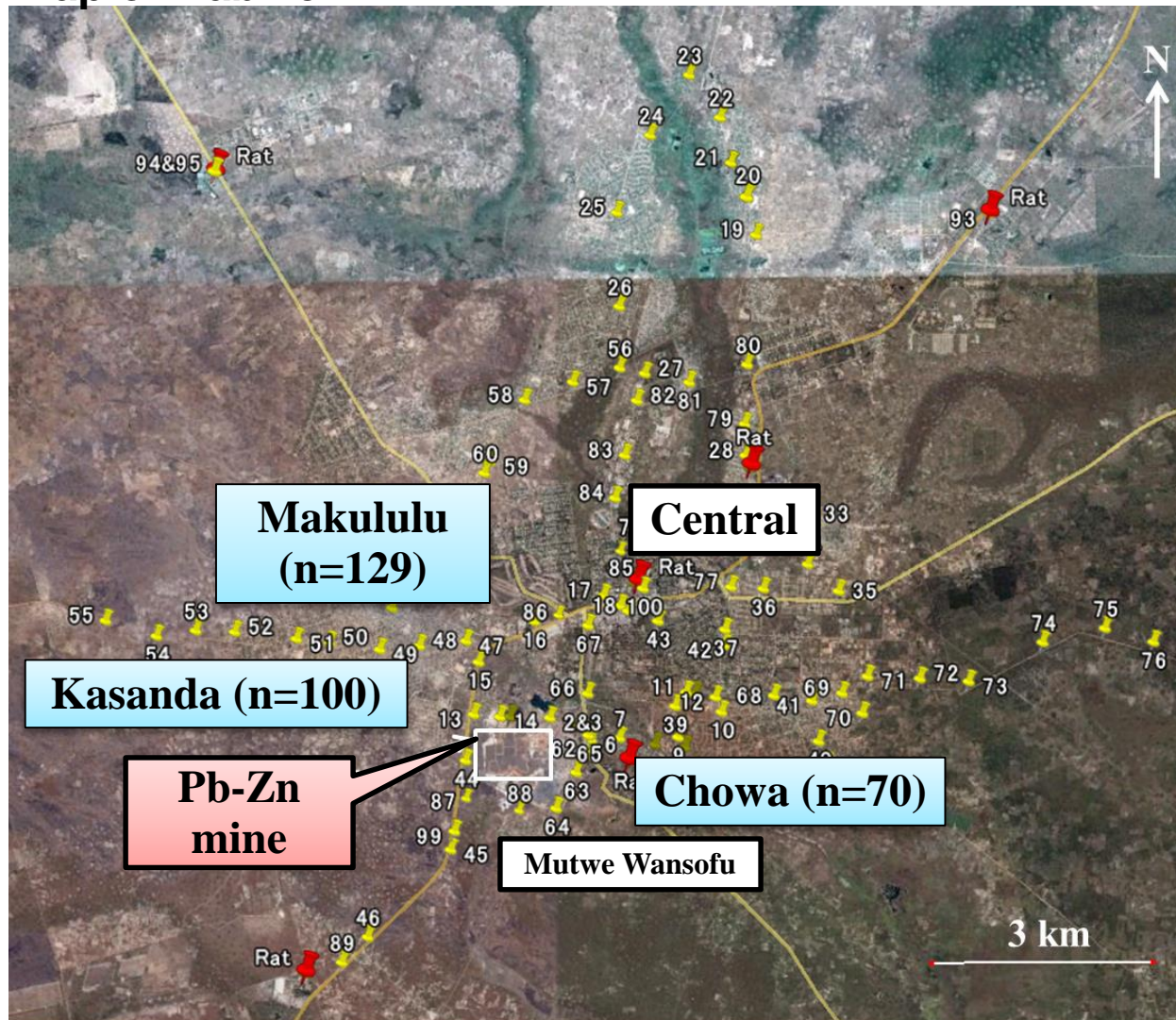


CHILDREN



Human sample collection - May 2012

Map of Kabwe



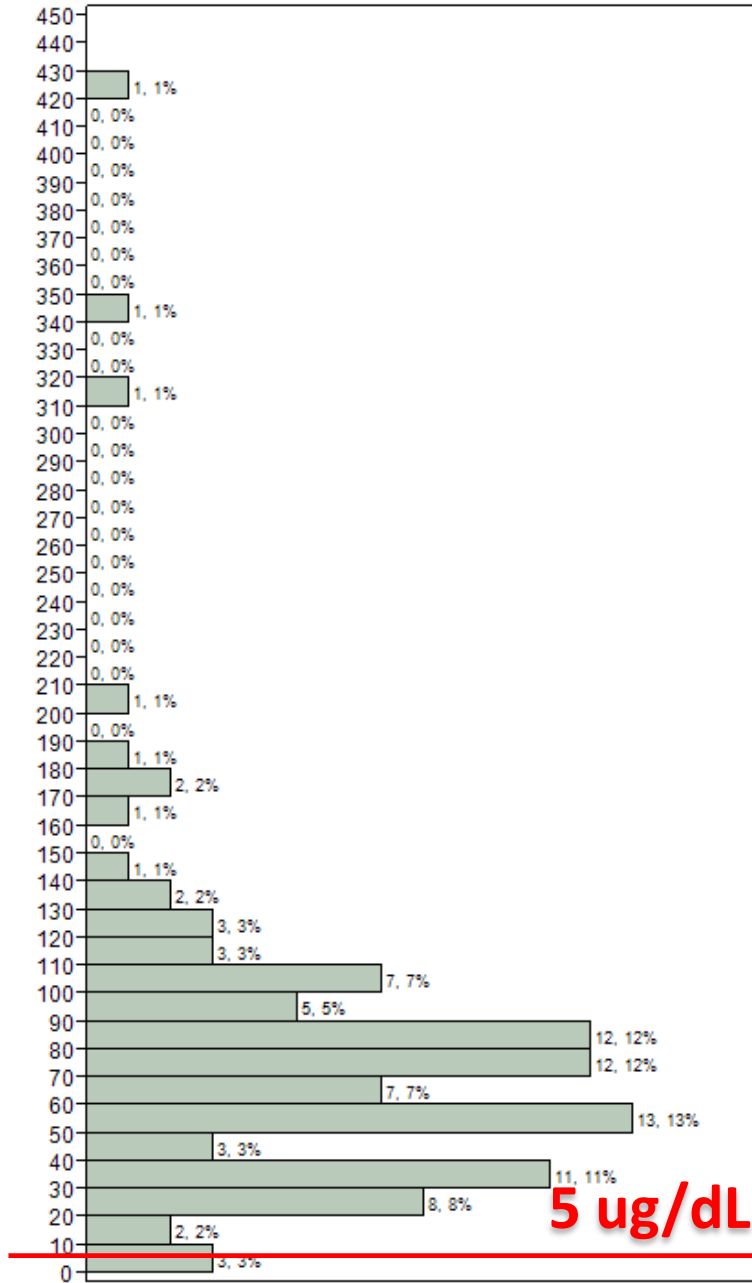
- We collected samples from local communities around Pb-Zn mine.
 - 0-7 years old children were main participants.
