

EXPEDIENTE PUBLICO

ROL: NOR 01/2000

Materia:

REVISIÓN DE LAS NORMAS PRIMARIAS DE CALIDAD DE AIRE PARA ANHÍDRIDO SULFUROSO (SO₂); PATÍCULAS TOTALES EN SUSPENSIÓN (PTS); MONÓXIDO DE CARBONO (CO); OZONO (O₃) Y DIÓXIDO DE NITRÓGENO (NO₂)



**GOBIERNO DE CHILE
COMISION NACIONAL
DEL MEDIO AMBIENTE**

Resolución de Inicio: 1514

PMC

DA INICIO AL PROCESO DE REVISION
DE NORMAS PRIMARIAS DE CALIDAD
DE AIRE PARA ANHÍDRIDO
SULFUROSO (SO2); PARTÍCULAS
TOTALES EN SUSPENSIÓN (PTS);
MONÓXIDO DE CARBONO (CO);
OZONO (O3); Y DIÓXIDO DE
NITRÓGENO (NO2).

SANTIAGO, 17 DIC 1999

EXENTA N° 1514

VISTOS:

Lo dispuesto en la Ley N°19.300, sobre Bases del Medio Ambiente; lo prescrito en el Decreto Supremo 93, de 1995, del Ministerio Secretaría General de la Presidencia; el Tercer Programa Priorizado de Normas, publicado en el Diario Oficial de fecha 15 de abril de 1998; y la Resolución Exenta N° 1215 de fecha 22 de junio de 1978 del Delegado del Gobierno en el Servicio Nacional de Salud.

CONSIDERANDO:

Que en sesión de 27 de marzo de 1998, el Consejo Directivo de la Comisión Nacional del Medio Ambiente, aprobó el Tercer Programa Priorizado de Normas, propuesto por su Director Ejecutivo.

Que con fecha 15 de abril de 1998, se publicó por aviso en extracto en el Diario Oficial el Tercer Programa Priorizado de Normas.

Que dentro de dicho Programa se incluye la revisión de las normas de calidad primaria de aire para Anhídrido Sulfuroso (SO2); Partículas Totales en Suspensión (PTS); Monóxido de Carbono (CO); Ozono (O3); y Dióxido de Nitrógeno (NO2), todas incluidas en la Resolución N° 1215 de 22 de Junio de 1978 del Delegado del Gobierno en el Servicio Nacional de Salud.

Que de conformidad con lo preceptuado en el artículo 11° del Decreto Supremo 93 de 1995, del Ministerio Secretaría General de la Presidencia, corresponde a esta Dirección Ejecutiva dictar la resolución que da inicio al proceso de elaboración del anteproyecto de revisión norma.

RESUELVO:


1°.- Dése inicio al procedimiento de revisión de las normas primarias de calidad de aire para anhídrido sulfuroso (SO₂); partículas totales en suspensión (PTS); monóxido de carbono (CO); ozono (O₃); y dióxido de nitrógeno (NO₂).

2°.- Fórmese un expediente para la tramitación del proceso de revisión de las referidas normas.

3°.- Fíjase como fecha límite para la recepción de antecedentes sobre los contaminantes a normar, el día número 70, contado desde la fecha de publicación de la presente resolución en un diario o periódico de circulación nacional. Cualquier persona natural o jurídica podrá, dentro del plazo señalado precedentemente, aportar antecedentes técnicos, científicos y sociales sobre las materias a normar.

4°.- Publíquese la presente resolución en el Diario Oficial y en un diario o periódico de circulación nacional.

Anótese, comuníquese, publíquese y archívese.



 ALVARO SAPAG RAJEVIC

 DIRECTOR EJECUTIVO (s)

17 DIC 1999

Lo que transcribo a Ud.
 para su conocimiento
 saluda atentamente a Ud.,
RODRIGO A. GONZALEZ P.
 Oficial de Partes
 Comisión Nacional del
 Medio Ambiente (CONAMA)

lvd/rich

Distribución:

- Organos Competentes de la Administración del Estado
- Departamento Jurídico
- Archivo *Ryn*

SUCEDER

Perro héroe

BUENOS AIRES.- Un perro salvó a un niño argentino de cuatro años que fue atacado por un enjambre de abejas, cubriéndolo con su cuerpo, para luego morir por las picaduras. El valiente can, llamado "Chocolate", se arrojó sobre Kharin Toloza para protegerlo, recibiendo cientos de picaduras. (Reuters)

Gran tumor

CHICAGO.- Un tumor de 91 kilos fue extirpado a una mujer estadounidense, durante una operación de 18 horas en el hospital de la Universidad de Chicago. Lorri Hoogewind, de 40 años, recibió en la intervención varias transfusiones de sangre, equivalentes a seis veces el volumen de sangre de su cuerpo. Sin el tumor benigno, Lorri bajó su peso de 140 a 54 kilos. (Reuters)

Contrato

LONDRES.- Un contrato previo, en el que los empleados que sean amantes de compañeros de trabajo aclaran que la relación es voluntaria, será aplicado por una empresa inglesa fabricante de medicinas. El objetivo es evitar que un final negativo del amor entre colegas termine en cargos de acoso sexual en las oficinas. (Ansa)



Triunfo opositor en Croacia

ZAGREB.- La oposición croata derrotó en las elecciones legislativas del martes a la hasta ahora gobernante ultranacionalista Unión Democrática Croata (HDZ) del recientemente fallecido Presidente Franjo Tudjman. La gran vencedora fue la coalición integrada por el Partido Social Demócrata (SDP) y el Liberal Social (HSLD). "Tendremos que probar que Croacia tiene potenciales económicos y democráticos muy buenos y creo que lo lograremos", señaló el líder del SDP, Ivica Racan, que en la foto (con la botella) se prepara para celebrar junto al líder del HSLD, Drazen Budisa. (Efe)

DENUNCIAN "cataclismo" económico provocado por anterior gobierno

Alianza argentina defiende rol del Estado

Efe
BUENOS AIRES

La Alianza política que gobierna en Argentina denunció que el país fue llevado al "cataclismo" por una "poderosa ideología según la cual el Estado debe retirarse de todo y abandonar las áreas en las cuales tiene misiones indelegables que cumplir".

En un comunicado emitido bajo el título: "Hacia una Argentina solidaria", la coalición defendió la decisión del Presidente Fernando de la Rúa de promover el aumento en diversos impuestos que impactan en mayor medida sobre los ingresos de la clase media, la mayor fuente de votos de la

Alianza.

"La lucha contra la exclusión y la injusticia ha comenzado", dice el comunicado difundido con las firmas del ex Presidente (1983-1989) argentino y líder de la Unión Cívica Radical (UCR), Raúl Alfonsín, y de Carlos 'Chacho' Alvarez, actual vicepresidente y jefe del Frente del País Solidario (Frepaeso).

Según la Alianza UCR-Frepaeso, la reforma tributaria que aprobó la semana pasada el Parlamento por impulso de De la Rúa busca objetivos simultáneos: "que paguen los que más tienen y que influya positivamente sobre la competitividad, el crecimiento y el empleo".

La reforma tributaria asignó impuestos a diversos productos de consumo y aumentó

las tasas de los gravámenes a las ganancias y bienes personales que pagan los sectores de mejores ingresos.

El gobierno planea recaudar unos mil 900 millones de dólares adicionales con esta reforma, a lo que sumará un ahorro de mil 400 millones en el gasto público, con el objetivo de mantener el déficit de las cuentas públicas por debajo del límite de cuatro mil 500 millones de dólares.

Los aliancistas, en una ataque a la administración de Carlos Menem, que gobernó el país hasta el 10 de diciembre, sostuvieron que son conscientes de que hay "millones de argentinos sin trabajo debido a una política económica que destruyó la producción".

VISTAZO

Con honores de reina

MADRID.- Miles de españoles dieron su último adiós a María de las Mercedes de Borbón, madre del Rey Juan Carlos, quien fue sepultada ayer en el Monasterio de El Escorial -unos 50 kilómetros al noroeste de Madrid-, donde descansa su marido Juan de Borbón, fallecido en 1993. La condesa de Barcelona, quien murió el domingo a los 89 años, fue enterrada con honores de reina (aunque su marido nunca llegó a gobernar debido a la permanencia en el poder del dictador Francisco Franco: 1939-1975) en el Panteón de Reyes de El Escorial, por expreso deseo del Rey.

Alerta por plutonio

MEXICO.- La organización ambientalista Greenpeace llamó a los países de América Latina a organizarse para impedir el traslado de un cargamento de plutonio por los mares del Caribe y el Canal de Panamá. El cargamento que denominó "Chernobyl flotante" proviene de Francia y tiene como destino Japón, detalló Greenpeace en un comunicado divulgado en la capital mexicana. Los países de América Latina y los organismos regionales deben exigir respeto a sus declaraciones contra el paso de este tipo de embarques, aseguró Greenpeace.