 - 3 Health Centres (Makululu, Kasanda, Chowa area)
 - 299 blood
 - 250 urine
 - 250 feces
- (It was difficult to collect urine and fecal samples from all participants)

Road to Lusaka

Kasanda (n=100)

Makululu (n=129)

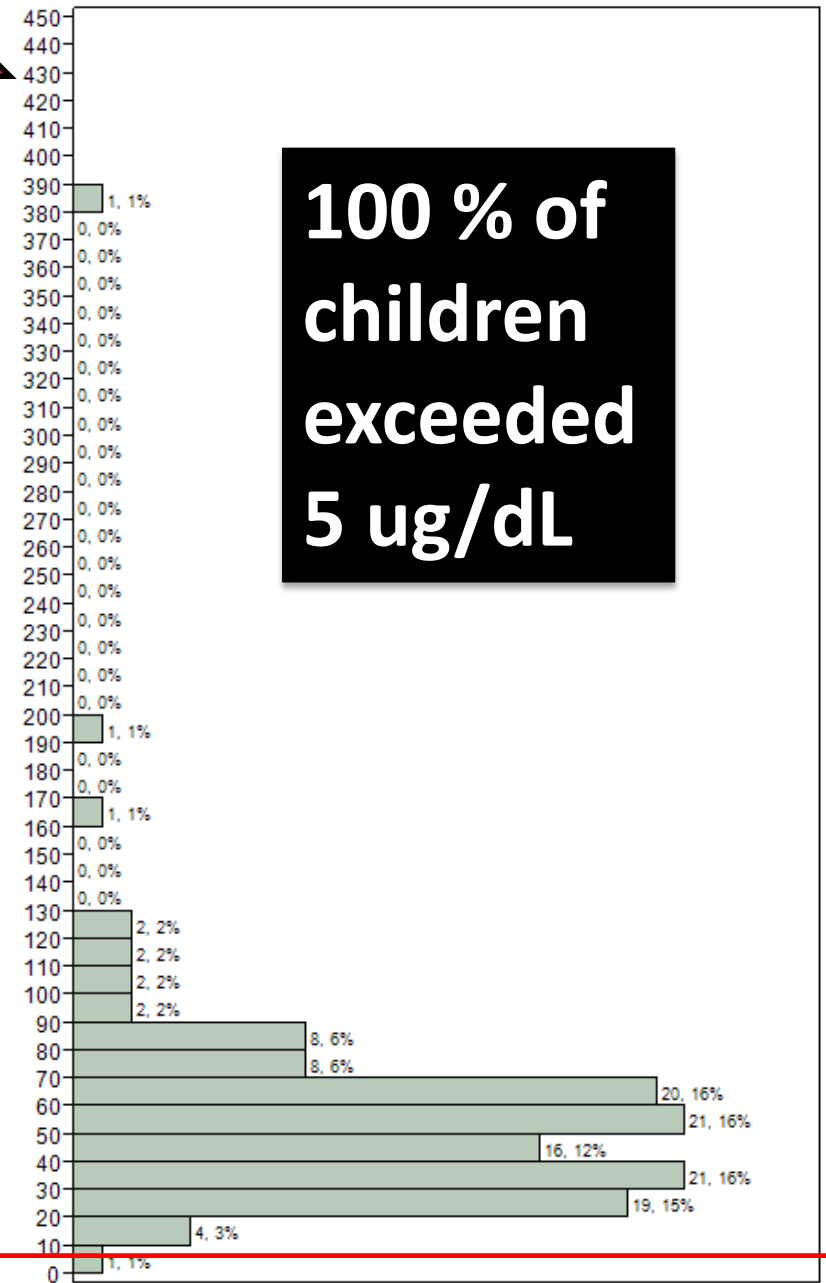
Blood Pb concentrations (ug/dL)