Chechenia: avance rebelde

NAZRAN.- El ejército ruso reconoció ayer que la situación en Grozny es "extremadamente complicada" tras el éxito de los contraataques chechenos al recuperar varias aldeas cercanas a la capital de la república separatista. Una parte del cuartel general de las Tropas Unificadas confirmó indirectamente la toma de Aljan-Yurt, Aljan-Kalá y Kulari por los guerrilleros, al presentarla como una "intento fallido" rebelde por romper el asedio a Grozny.

Rabinos defienden Golán

JERUSALEN.- Los rabinos israelíes entraron de lleno en la lucha contra la devolución a Siria de las Alturas del Golán, publicando ayer una "halajá" (dictamen rabínico) por el que se prohíbe la entrega de ese territorio. La intervención de los rabinos se produce en momentos en que en Estados Unidos se lleva a cabo la segunda ronda de negociaciones de paz a alto nivel entre Israel y Siria, cuyo tema central es la disputa por el Golán.

"Rabiosa campaña" india

ISLAMABAD.- El ministro de Relaciones Exteriores de Pakistán, Abdul Sattar, criticó ayer duramente a su vecino, la India, y acusó al gobierno de Nueva Delhi de lanzar una "rabiosa campaña de propaganda" para intentar aislar a los paquistaníes (140 millones). Sattar dijo que su país está furioso por el pedido formulado el lunes por el Primer Ministro indio para que se declare a Pakistán un Estados terrorista, tras acusarlo de propiciar el secuestro de un avión de Indian Airlines.



COMISION NACIONAL DEL MEDIO AMBIENTE

DA INICIO AL PROCESO DE REVISIÓN DE NORMAS PRIMARIAS DE CALIDAD DE AIRE PARA ANHÍDRIDO SULFUROSO (SO₂); PARTÍCULAS TOTALES EN SUSPENSIÓN (PTS); MONÓXIDO DE CARBONO (CO); OZONO (O₃); Y DIÓXIDO DE NITRÓGENO (NO₂).

SANTIAGO, 17 de diciembre de 1999

EXENTA Nº 1514

VISTOS:

Lo dispuesto en la Ley Nº 19.300, sobre Bases del Medio Ambiente; lo prescrito en el Decreto Supremo 93, de 1995, del Ministerio Secretaría General de la Presidencia; el Tercer Programa Priorizado de Normas, publicado en el Diario Oficial de fecha 15 de abril de 1998; y la Resolución Exenta Nº 1215 de fecha 22 de junio de 1978 del Delegado de Gobierno en el Servicio Nacional de Salud.

CONSIDERANDO:

Que en sesión de 27 de marzo de 1998, el Consejo Directivo de la Comisión Nacional del Medio Ambiente, aprobó el Tercer Programa Priorizado de Normas, propuesto por su Director Ejecutivo.

Que con fecha 15 de abril de 1998, se publicó por aviso en extracto en el Diario Oficial el Tercer Programa Priorizado de Normas.

Que dentro de dicho programa se incluye la revisión de las normas de calidad primaria de aire para Anhídrido Sulfuroso (SO₂); Partículas Totales en Suspensión (PTS); Monóxido de Carbono (CO); Ozono (O₃); y Dióxido de Nitrógeno (NO₂), todas incluidas en la Resolución Nº 1215 de 22 de Junio de 1978 del Delegado de Gobierno en el Servicio Nacional de Salud.

Que de conformidad con lo preceptuado en el artículo 11º del Decreto Supremo 93 de 1995, del Ministerio Secretaría General de la Presidencia, corresponde a esta Dirección Ejecutiva dictar la resolución que da inicio al proceso de elaboración del anteproyecto de revisión de norma.

RESUELVO:

1º.- Dése inicio al procedimiento de revisión de las normas primarias de calidad de aire para anhídrido sulfuroso (SO₂); partículas totales en suspensión (PTS); monóxido de carbono (CO); ozono (O₃); y dióxido de nitrógeno (NO₂).

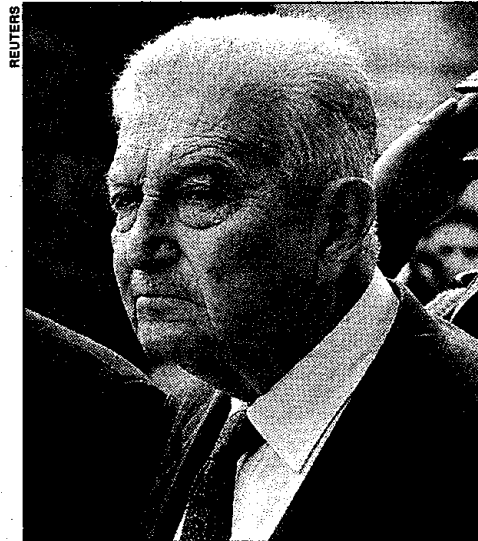
2º.- Fórmese un expediente para la tramitación del proceso de revisión de las referidas normas.

3º.- Fijase como fecha límite para la recepción de antecedentes sobre los contaminantes a normar, el día número 70, contado desde la fecha de publicación de la presente resolución en un diario o periódico de circulación nacional. Cualquier persona natural o jurídica podrá, dentro del plazo señalado precedentemente, aportar antecedentes técnicos, científicos y sociales sobre las materias a normar.

4º.- Publíquese la presente Resolución en el Diario Oficial y en un diario o periódico de circulación nacional.

Anótese, comuníquese, publíquese y archívese.

ALVARO SAPAG RAJEVIC
DIRECTOR EJECUTIVO (s)



Weizman podría renunciar

JERUSALEN.- El Presidente de Israel, Ezer Weizman (foto), enfrenta fuertes presiones para que presente su renuncia, luego que fuera acusado de aceptar secretamente dinero (medio millón de dólares) de parte de un magnate francés siendo funcionario público. Mientras, el ex Primer Ministro israelí y Premio Nobel de la Paz, Simón Peres, se presenta como el más probable sucesor de Weizman en caso de que se concrete la dimisión. Según la prensa local, tanto el actual Premier, el laborista Ehud Barak, como la mayoría de los legisladores israelíes, incluidos muchos opositores, respaldarían a Peres. (Ap, Efe)

**Ministerio Secretaría General
de la Presidencia**

Comisión Nacional del Medio Ambiente

DA INICIO AL PROCESO DE REVISION DE NORMAS PRIMARIAS DE CALIDAD DE AIRE PARA ANHIDRIDO SULFUROSO (SO2); PARTICULAS TOTALES EN SUSPENSION (PTS); MONOXIDO DE CARBONO (CO); OZONO (O3); Y DIOXIDO DE NITROGENO (NO2)

(Resolución)

Núm. 1.514 exenta.- Santiago, 17 de diciembre de 1999.- Vistos: Lo dispuesto en la ley Nº19.300, sobre Bases del Medio Ambiente; lo prescrito en el decreto supremo 93, de 1995, del Ministerio Secretaría General de la Presidencia; el Tercer Programa Priorizado de Normas, publicado en el Diario Oficial de fecha 15 de abril de 1998; y la resolución exenta Nº1.215 de fecha 22 de junio de 1978 del Delegado del Gobierno en el Servicio Nacional de Salud.

Considerando:

Que en sesión de 27 de marzo de 1998, el Consejo Directivo de la Comisión Nacional del Medio Ambiente, aprobó el Tercer Programa Priorizado de Normas, propuesto por su Director Ejecutivo.

Que con fecha 15 de abril de 1998, se publicó por aviso en extracto en el Diario Oficial el Tercer Programa Priorizado de Normas.

Que dentro de dicho Programa se incluye la revisión de las normas de calidad primaria de aire para Anhídrido Sulfuroso (SO2); Partículas Totales en Suspensión (PTS); Monóxido de Carbono (CO); Ozono (O3); y Dióxido de Nitrógeno (NO2), todas incluidas en la resolución Nº1.215 de 22 de junio de 1978 del Delegado del Gobierno en el Servicio Nacional de Salud.

Que de conformidad con lo preceptuado en el artículo 11º del decreto supremo 93 de 1995, del Ministerio Secretaría General de la Presidencia, corresponde a esta Dirección Ejecutiva dictar la resolución que da inicio al proceso de elaboración del anteproyecto de revisión norma.

Resuelvo:

1º.- Dése inicio al procedimiento de revisión de las normas primarias de calidad de aire para anhídrido sulfuroso (SO2); partículas totales en suspensión (PTS); monóxido de carbono (CO); ozono (O3); y dióxido de nitrógeno (NO2).

2º.- Fórmese un expediente para la tramitación del proceso de revisión de las referidas normas.

3º.- Fijase como fecha límite para la recepción de antecedentes sobre los contaminantes a normar, el día número 70, contado desde la fecha de publicación de la presente resolución en un diario o periódico de circulación nacional. Cualquier persona natural o jurídica podrá, dentro del plazo señalado precedentemente, aportar antecedentes técnicos, científicos y sociales sobre las materias a normar.

4º.- Publíquese la presente resolución en el Diario Oficial y en un diario o periódico de circulación nacional.

Anótese, comuníquese, publíquese y archívese.- Alvaro Sapag Rajevic, Director Ejecutivo (S).

Lo que transcribo a Ud. para su conocimiento.- Saluda atentamente a Ud., Rodrigo A. González P., Oficial de Partes Comisión Nacional del Medio Ambiente (Conama)

OTRAS ENTIDADES

Banco Central de Chile

TIPOS DE CAMBIO Y PARIDADES DE MONEDAS EXTRANJERAS PARA EFECTOS DEL NUMERO 6 DEL CAPITULO I DEL TITULO I DEL COMPENDIO DE NORMAS DE CAMBIOS INTERNACIONALES Y CAPITULO II.B.3. DEL COMPENDIO DE NORMAS FINANCIERAS AL 5 DE ENERO DE 2000

Tipo de Cambio \$ (Nº 6 del C.N.C.I.)	Paridad Respecto US\$
Dólar EE.UU. *	529,08 1,000000
Dólar Canadá	364,88 1,450000
Dólar Australia	347,07 1,524400
Dólar Neozelandés	274,80 1,925300
Libra Esterlina	866,49 0,610600

Marco Alemán	278,77	1,897900
Yen Japonés	5,13	103,059000
Franco Francés	83,12	6,365400
Franco Suizo	339,70	1,557500
Franco Belga	13,52	39,145800
Florín Holandés	247,42	2,138400
Lira Italiana	0,28	1878,956400
Corona Danesa	73,22	7,226000
Corona Noruega	66,58	7,946600
Corona Sueca	63,21	8,370000
Peseta	3,28	161,460900
Yuan	63,90	8,279900
Schilling Austria	39,62	13,352900
Markka	91,70	5,769700
EURO	545,22	0,970400
DEG	731,17	0,723608

* Tipo de cambio que rige para efectos del Capítulo II.B.3. Sistemas de reajustabilidad autorizados por el Banco Central de Chile (Acuerdo Nº 05-07-900105) del Compendio de Normas Financieras.

Santiago, enero 4 de 2000.- Miguel Angel Nacur Gazali, Ministro de Fe.

TIPO DE CAMBIO PARA EFECTOS DEL NUMERO 7 DEL CAPITULO I DEL TITULO I DEL COMPENDIO DE NORMAS DE CAMBIOS INTERNACIONALES

El tipo de cambio "dólar acuerdo" (a que se refiere el inciso primero del Nº 7 del Capítulo I, Título I del Compendio de Normas de Cambios Internacionales), fue de \$496,78 por dólar, moneda de los Estados Unidos de América, para el día 4 de enero de 2000.- Miguel Angel Nacur Gazali, Ministro de Fe.

ACUERDO ADOPTADO POR EL CONSEJO DEL BANCO CENTRAL DE CHILE EN SU SESION Nº 812

(Certificado)

Certifico que el Consejo del Banco Central de Chile en su Sesión Nº 812, celebrada el 29 de diciembre de 1999, adoptó el siguiente Acuerdo:

812-02-991229 - Banco Santiago - Autorización para emitir tarjeta que indica

Se acordó autorizar a Banco Santiago para emitir la tarjeta de crédito que se indica:

Entidad Emisora	Tarjeta a emitir	Modalidad
Banco Santiago	American Express	Nacional e Internacional

Santiago, 29 de diciembre de 1999.- Miguel Angel Nacur Gazali, Ministro de Fe.

Municipalidades

MUNICIPALIDAD DE LA FLORIDA

MODIFICA ORDENANZA LOCAL Nº 1 SOBRE DERECHOS MUNICIPALES

Núm.- 26.- La Florida, diciembre 22 de 1999.- Vistos: La Ordenanza Local sobre Derechos Municipales Nº 1, de 27 de diciembre de 1996; el Memorandum Nº 1.496 de la Dirección de Tránsito y Transporte Público de fecha 19 de noviembre de 1999; el Ordinario Nº 202 del Alcalde de fecha 15 de diciembre de 1999; el Acuerdo Nº 675 del Concejo Municipal de fecha 16 de diciembre de 1999; el decreto ley Nº 3.063 de "Rentas Municipales" y las facultades que me confiere la ley Nº 18.695 "Orgánica Constitucional de Municipalidades";

Considerando: La necesidad de modificar la Ordenanza Local Nº 1, incorporando un nuevo derecho municipal relacionado al Derecho por Fotografía Digitalizada para el otorgamiento de Licencias de Conducir, dicto la siguiente:

Ordenanza:

Artículo 1º: Modifícase la Ordenanza Local Nº 1 sobre Derechos Municipales, Título IV sobre Tránsito y Transporte Público, en el siguiente sentido:

Agréguese un número 18º al artículo 9º del referido cuerpo normativo:

Nº 18: Derecho por Fotografía Digitalizada para el otorgamiento de Licencias de Conducir: 0,050 U.T.M.

Artículo 2º: La presente modificación empezará a regir a contar del 1º de enero del año 2000.

Anótese, comuníquese, publíquese en el Diario Oficial y hecho, archívese.- Gonzalo Duarte Leiva, Alcalde.- Dina Castillo González, Secretario Municipal.

MUNICIPALIDAD DE LA REINA

MODIFICA ORDENANZA SOBRE DERECHOS, CONCESIONES, PERMISOS Y SERVICIOS

Núm. 996.- La Reina, diciembre 21 de 1999.- Vistos: El decreto alcaldicio Nº 49 de 18 de enero de 1999 que fija el texto refundido, coordinado y actualizado de la Ordenanza de la comuna de La Reina sobre Derechos, Concesiones, Permisos y Servicios; el Acuerdo Nº 668 de fecha 21 de diciembre de 1999 del Concejo Municipal de La Reina; el decreto alcaldicio Nº 111 de fecha 7 de febrero de 1997, sobre subrogancias; los artículos Nº 23 y 41 del decreto ley 3.063 (Ley de Rentas Municipales); y en uso de las atribuciones que me confieren los artículos 17 y 56 de la Ley 18.695 Orgánica Constitucional de Municipalidades.

Decreto:

Modifícase la Ordenanza de la comuna de La Reina sobre Derechos, Concesiones, Permisos y Servicios, de la siguiente manera:

- Se modifica el artículo 11 de la siguiente manera:
 - En el Nº 5, se reemplaza la expresión "\$100" por "\$120".
 - En el Nº 6, se reemplaza la expresión "\$50" por "\$60". Esta modificación surtirá efectos a partir del 1 de marzo del año 2000.
 - En el Nº 7, se reemplaza la expresión "valor anual 3 UTM" por "valor semestral 1,5 UTM".
 - Se agrega el Nº 10, cuyo tenor es el siguiente: "10. Casetas telefónicas, valor mensual 0,5 UTM"
- Se reemplaza el texto del Nº 2 del artículo 12, por el siguiente: "Puesto de frutas y verduras de la temporada, por mes o fracción, de diciembre a marzo 0,25 UTM".
- Se elimina el Nº 6 del artículo 12.
- En el artículo 13, Nº 13, a continuación de la expresión "avant-premier," se elimina el texto y se reemplaza por: "filmaciones u otros similares, por día 0,25 UTM".
- Se modifica el artículo 15 de la siguiente manera:
 - a- Se reemplaza el texto del Nº 8, por el siguiente: "Aprobación de planos para la Ley sobre Copropiedad Inmobiliaria por unidad a vender 0,2 UTM por unidad."
 - b- En el Nº 13, se reemplaza la expresión "Venta por pisos" por "Ley sobre Copropiedad Inmobiliaria".
 - c- En el Nº 13, donde dice "Modificación de deslindes 1,5% del avalúo fiscal del terreno", se reemplaza por "Modificación de deslindes 1,5% del avalúo fiscal de cada terreno".
- Se modifica el artículo 17 de la siguiente manera:
 - a- En el Nº 1, se reemplaza el guarismo "1,5 UTM" por "3 UTM".
 - b- En el Nº 2, se reemplaza el guarismo "1,5 UTM hasta 500 m², 3 UTM sobre 500 m²" por "UTM hasta 500 m², 5 UTM sobre 500 m²".
 - c- En el Nº 3, se reemplaza la expresión "5 UTM" por "7 UTM".
 - d- En el Nº 4, se reemplaza el texto por el siguiente: "Ocupación de vía pública por particulares con escombros, materiales de construcción, instalaciones de faenas, cierros provisorios, torres, grúas, camiones concretos u otro tipo de maquinarias o faenas ligadas a la construcción, por cada m² de ocupación los primeros 10 días 0,05 UTM por m². El exceso sobre los primeros 10 días deberá cancelar como adicional el equivalente al mismo valor hasta completar los 20 días siguientes y así sucesivamente con un máximo de 30 días. Por cada día de exceso sobre los 30 días, se pagará el equivalente a los primeros 10 días.
- En el artículo 18, se reemplaza el guarismo "3%" por "4%".