5 ug/dL

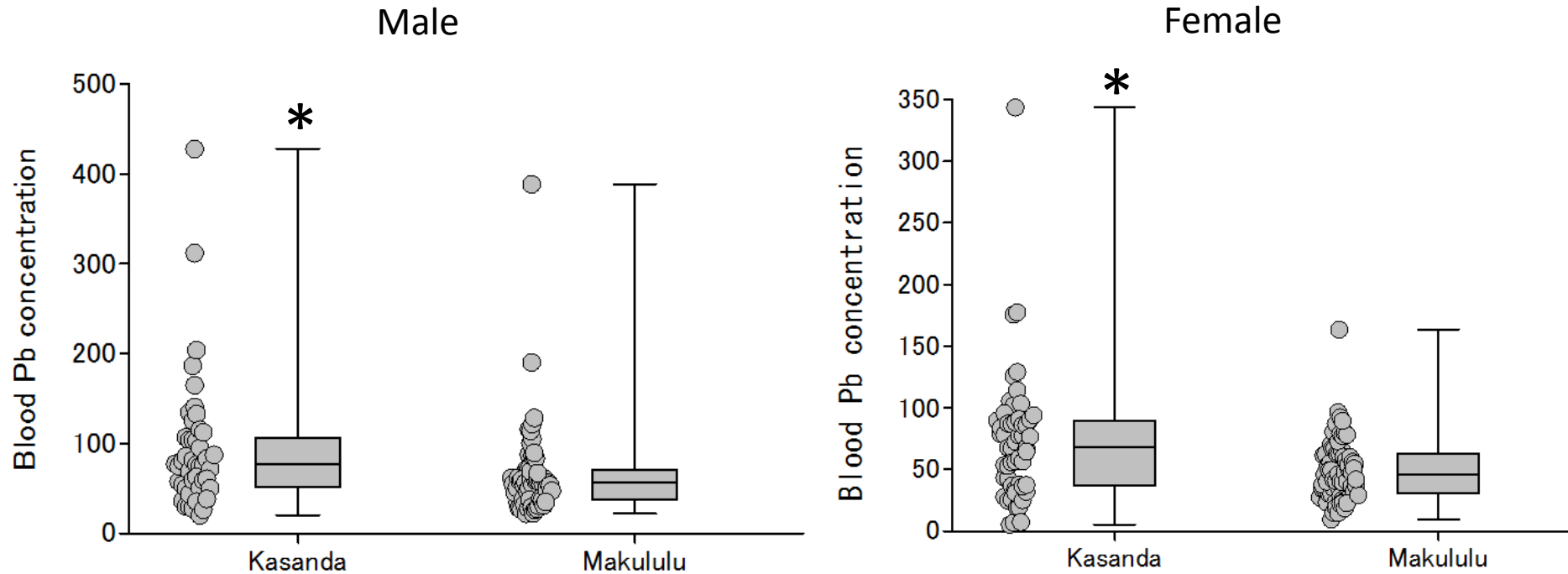


100 % of children exceeded 5 ug/dL



Number of children and percent

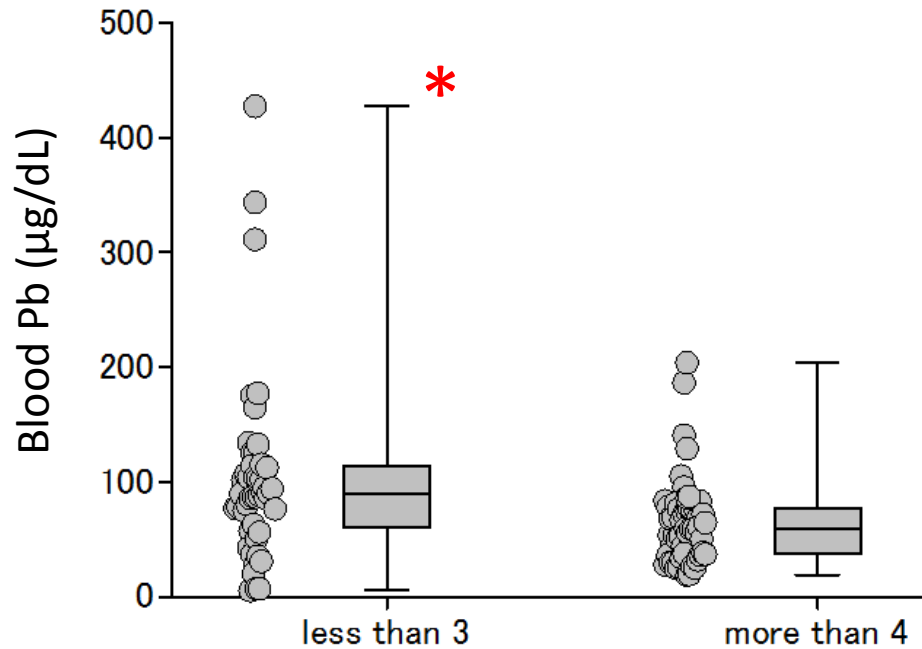