20-01-2000

000005

Identificador Interno 16.168

Fecha Ingreso 20-01-2000

Número asignado en el Libro 75/fx

Origen UNIV. CATOLICA DE CHILE, JEANETTE VEGA

Prioridad NORMAL

Tipo Documento : CARTA 19.01.2000

Con Copias .

Destino : EGAÑA BARAONA RODRIGO

Dpto./Unidad DIRECCION EJECUTIVA

Descripción : REVISIÓN NORMAS PRIMARIAS DE CALIDAD DEL AIRE. AL RESPECTO, DESIGNA COMO REPRESENTANTE ANTE EL COMITÉ REVISOR, A SRA. JEANETTE VEGA Y DR. GONZALO VALDIVIA.

Primera Derivación P. Matos

ENVIADO A JEFE DE

PARA

TIPO DE DOCUMENTO

PLAZO PARA GENERAR ACCIO

- Dirección Ejecutiva
- Fiscalía
- Administración, Finanzas y Person
- Evaluación de Impacto Ambiental
- Descontaminación, Planes y Norma
- Gestión SINIA y S. de informació
- Recursos Naturales
- Participación Ciudadana
- Economía Ambiental
- Unidad de Proyectos
- Asesor Técnico
- Relaciones Internacionales
- Política
- Regiones
- Comunicaciones
- Cooperación Internacional
- Adquisiciones
- Capacitación
- Dirección Regional Conama
- Nº Región

- Conocimiento
- Informar al Respecto
- Dar curso/Tramites
- Resolver
- Preparar Respuesta
- Responder Directamente
- Acuse Recibo
- Biblioteca
- Su Opinión
- Dar Audiencia
- Dar Difusión
- Reclasificar
- Otro

- Secreto
- Confidencial
- Reservado
- Ordinario

Observaciones : ei. —

Segunda Derivación

ENVIADO A :

PARA

1 2 3

UNA VEZ HECHO

1 2 3

- Conocimiento
- Resolver
- Preparar Respuesta
- Adjuntar Antecedentes
- Acusar Recibo
- Dar Difusión
- Visto Bueno

- Devolverme Dcto.
- Reportar Avance
- Archivar
- Otro

Plazo

Rodrigo

Observaciones

Tercera Derivación

ENVIADO A :

PARA

UNA VEZ HECHO

OBSERVACIONES

- Conocimiento
- Resolver
- Preparar Respuesta
- Adjuntar Antecedentes
- Acusar Recibo
- Dar Difusión
- Visto Bueno

- Devolverme Dcto.
- Reportar Avance
- Archivar
- Otro

Referencia a : _____ Archivado en : _____

Firma responsable

20 ENF 2000

F. Zúñiga # 75

Suarez

70 # 16168 -

000006



PONTIFICIA UNIVERSIDAD CATÓLICA DE CHILE
DEPARTAMENTO SALUD PÚBLICA / FACULTAD DE MEDICINA

Santiago, 19 de Enero del 2000

Sr. Alvaro Sapag Rajevic
Director Ejecutivo (s)
Comisión Nacional del Medio Ambiente
Obispo Donoso N° 6
Santiago

Re: Revisión normas Primarias de Calidad del Aire

Estimado Sr. Sapag

Mediante la presente informo a Ud. que con mucho gusto participaré como integrante del Comité Ampliado para Revisión de las Normas Primarias de Calidad del Aire. En caso de no poder asistir a alguna de las reuniones, irá en mi reemplazo la el Dr. Gonzalo Valdivia, profesor Auxiliar de este Departamento.

Sin otro particular , le saluda atentamente

DEPARTAMENTO DE SALUD PUBLICA
Facultad de Medicina
Pontificia Universidad Católica de Chile

Jeanette Vega
Dra. Jeanette Vega M.
Profesora Adjunta Asociada
Departamento de Salud Pública

000007

COMISION CHILENA DEL COBRE



V.P.E. N° 094

OFICIO N° - 028

ANT.: ORD.OF. N° 00171

MAT.: Revisión Normas Primarias de
Calidad de Aire.-

SANTIAGO,

19 ENE 2000


30-#16162.-
COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO
N° INGRESO: 664/395
FECHA: 20 ENE 2000
DESPACHADO:
CARE:
N-3600A

DE : VICEPRESIDENTE EJECUTIVO
COMISION CHILENA DEL COBRE

A : DIRECTOR EJECUTIVO
COMISION NACIONAL DEL MEDIO AMBIENTE

De acuerdo a lo solicitado en su oficio de antecedentes, tengo el agrado de informar a usted que, para los efectos de representar a la Comisión Chilena del Cobre en el Comité Operativo que se abocará a la revisión de las Normas Primarias de Calidad de Aire, he resuelto nominar en el carácter de representante oficial al ingeniero de la Dirección de Gestión Estratégica señor Pedro Santic Contreras y como suplente, a la ingeniero de la Dirección de Estudios señora Paula Aranda Ortega.

Sin otro particular saluda atentamente a usted,


COMISION CHILENA DEL COBRE
VICEPRESIDENCIA
EDUARDO TITELMAN GOREN
Vicepresidente Ejecutivo



INSTITUTO DE INGENIEROS
CHILE

000008

Santiago, 19 de Enero de 2000

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO
Nº INGRESO: 686 / 411
FECHA: 20 ENE 2000
DESIGNADO: []
DESIGNADO: A. SAPAG []
16184

Señor Alvaro Sapag R.
Director Ejecutivo (S)
Comisión Nacional del Medio Ambiente
Presente

De mi consideración:

Por especial encargo del Presidente del Instituto de Ingenieros de Chile Sr. Alvaro Fischer A., tengo el agrado de acusar recibo de su Oficio Ordinario N°000172 de fecha 14.01.2000, por medio del cual se solicita que nuestra Corporación nombre un representante oficial y un reemplazante para integrar el Comité Ampliado que intervendrá en la elaboración de la norma que en el documento se describe.

Conforme a lo solicitado, informo a usted que se ha designado representante oficial al Sr. Roberto Abeliuk, Presidente de la Comisión de Medio Ambiente del Instituto y a la Sra. Marcela Alday, integrante de la Comisión mencionada como reemplazante.

Le saluda con especial atención,


CARLOS GAUTHIER T.
Gerente

C/C: Sr. Roberto Abeliuk.
Sra. Marcela Alday.

000009



**INSTITUTO DE INGENIEROS
CHILE**

Santiago, 19 de Enero de 2000

20 # 16207 -

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

FAX:

N° INGRESO:

FECHA: 20-ENE-2000

DESPACHADO:

OBS.:

Señor Alvaro Sapag R.
Director Ejecutivo (S)
Comisión Nacional del Medio Ambiente
Presente

De mi consideración:

Por especial encargo del Presidente del Instituto de Ingenieros de Chile Sr. Alvaro Fischer A., tengo el agrado de acusar recibo de su Oficio Ordinario N°000172 de fecha 14.01.2000, por medio del cual se solicita que nuestra Corporación nombre un representante oficial y un reemplazante para integrar el Comité Ampliado que interviene en la elaboración de la norma que en el documento se describe.

Conforme a lo solicitado, informo a usted que se ha designado representante oficial al Sr Roberto Abeliuk, Presidente de la Comisión de Medio Ambiente del Instituto y a la Sra. Marcela Alday, integrante de la Comisión mencionada como reemplazante.

Le saluda con especial atención,

CARLOS GAUTHIER T.
Gerente

C/C: Sr. Roberto Abeliuk.
Sra. Marcela Alday.



COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

000010

FAX: 83

Nº INGRESO:

FECHA: 24 ENE 2000

DESPACHADO:

OBS.: [Handwritten signature and stamp]

[Handwritten signature and stamp]

162421

Santiago, Enero 21 del 2000

Señor
Alvaro Sapag Rajevic
Director Ejecutivo (S)
Comisión Nacional del Medio Ambiente
Presente

Estimado Señor Sapag::

En atención a su solicitud de nombrar a representantes que participen en el Comité Ampliado que intervenga en la elaboración de las Normas Educativas de Calidad de Aire, confirmo que el representante oficial de Claiiss será el Dr. Fernando Latorre Rojas y su reemplazante será quien suscribe.

Sin otro particular, saluda atentamente a Ud.,

[Handwritten signature]
Salvador Grillo Fouce
Subdirector

Santiago, 20 de Enero de 2000
N° 031/2000

Señor
Rodrigo Egaña B
Director Ejecutivo
Comisión Nacional del Medio Ambiente

Presente:

De nuestra consideración:

Hemos tomado conocimiento, a través de su carta N° 000172, enviada el 14 de enero, del inicio del proceso de revisión de las normas primarias de calidad de aire para anhídrido sulfuroso (SO₂), partículas totales en suspensión (PTS); monóxido de carbono (CO); ozono (O₃) y dióxido de nitrógeno (NO₂).

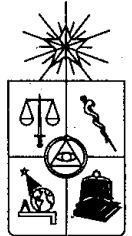
En consideración a que estas normas en revisión son del mayor interés para el sector minero, quisiéramos solicitar nuestra participación en el Comité Ampliado de la norma de SO₂ a través de los señores Fernando Valenzuela, Gerente de Asuntos Ambientales y Regulatorios de Cía. Minera Disputada de Las Condes y el señor Carlos Salvo, Asesor de Asuntos Ambientales y Regulatorios de Cía. Minera Disputada de Las Condes.

Esperando una positiva acogida a nuestra solicitud, saluda atentamente a usted,


Hernan Hochschild Alessandri
Presidente

cc.: Sra, Patricia Matus
Jefe Unidad de Normas y Planes de Descontaminación

16287
COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTICULAS Y AEROSOL
N° INSTRUCCION: 775/470
FECHA: 21 ENE 2000
A. EGAÑA



Santiago, 24 de Enero, 2000

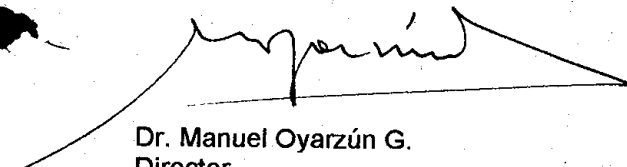
Sr. Alvaro Sapag Rajevic
Director Ejecutivo (S)
Comisión Nacional del Medio Ambiente
Obispo Donoso 6, Providencia
PRESENTE

Estimado Sr. Sapag,

En respuesta a su Ord. Of. N° 172 del 14 de enero del presente año, solicitándome la nominación de un representante oficial y un reemplazante para formar parte del Comité ampliado que intervenga en la revisión de normas primarias de calidad de aire, cumpla en comunicarle que en este caso los nominados son las siguientes personas:

Dr. Manuel Oyarzún Gómez, como representante oficial
Dra. Marta Adonis Parraguez; como reemplazante.

Lo saluda muy atentamente,


Dr. Manuel Oyarzún G.
Director,
Centro de Investigaciones del Medio Ambiente y Biomedicina (CIMAB),
Facultad de Medicina,
Universidad de Chile.

70 7 16 300 -

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

N° INGRESO: 74 / 469

FECHA: 24 ENE 2000

DESACIADO:

DES: 25/01/20 92

D. Sapag Rajevic

000013



SOFOFA

Santiago, 26 de Enero de 2000

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

FAX: 93.-

Nº INGRESO: 16352

FECHA: 26ENE.2000

DESPACHADO:

OBS.: [Redacted]

[Redacted] A SAPAG R

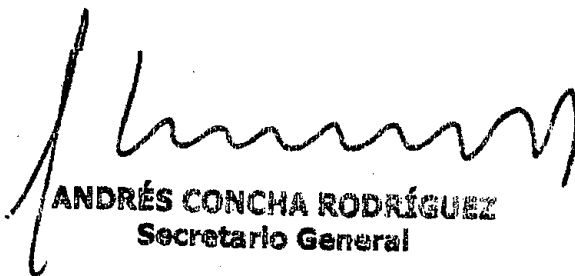
AM

Señor
Alvaro Sapag R.
Director Ejecutivo (s)
CONAMA
PRESENTE

Estimado señor Director:

En respuesta a su atento Oficio de fecha 14 de Enero de 2000, donde se nos informa de la apertura del proceso de revisión de las normas primarias de calidad de aire para anhídrido sulfuroso (SO2); partículas totales en suspensión (PTS), monóxido de carbono (CO); ozono (O3) y dióxido de nitrógeno (NO2), hemos decidido nominar como representante oficial de la Sociedad de Fomento Fabril, en este proceso a Don **ANIBAL MEGE THIERRY**, y como reemplazante a don **JAIME DINAMARCA SARATE**.

Atentamente,


ANDRÉS CONCHA RODRÍGUEZ
Secretario General



000014

PONTIFICIA UNIVERSIDAD CATÓLICA DE CHILE

DEPARTAMENTO SALUD PÚBLICA / FACULTAD DE MEDICINA

Santiago, 19 de Enero del 2000 ^{76308.}

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

Nº INGRESO: 848 / 515

FECHA: 26 ENE 2000

DESIGNADO: *A. SAPAG* *7230*

Sr. Alvaro Sapag Rajevic
Director Ejecutivo (s)
Comisión Nacional del Medio Ambiente
Obispo Donoso N° 6
Santiago

Re: Revisión normas Primarias de Calidad del Aire

Estimado Sr. Sapag

Mediante la presente informo a Ud. que con mucho gusto participaré como integrante del Comité Ampliado para Revisión de las Normas Primarias de Calidad del Aire. En caso de no poder asistir a alguna de las reuniones, irá en mi reemplazo la el Dr. Gonzalo Valdivia, profesor Auxiliar de este Departamento.

Sin otro particular , le saluda atentamente

Jeanette Vega
DEPARTAMENTO DE SALUD PUBLICA
Facultad de Medicina
Pontificia Universidad Católica de Chile

Dra. Jeanette Vega M.
Profesora Adjunta Asociada
Departamento de Salud Pública

MIT

COMISION NACIONAL DEL MEDIO AMBIENTE
 OFICINA DE PARTES Y CONTROL
 N° INGRESO: 854 / 521
 FECHA: 26 ENE 2000
 DEPARTAMENTO: 16º 512
 N. SAPAG
 10372 100

Ministerio de
 Transportes y
 Telecomunicaciones

OFICIO ORD. DEN N° _____ /

ANT.: Su Oficio N° 000171 del 14 de enero de 2000.

MAT.: Designa representantes de esta Cartera de Estado en materia que indica.

SANTIAGO, 25 ENE 2000

DE: SR. VICENTE PARDO DIAZ
 SUBSECRETARIO DE TRANSPORTES (S)

A : SR. ALVARO SAPAG RAJEVIC
 DIRECTOR EJECUTIVO (S)
 COMISIÓN NACIONAL DEL MEDIO AMBIENTE

En atención al oficio citado en ANT., esta Secretaría de Estado, con el ánimo de participar y colaborar en el Comité Operativo para la revisión de las normas Primarias de Calidad del Aire para anhídrido sulfuroso (SO2); partículas totales en suspensión (PTS) monóxido de carbono (CO); ozono (O3) y dióxido de nitrógeno (NO2), ha designado a los siguientes profesionales.

- Sr. Andrés Portales Muñoz
 Ingeniero del Departamento Elaboración de Normas
- Sr. Jaime Retamal Pinto
 Jefe Departamento Elaboración de Normas (en calidad de suplente)

Saluda atentamente a Ud.,

[Handwritten Signature]
 VICENTE PARDO DIAZ
 Subsecretario de Transportes
 Subrogante

Vº Bº
 Jefe División Normas y Control
 Departamento Elaboración de Normas
 SECRETARÍA DE TRANSPORTES

- DISTRIBUCIÓN:
- Sr. Alvaro Sapag Rajevic - CONAMA
 Donoso 6º, Providencia
 - Gabinete Subsecretario de Transportes
 - División de Normas y Control
 - Departamento Elaboración de Normas
 - Oficina de Partes

DEN 047/00
 DNC 078

137

APRUEBASE CREACION DEL COMITE OPERATIVO PARA LA REVISION DE LAS NORMAS PRIMARIAS DE CALIDAD DE AIRE PARA ANHIDRIDO SULFUROSO (SO₂), PARTICULAS TOTALES EN SUSPENSION (PTS), MONOXIDO DE CARBONO (CO), OZONO (O₃) Y DIOXIDO DE NITROGENO (NO₂).