BLL: Kasanda vs Makululu (Boys and girls analyzed separately)



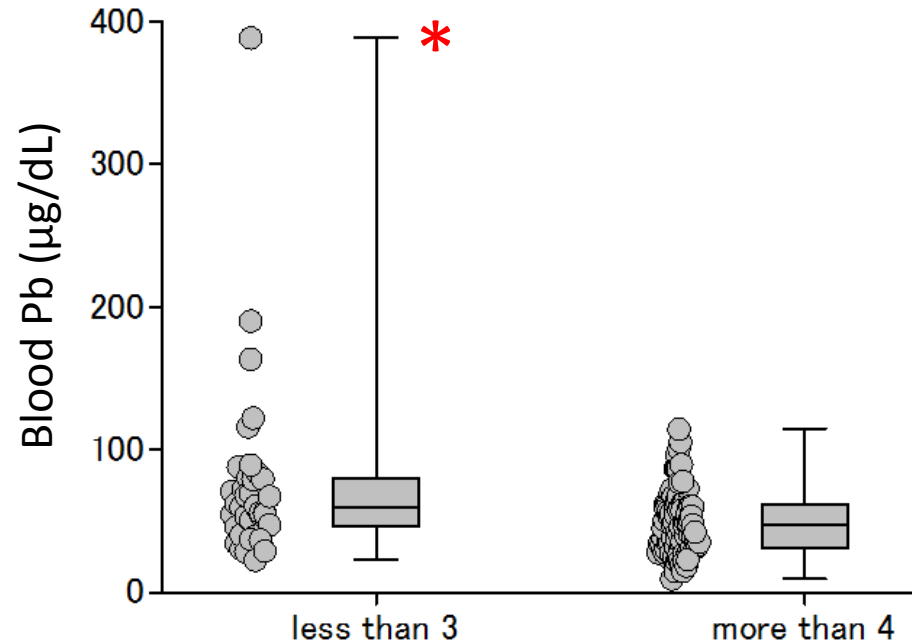
Kasanda was significantly higher in both boys and girls

Age difference (0-3 years vs 4-7 years)