Santiago, 27 de enero del 2000

VISTOS: El Tercer Programa Priorizado de Normas, aprobado por el Consejo Directivo el 27 de marzo de 1998, publicado en el Diario Oficial de fecha 15 de abril de 1998, que contempla la revisión de las normas primarias de calidad de aire referenciadas; y

CONSIDERANDO:



Que de acuerdo a lo dispuesto en el artículo 77 de la Ley N° 19.300 sobre Bases Generales del Medio Ambiente y en el artículo 6° del Decreto N° 93 de 1995, del Ministerio Secretaría General de la Presidencia, que contiene el Reglamento para la Dictación de Normas de Calidad Ambiental y de Emisión, el Director Ejecutivo de la Comisión Nacional del Medio Ambiente, previa aprobación del Consejo Directivo, podrá crear Comités Operativos formados por representantes de los ministerios, servicios y demás organismos públicos competentes, que intervengan en la dictación de una norma determinada.

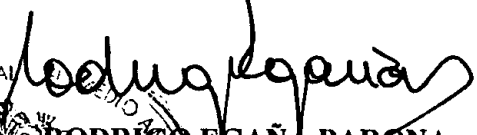

Que de conformidad a las disposiciones señaladas en el considerando anterior, el Director Ejecutivo ha designado las instituciones que tendrán representación en el Comité Operativo creado para la revisión de las normas primarias de calidad de aire referenciadas.

ACUERDO N° 142/2000

Aprobar la integración del Comité Operativo propuesto por el Director Ejecutivo de la Comisión Nacional del Medio Ambiente, que intervendrá en la revisión de las normas primarias de calidad de aire antes referenciadas, cuyos integrantes serán representantes nombrados por los siguientes organismos:

- Ministerio de Transportes y Telecomunicaciones.
- Ministerio de Salud .
- Ministerio de Economía, Fomento y Reconstrucción.
- Ministerio de Obras Públicas.
- Ministerio de Minería.
- Comisión Chilena del Cobre (COCHILCO).
- Comisión Nacional de Energía.
- Servicio de Salud Metropolitano del Ambiente.
- Servicio de Salud de Antofagasta.
- Servicio de Salud Viña del Mar - Quillota.
- Servicio de Salud Valparaíso-San Antonio
- Servicio de Salud O' Higgins
- Servicio de Salud de Talcahuano.
- Servicio de Salud de Concepción.
- Servicio de Salud Araucanía Sur.



CARLOS CARMONA SANTANDER
~~Ministro Secretario General de la Presidencia (S)~~
Presidente Consejo Directivo
Comisión Nacional del Medio Ambiente
MINISTERIO



RODRIGO EGAÑA BARONA
Director Ejecutivo
Secretario Consejo Directivo
Comisión Nacional del Medio Ambiente

RLCH/LVD

Distribución

- Integrantes Consejo Directivo (13)
- Director Ejecutivo de CONAMA
- Departamento Jurídico
- Departamento de Descontaminación, Planes y Normas
- Archivo



000018

ORGANIZACION PANAMERICANA DE LA SALUD
Oficina Sanitaria Panamericana, Oficina Regional de la
ORGANIZACION MUNDIAL DE LA SALUD

REFERENCIA:

CHI-ERA-010/0125

Santiago, 25 de Enero de 2000.

11-124
OFICINA DEL MEDIO AMBIENTE
OFICINA DE PARTES / ARCHIVO
Nº INGRESADO: 907 / 550
FECHA: 27 ENE 2000
RECORRIDO: 16-82
D. Ejecutivo

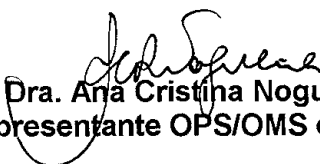
Señor
Alvaro Sapag Rajevic
Director Ejecutivo (S)
Comisión Nacional del Medio Ambiente
Obispo Donoso 6
Providencia
Santiago

De mi consideración:

Tengo el agrado de acusar recibo de su atenta carta fechada el 14 de Enero del 2000, relacionada con la iniciación de la revisión de las normas primarias de calidad de aire para anhídrido sulfuroso (SO₂); partículas totales en suspensión (PTS); monóxido de carbono (CO); ozono (O₃) y dióxido de nitrógeno (NO₂) y la formación de un Comité Ampliado que intervenga en la elaboración de la norma.

En relación a lo anterior, tengo el agrado de comunicar a Ud. que el Ing. Rodrigo Cerda, Consultor en Salud Ambiental, ha sido nominado para participar en dicho Comité.

Saluda atentamente a Ud.,


Dra. Ana Cristina Nogueira
Representante OPS/OMS en Chile

000019



ASIMET

J#

16455

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

Nº INGRESO: 948/574

FECHA: 28 ENE 2000

DESDE: []

ASIMET
R. EGAÑA

Santiago, 28 de Enero del 2000

Señor:

Rodrigo Egaña B.

Director Ejecutivo de CONAMA

Obispo Donoso 6

Providencia

Referencia: Nominación de representantes Asimet en Comité Ampliado de revisión de normas primarias de calidad del aire.

Estimado señor:

La Comisión de Medio Ambiente de la Asociación de Industrias Metalúrgicas y Metalmeccánicas ASIMET AG, designó dos de sus representantes para participar en el Comité Ampliado de revisión de normas primarias de calidad de aire para anhídrido sulfuroso SO₂, partículas totales en suspensión PTS, monóxido de carbono CO, ozono O₃ y dióxido de nitrógeno NO₂.

Para estos efectos, Alfredo Cánepa Monzo es nominado como representante oficial y como substituto, Andrés Muñoz A.

Finalmente quiero agradecer la disposición de CONAMA en desarrollar la participación de actores relevantes en los temas ambientales.

Atentamente,

Andrés Muñoz Ampuero, M.Sc.
Jefe del Departamento de Asistencia Medioambiental
ASIMET

CC. Alvaro Sapag
DD. CMA-Asimet

000020



Id # 16508

001036 28.ENE.2000

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

Nº INGRESO: 398 / 602

FECHA: 31 ENE 2000

IMPRESION: 1600

A SAPAG

ORD.:

ANT.: Ord. N° 171 del 14/01/2000, CONAMA

MAT.: Responde solicitud del Ant.

DE : DIRECTOR
SERVICIO DE SALUD METROPOLITANO DEL AMBIENTE

A : SR. ALVARO SAPAG RAJEVIC
DIRECTOR EJECUTIVO (S)
COMISION NACIONAL DEL MEDIO AMBIENTE

Tengo el agrado de informar a Ud. que el representante oficial del SESMA en el proceso normativo de revisión de las normas primarias de calidad de aire será el señor Juan A. Sánchez Cortez, Ing. M.C. Como reemplazante, actuará el señor Ignacio Olaeta Undabarrena.

Sin otro particular, le saluda atentamente a usted,



[Handwritten signature]

DIRECTOR DR. MAURICIO ILABACA MARILEO
DIRECTOR
SERVICIO DE SALUD
METROPOLITANO DEL AMBIENTE

- DISTRIBUCIÓN:**
- Señor Director Ejecutivo (s) CONAMA
 - Dirección SESMA
 - Dpto. Vigilancia Sanitaria SESMA
 - Dpto. Técnico SESMA
 - Dpto. Administrativo SESMA
 - Oficina de Partes
 - Archivo



MINISTERIO DE MINERIA

000021

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

Nº INGRESO: 1075 / 650

FECHA: -2 FEB 2000

DESACHADO:

RES: R. E. S. M. 1614
16580

OF. ORD. Nº: 45 /

ANT : OF. ORD. Nº 000171 de
CONAMA de fecha
14.01.2000

MAT : Designa representante ante
Comité Operativo.

SANTIAGO, 31 de enero de 2000

DE : MINISTRO DE MINERIA (S)
A : SR. DIRECTOR EJECUTIVO (S)
COMISION NACIONAL DEL MEDIO AMBIENTE

En atención a lo solicitado por medio de su oficio citado en ANT., en orden a iniciar el proceso de revisión de las normas primarias de calidad de aire para anhídrido sulfuroso (SO₂), partículas totales en suspensión (PTS), monóxido de carbono (CO), ozono (O₃) y dióxido de nitrógeno (NO₂) y la formación de un comité para estos efectos, me es grato informar a Ud. que este Ministerio ha designado como representante ante dicho comité al señor **Erwin Oyanader Millas**, Coordinador de la Unidad Ambiental de esta Secretaría de Estado.

A su vez, en calidad de alterno se ha designado a la señora **María de la Luz Vásquez Martínez**, Encargada de Normas de la señalada Unidad Ambiental de este Ministerio, para el evento de ausencia o imposibilidad del titular.

Sin otro particular, saluda atentamente a Ud.,



[Handwritten signature]
CESAR DIAZ-MUÑOZ CORMATCHES

Ministro de Minería (S)

[Handwritten initials]
GTA/MVM
Distribución
- Partes y Archivo

Santiago, enero 28 de 2000.

**Señor
Alvaro Sapag Rajevic
Director Ejecutivo (S)
Comisión Nacional del Medio Ambiente
Santiago**

ENAMI
OFICINA DE PARTES
6147 31.1.00
SANTIAGO

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

Nº INGRESO: 1083 / 658

FECHA: 2 FEB 2000

DESPACHADO: 2 FEB 2000

OBS.: 31/1/2000

A Sapag. P310

16589 / 7 Correo.

Señor Sapag:

Mediante la presente, informo a usted que se ha designado a Don Eduardo Giesen Amtmann, Jefe de Medio Ambiente Corporativo, como representante oficial de nuestra Empresa, en el Comité Ampliado para la revisión de la norma de calidad de aire para SO₂, PTS, CO, O₃ y NO₂.

Como reemplazante se ha nominado a Don Alejandro Diez Valencia, Jefe de Aseguramiento de Calidad.

Sin otro particular, saluda atentamente a usted,



[Handwritten signature]
**PATRICIO ARTIAGOITIA ALTI
VICEPRESIDENTE EJECUTIVO**

OFICINA DE PARTES Y ARCHIVO
Nº INGRESO: 1086 / 662
FECHA: 2 FEB 2000
DESPACHADO:
OBS: 31/01/00 P36
D. Ejecutivo 1659/1
+ correo

Santiago, 25 de Enero del 2000

Señores:
CONAMA
Presente

Att.: Alvaro Sapag Rajevic
Director Ejecutivo
Comisión Nacional del Medio Ambiente

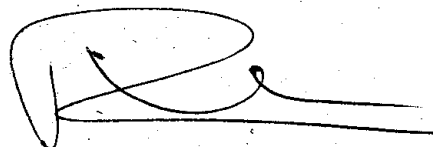
Ref: Revisión Normas Primarias de Calidad Del Aire

De nuestra consideración

Por la presente comunico a ustedes haber recibido la carta que se refiere al tema de la **Revisión Normas Primarias de Calidad de Aire**.

Tenemos el agrado de comunicarles que participaré personalmente como representante oficial de nuestra organización en el "Comité Ampliado", y como reemplazante la señora María Teresa Castro.

Sin otro particular, le saluda atentamente a usted,



ROSA MORENO MOORE
DIRECTORA DE CAMPAÑA
GREENPEACE PACIFICO SUR

RMM/jag

16

000024

MINISTERIO DE SALUD
SERVICIO DE SALUD O'HIGGINS
DEPARTAMENTO DE PROGRAMAS
SOBRE EL AMBIENTE
N°147/00



ORDINARIO N° 565
ANT : ORD.OF.N°00017
MAT. : Revisión Normas Primarias de Calidad
de Aire.

RANCAGUA, 4 FEB 2000

DE : DRA. MARIA ANGELICA MORENO MUÑOZ
DIRECTOR (S) SERVICIO DE SALUD O'HIGGINS

A : SR. ALVARO SAPAG RAJEVIC
DIRECTOR EJECUTIVO (S)
COMISION NACIONAL DEL MEDIO AMBIENTE

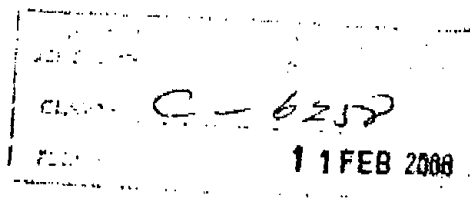
En atención al ORD.OF. del antecedente comunico a Ud. que se ha designado como representante oficial para conformar el Comité Operativo para la Revisión de Normas Primarias de Calidad del Aire al Dr. Guillermo Carrasco Suazo, Jefe del Departamento de Programas Sobre el Ambiente y como reemplazante a la Srta. Cecilia Godoy González Asesora de la Unidad de Contaminación Atmosférica.

Sin otro particular, saluda atentamente a Ud.

DRA. MARIA ANGELICA MORENO MUÑOZ
DIRECTORA (S)
SERVICIO DE SALUD O'HIGGINS

DRA.MAMM/DR.GCS/ING.CGG

DISTRIBUCION
INDICADA
DIRECCION SERVICIO SALUD
DEPTO. PROGRAMAS SOBRE EL AMBIENTE
OFICINA DE PARTES



REPUBLICA DE CHILE
 MINISTERIO DE SALUD
 SERVICIO SALUD VIÑA DEL MAR-QUILLOTA
 SUBDIRECCIÓN AMBIENTAL
DEPTO. PROGRAMAS SOBRE EL AMBIENTE /

0134

N° 090 26.01.00

F.: 65 L.: 06

16742
 COMISION NACIONAL DEL MEDIO AMBIENTE
 OFICINA DE PARTES Y ARCHIVO

N° SERVICIO: 1263 / 770

FECHA: - 8 FEB 2000

DELEGADO:

A SAPAG 1230
 * COMPRO

ORDINARIO N° _____ /

ANT.: Ordinario Oficio N° 171/14.01.00.

MAT.: Informa.

VIÑA DEL MAR,

02. FEB. 2000

DE : DIRECTOR
 SERVICIO SALUD VIÑA DEL MAR-QUILLOTA

A : D. ALVARO SAPAG RAJEVIC
 DIRECTOR EJECUTIVO (S)
 COMISION NACIONAL DEL MEDIO AMBIENTE

En respuesta a su oficio del antecedente, los profesionales que a continuación se nominan, representarán a nuestro Servicio de Salud en el Comité Operativo que estudiará las Normas de Calidad Ambiental y de Emisión.

- ING. QUIMICO MARICEL LAVIN ZUMAETA (TITULAR)
- ING. QUIMICO HERNAN CONTRERAS CORTES (PRIMER REEMPLAZANTE)
- ING. CONST. EDGARDO BENAVIDES ASTORGA (SEGUNDO REEMPLAZANTE)

Saluda atentamente a Ud.,



[Handwritten Signature]
 DR. FRANCISCO ACEVEDO TORO
 DIRECTOR
 SERVICIO SALUD VIÑA DEL MAR-QUILLOTA

DR. FSG/DR. CGG/xdg.
DISTRIBUCION:

- Destinatario
- Oficina Partes S.S.V.Q.
- Subdirección Ambiental
- Interesados (03)
- Oficina D.P.A.

REPUBLICA DE CHILE
MINISTERIO DE SALUD
DIVISION DE SALUD AMBIENTAL
DEPTO. PROGRAMAS SOBRE AMBIENTE
75

000026

ORD.: N° 9B/

716

ANT.: Su Ordinario N° 171, del 14 de enero
del 2000

MAT.: Informa sobre nominación que indica.

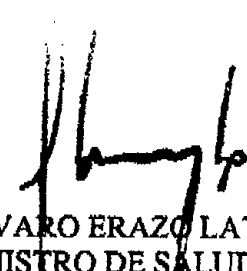
SANTIAGO, 14 FEB 2000

DE: MINISTRO DE SALUD

A: DIRECTOR EJECUTIVO
COMISION NACIONAL DEL MEDIO AMBIENTE

En relación con su oficio de antecedente me permito informar a usted, que este Ministerio de Salud ha nominado al Ing. Julio Monreal Urrutia, Jefe del Departamento de Programas sobre Ambiente, como representante de esta Secretaría de Estado ante el Comité Operativo que elaborará las normas de calidad de aire contenidas en la Resolución N° 1215/78, del Ministerio de Salud. Por otro lado, informo a usted, que se ha nominado al Sr. Walter Folch, encargado del Programa de Contaminación Atmosférica, como reemplazante del Ing. Monreal.

Saluda atentamente a usted.



DR. ALVARO ERAZO LATORRE
MINISTRO DE SALUD (S)

Ing. JMU/Ing. JMU/Lic. WFA

DISTRIBUCION

- DIRECTOR EJECUTIVO COMISION NACIONAL DEL MEDIO AMBIENTE
- GABINETE SR. MINISTRO DE SALUD
- DISAM
- DPA
- Of. Partes



26#168P3

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO:
Nº INGRESO: 1467/307
FECHA: 14 FEB 2000
DESPACHADO:
OBS: 15/07/2000 + Casilla.
2 Wilson 930

000027

SERVICIO SALUD ARAUCANIA SUR
SUBDIRECCION MEDICA
DEPTO. PROG. SOBRE EL AMBIENTE
DR. PEG
Nº 62

ORD : Nº 210
ANT : ORD. Nº 000171/ 14.01.2000
MAT: Designación de representantes.
TEMUCO,

25 ENE 2000

DE : DIRECTORA SERVICIO SALUD ARAUCANIA SUR
A : DIRECTOR EJECUTIVO (S)
COMISION NACIONAL DEL MEDIO AMBIENTE .
SR. ALVARO SAPAG RAJEVIC

SANTIAGO

En relación a su oficio citado en "ant", me permito comunicar a usted que los representantes designados por esta Dirección en la formación del Comité Operativo con intervención en la elaboración de la norma aludida en documento anterior son:

representante oficial : Sr. Pedro Diaz Gajardo.
representante reemplazante: Sra. Ana Maria Prado.