Kasanda

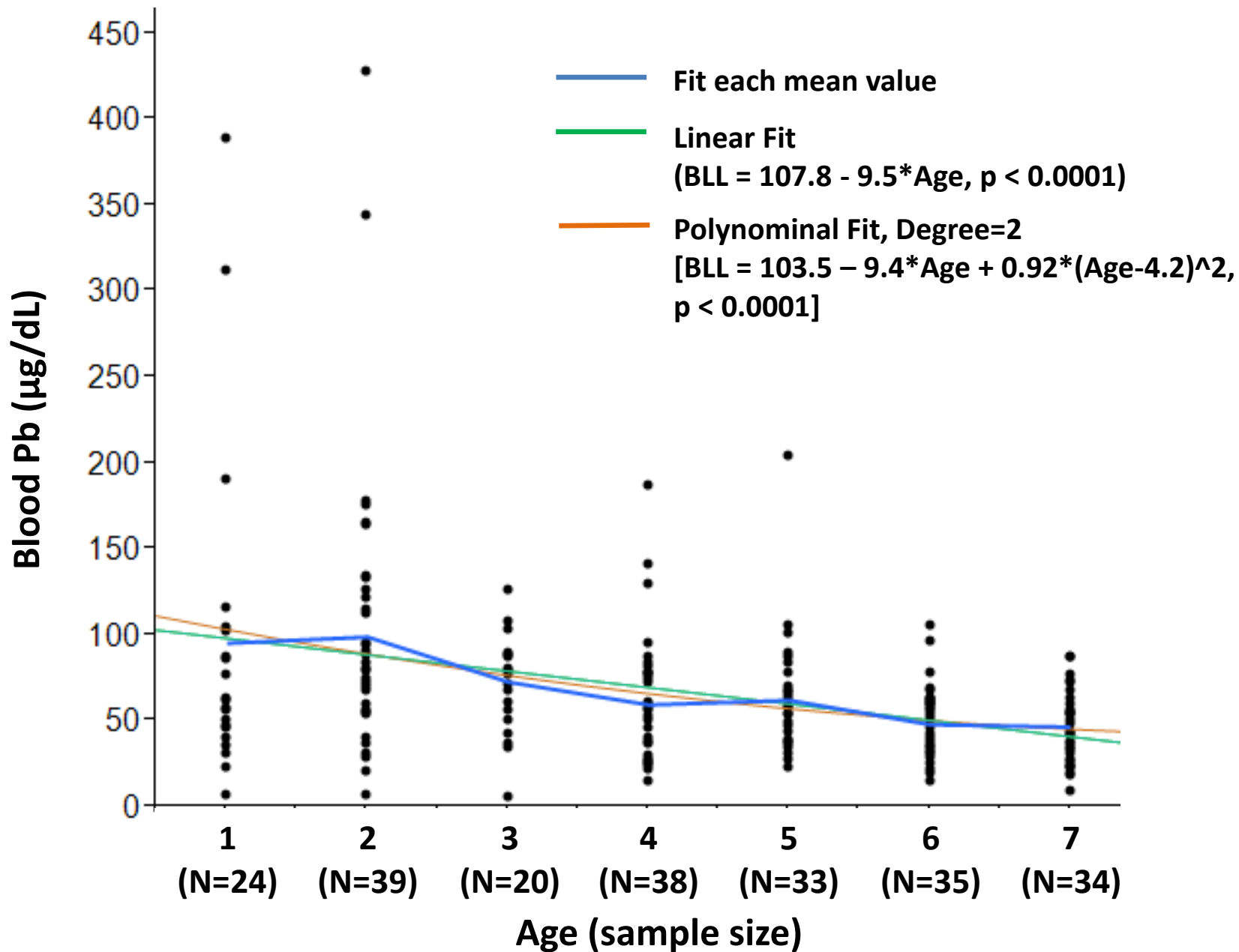


Makululu



Younger children had significantly higher BLL than older children

Correlation between Age & blood Pb



Publications on PAST research

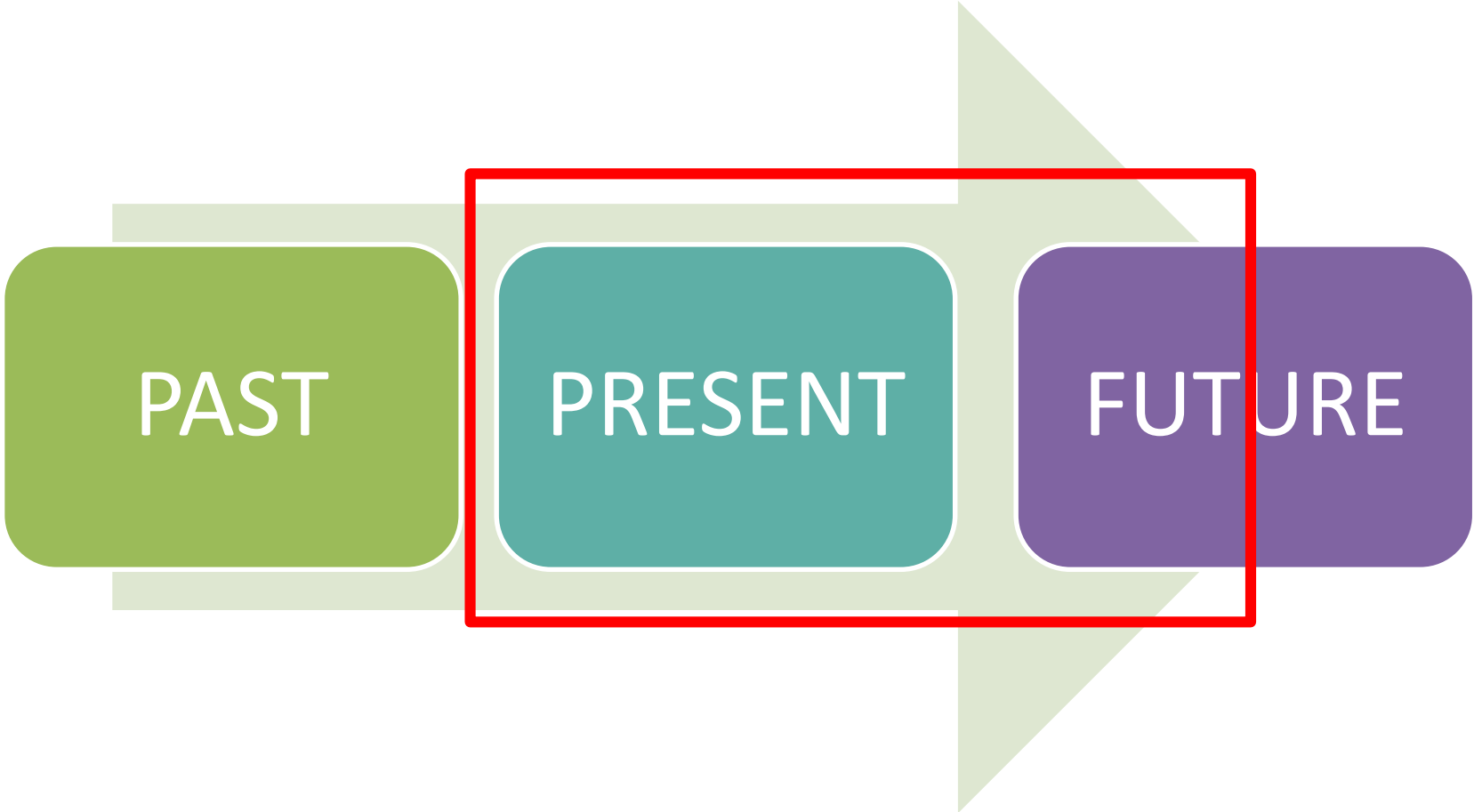
1. **Yabe J** et al. Lead poisoning in children from townships in the vicinity of a lead-zinc mine in Kabwe, Zambia. *Chemosphere*119:941-7 (2015)
2. **Nakayama SMM**, et al. Accumulation and biological effects of metals in wild rats in mining areas of Zambia. *Environmental Monitoring and Assessment* 185:4907-4918 (2013)
3. **Yabe J** et al. Metal distribution in tissues of free-range chickens near a lead-zinc mine in Kabwe, Zambia. *Environ Toxicol Chem.* 2013 Jan;32(1):189-192.
4. **Nakayama SMM**, et al. GIS-based source estimation of Cu pollution in Lake Itzhi-tezhi and metal accumulation profiles in *Oreochromis* spp. from both field and laboratory studies. *Arch Environ Contam Toxicol.* 2013 Jan;64(1):119-129.
5. **Nakayama S.M.M**, et al. Metal contaminated soil from mining area caused metal accumulation and biological responses in rats. *JJVR*, 61:S77-S79 (2013)
6. **Yabe J** et al. Accumulation of metals in the liver and kidneys of cattle from agricultural areas in Lusaka, Zambia. *J Vet Med Sci.* 2012 Oct;74(10):1345-7.
7. **Nakayama SMM**, et al. Metal and metalloid levels and bio-accumulation characteristics in soil, sediment, land plants and hippopotami (*Hippopotamus amphibius* L) from the South Luangwa National Park, Zambia. *Ecotox Environ Saf.* 2012 Jun;80:333-8.
8. **Yabe J** et al. Uptake of lead, cadmium, and other metals in the liver and kidneys of cattle near a lead-zinc mine in Kabwe, Zambia. *Environ Toxicol Chem.* 2011 Aug;30(8):1892-7.
9. **Nakayama SMM** et al. Metal and metalloid contamination in roadside soil and wild rats around a Pb-Zn mine in Kabwe, Zambia. *Environmental Pollution* 159 (2011) 175-18.
10. **Yabe J**, et al. Current levels of heavy metal pollution in Africa. *J Vet Med Sci.* 2010 Oct;72(10):1257-63.
11. **Nakayama** , et al. Heavy metal accumulation in lake sediments, fish (*Oreochromis niloticus* and *Serranochromis thumbergi*) and crayfish (*Cherax quadricarinatus*) in Lake Itzhi-tezhi and Lake Kariba, Zambia. *Arch Environ Contam Toxicol.* 2010 Aug;59(2):291-300.



Research questions



- Extent of Pb pollution and poisoning in Kabwe?
- Exposure pathways?
- Health impact of Pb poisoning?
- Economic impact of Pb pollution?
- Neurodevelopmental impact of Pb poisoning?
- Suitable remedial measures?



PAST

PRESENT

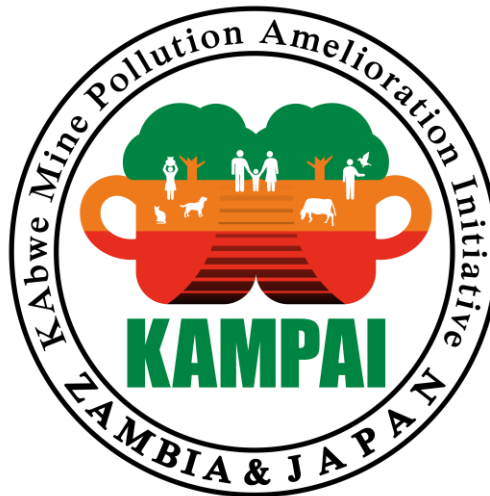
FUTURE

KAMPAI Project:

Kabwe **M**ining **P**ollution **A**melioration **I**nitiative

KAMPAI Project

Japanese side:
Hokkaido University



Zambian side:
University of Zambia and
GRZ Ministries



World Bank and Pure Earth (NPO)

KAMPAI Project Outputs

Output 1:
Monitoring and risk assessment in Kabwe mining area (and geo-ecological surveillance of broad areas in Zambia)



Faculty of Agriculture Science team:
Measurement of lead in soil and environmental samples in detail

Output 2:
Establishment of economic assessment system for human/animal health and ecosystem and visualization



Faculty of Veterinary Medicine, Medicine, Education and Economics team:
Risk and economics assessment

Output 3:
Development of geo-ecological database and remediation technology



Faculty of engineering team:
New environmental remediation technology of the soil

Output 4: Capacity building

Project preparatory meetings - 2015





Project Output 2 (2016 – 2020)

Specific objectives

- Measure blood Pb concentrations in mother (venous and cord blood) and child pairs in Kabwe
- Measure Pb levels (blood, urine and feces) in children under the age of 7
- Measure Pb concentrations in breast milk
- Measure biomarkers to determine the effects of Pb exposure
- Neurodevelopment assessment of Pb exposure in children
- Assess the socio-economical impact of Pb pollution in Kabwe

Blood Pb concentrations in children, maternal blood and breast milk

☐ Lead crosses the placenta

- Maternal and umbilical cord blood Pb levels have a strong correlation
- Blood Pb levels of the infant is similar to that of the mother

☐ Milk Pb levels

- Pb levels in breast milk increase with levels in maternal blood
- Concentrations in breast milk indicates postnatal exposure
- Fetuses and infants are at the highest risk of Pb neurotoxicity



Stable Pb isotope ratios and biomarkers

- Stable Pb isotope ratios
 - ICP-MS
 - To clarify source of exposure
- Blood biochemistry
 - COBAS Ready - blood chemical analyser
 - To determine health effects
- Plasma/Urine biomarker
 - HPLC-UV
 - To determine markers of exposure and effect

Neurodevelopment Assessment

- Children under 3 years of age
 - Infants and their mothers will be followed up for a period of 48 months at birth and thereafter every year
 - The Ages and Stages Questionnaire (ASQ) will be used to assess the cognitive, motor, language and behaviour of infants from one to 42 months of age

Neurodevelopment Assessment: 3-10 years old

- Zambia Child Assessment Tool (ZamCAT)
 - For preschool children to assess language, cognition and fine motor skills
- Neuropsychological Assessment Tool (NEPSY)
 - For 3-16 year old to assess subtle central nervous system deficits (social, academic and behavioural difficulties)
- Universal Nonverbal Intelligence Test (UNIT)
 - For 5-17 year old to assess general intelligence using nonverbal means
- Kaufman's Assessment Battery for Children (KABC-II)
 - For 7-18 year old to assess cognitive and mental processes (Sequential Processing, Simultaneous processing, Learning and Planning Ability)

Economic impact assessment

- The impact of lead in Kabwe will be “quantitatively” estimated to establish a model for new assessment system
- No study has compared the Pb exposure of individuals and their socioeconomic conditions for the Kabwe pollution case
- We will investigate the interaction between Pb concentrations of the studied individuals and their socioeconomic characteristics
- We will also investigate the economic consequences of the environmental and health effects in terms of productivity and other related consequences

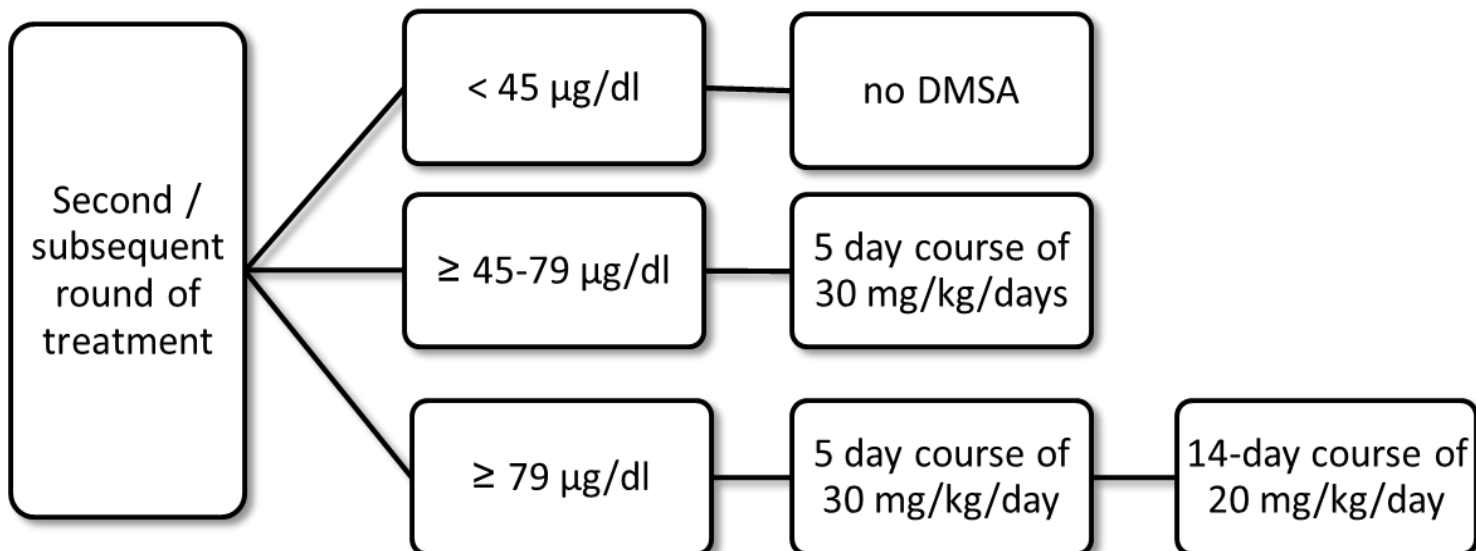
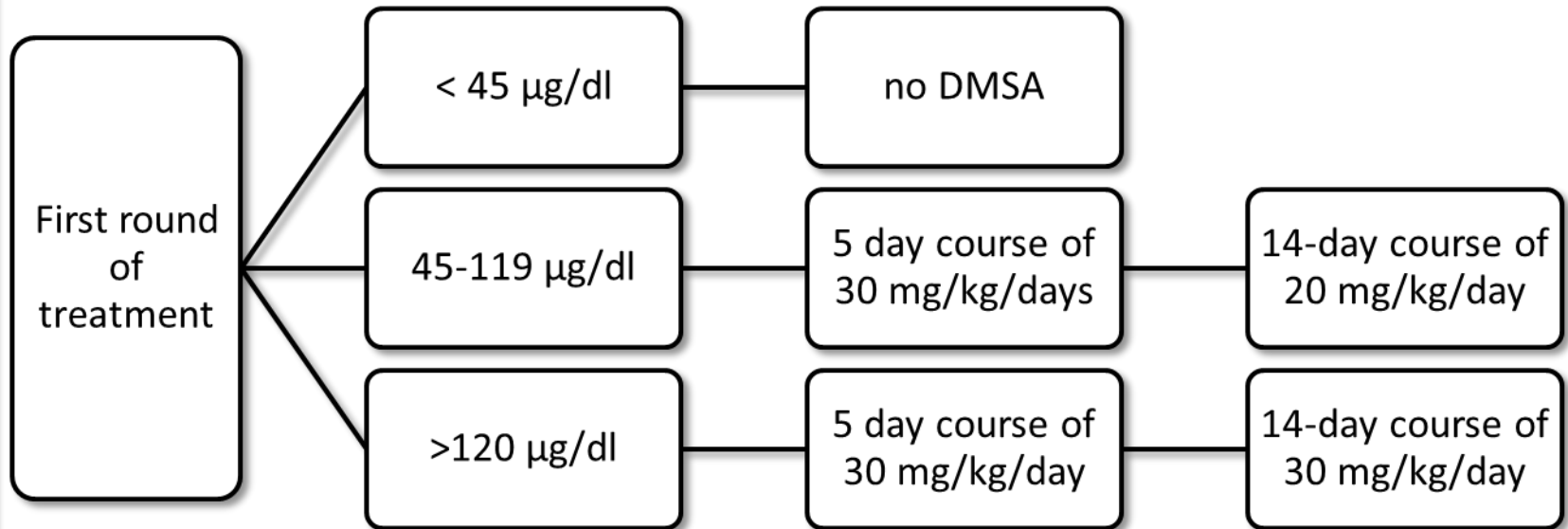
Ethical Considerations

- The following specific standards will be upheld:
 - Ethical clearance already obtained from UNZABREC
 - Clearance already obtained from (NHRA – MOH)
 - Written informed consent will be obtained from parents
 - Minimum risk will be upheld in the drawing of biologic samples by the local medical personnel
 - Samples (cord blood, breast milk, blood, hair and urine) will be disposed off according to stipulated guidelines
 - The presence of the parent/caregiver during the neurodevelopmental testing will also be a requirement
 - Respondents will be assured of confidentiality
 - Parents/guardians of affected children will be referred for further assessment and therapy for the child

Chelation therapy

- Intravenous formulations
 - When clinical symptoms consistent with lead poisoning or when blood lead levels are greater than **70 $\mu\text{g}/\text{dL}$**
 - **Edetate calcium disodium (CaNa₂EDTA)** can be used in conjunction with **dimercaprol**
- Oral formulations
 - Recommended for BLL > **45 $\mu\text{g}/\text{dL}$**
 - Dimercaptosuccinic Acid (**DMSA**, Succimer) is the drug most commonly used
 - Other oral agents include DMPS (Unithiol) and penicillamine
 - Zinc can be adversely affected by DMSA

Pb poisoning treatment protocol (DMSA)



Thank you for your attention