Saluda atentamente a Ud.



DRA. WILMA BERG KROLL
DIRECTORA
SERVICIO SALUD ARAUCANIA SUR

DR. HORACIO GIL MUJICA
JEFE DEPTO. SALUD AMBIENTAL
DR. HGM/ INC/ PDG/ pdg
Distribución

- Conama
- Sub- Dirección Médica
- Unidad de Salud Ocupacional (SEIA)
- Oficina de Partes

pr

CONSEJO MINERO a.g.

000028

Hendaya 60 - Piso 9
Las Condes, Santiago - Chile

Fono: (56-2) 331 9026
Fax: (56-2) 331 5381

30 #17307. -

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

Nº INGRESO: 1883 / 1208

FECHA: 1 MAR 2000

DESPACHADO:

OBS.: [Handwritten signature]

Santiago, 29 de febrero de 2000
CM - 033/2000

Señor
Rodrigo Egaña
Director Ejecutivo
Comisión Nacional del Medio Ambiente
Presente

Estimado señor Director:

De acuerdo a lo solicitado en el oficio ORD. N° 172 del 14 de enero de 2000, de esa Comisión, comunico a usted que el Consejo Minero ha designado a los siguientes señores en representación de esta asociación gremial para los efectos de participar en el Comité Ampliado relativo a la elaboración de las normas primarias de calidad de aire para anhídrido sulfuroso (SO₂), partículas totales en suspensión (PTS), monóxido de carbono (CO), ozono (O₃) y dióxido de nitrógeno (NO₂):

Representante oficial:
Señor Fernando Valenzuela
Tel.: 230-6295
Fax: 230-6255
E-mail: lfvalenzuela@manquehue.net

Reemplazante:
Señor Elliot Cohen
Tel.: (55) 63.01.05
Fax: (55) 63.01.43
E-mail: cohene@altonorte.noranda.cl

Agradecido de la invitación cursada al Consejo Minero saluda atentamente a usted,

Mauro Valdés R.
Gerente General



UNIVERSIDAD DE CONCEPCION
 FACULTAD DE FARMACIA
 Fax 56-41-231903 - Casilla 237 - Concepción - CHILE
 F.N° 410/2000

Jd # 17459.

000029

Concepción, 25 de febrero de 2000

COMISION NACIONAL DEL MEDIO AMBIENTE
 OFICINA DE PARTES Y ARCHIVO
 Nº INGRESO: 2000/1315
 FECHA: 6 MAR 2000
 DESPACHADO: 07/03/00
 R. Castro
 F. COMEZO

Señor
 Rodrigo Egaña B.
 Director Ejecutivo
 Comisión Nacional del Medio Ambiente
 Obispo Donoso 6 – Providencia
 Presente

Señor Director Ejecutivo:

En respuesta a su Ord. N° 0275, recibido el 22 del presente al regreso de vacaciones de la Universidad de Concepción, y de acuerdo a lo solicitado por usted, se designa como representantes oficial y reemplazante para el Comité Ampliado para la Revisión de las Normas Primarias de Calidad de Aire, a los Profesores Doctores Dietrich von Baer y Alex Berg, respectivamente.

Sin otro particular, saluda atentamente a Ud.,

DR. CARLOS CALVO M.
 DECANO

c.c. -Dr. Dietrich von Baer

CCM/eat

Ministerio de Obras Públicas
Gabinete del Subsecretario
Chile

648

RD. N° _____/

30 # 17552 -
COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

N° INGRESO: 2167 / 1375

FECHA: 8 MAR 2000

DESPECHADO:

OBS:

SA	SA
SA	SA
SA	SA

ANT.: ORD.OF.N° 0000171 CONAMA de
fecha 14.01.2000MAT.: Nómima Representante MOP
Comité Operativo Revisión
Normas Primarias Calidad
del Aire.

SANTIAGO, 7 MAR. 2000

DE : GONZALO CASTILLO NAVASAL
JEFE DE GABINETE SS.OO.PP.

A : SEÑOR ALVARO SABAG RAJEVIC
DIRECTOR EJECUTIVO (S)
COMISIÓN NACIONAL DE MEDIO AMBIENTE

De acuerdo a lo solicitado en el antecedente, en relación al proceso de revisión de las Normas Primarias de Calidad de Aire, correspondiente al Reglamento para la Dictación de Normas de Calidad Ambiental y de Emisión, para lo cual se formará un Comité Operativo, me es grato informar a usted, por instrucciones del Sr. Subsecretario de Obras Públicas, se ha nominado como representante oficial al Sr. Carlos Saavedra Pulgar y al Sr. Manuel Alvarez Cabello, como su reemplazante .

Sin otro particular, saluda atentamente a Ud.,


GONZALO CASTILLO NAVASAL
Jefe de Gabinete
Subsecretario de Obras Públicas

GCN/LHR/lemv.
DISTRIBUCION:

- Sr. Alvaro Sabag R.
- Gabinete Sr.Ministro Obras Públicas
- U.T. Medio Ambiente
- Ases.Técnica SS.OO.PP.
- Of.de Partes SS.OO.PP.

ORDEN OF. CNE N°: 198/2000

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO
N° INGRESO: 2392 / 1531
FECHA: 19.5 MAR 2000
DESPACHADO: 15/3
CNS: 177
D. Ejecutiva

ANT: Of. N° 171 del 14 de enero de 2000 de la Comisión Nacional de Medio Ambiente.

REF.: Representantes de la Comisión Nacional de Energía en el Comité de revisión de normas primarias de calidad de aire.

SANTIAGO, 08 MAR 2000

*17592
de elija
x correo*

A: SR. RODRIGO EGAÑA
DIRECTOR EJECUTIVO
COMISION NACIONAL DEL MEDIO AMBIENTE


DE: SR OSCAR LANDERRETCHÉ
MINISTRO PRESIDENTE
COMISIÓN NACIONAL DE ENERGÍA

En relación a su oficio, en el cual solicita nombrar un representante para la participación en el Comité antes mencionado, le informamos a usted que el profesional delegado será Jaime Bravo O., Jefe Area Medio Ambiente de esta institución, el cual será representado en las reuniones por Andrea Varas C., ingeniero de esta área.

Sin otro particular se despide atentamente,



MINISTRO PRESIDENTE
OSCAR LANDERRETCHÉ
COMISIÓN NACIONAL DE ENERGÍA


OLG/JBO/AVC/mgb/Comité Norma Calidad aire.doc



000032

GAS ATACAMASantiago, Marzo 08, 2000
GAGG-073/2000Señor
Rodrigo Egaña Barahona
Director Ejecutivo
COMISIÓN NACIONAL DE MEDIO AMBIENTE
Presente

30 # 17566 -

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

Nº INGRESO: 2159 / 1369

FECHA: 8 MAR 2000

DESPACHADO:

OBS.:

Atendido Sr. Director Ejecutivo:

En el marco del procedimiento de revisión de normas primarias de calidad del aire para anhídrido sulfuroso, partículas totales en suspensión, monóxido de carbono, ozono y dióxido de nitrógeno, me es muy grato adjuntarle antecedentes científico - técnicos sobre esta materia para ser incorporados al expediente del proceso de elaboración de dicha norma.

Nor Oeste Pacífico Generación de Energía Ltda. (NOPEL) mantiene en operación en Bahía de Mejillones, II Región de Antofagasta, su Central Termoeléctrica Atacama. Esta Central fue evaluada y aprobada ambientalmente por Resolución de Calificación Ambiental 042/98, la que estableció un Programa de Vigilancia Ambiental de Calidad del Aire en Mejillones por dos años. NOPEL inició dicho Programa tres meses antes de la entrada en operación de la Central. En este sentido, le adjuntamos una tabla resumen de los datos medidos por la estación de monitoreo ubicada en la ciudad de Mejillones. Dichos datos corresponden a PM10, óxidos de nitrógeno, monóxido de carbono y ozono. Además de estos antecedentes, nuestra empresa cuenta con información detallada sobre la materia, la cual ponemos a su disposición.

Finalmente, quisiéramos llamar su atención sobre la importancia de esta información, puesto que corresponde a datos recientes y representativos de una estación de monitoreo de calidad del aire en Mejillones. Así, estimamos que nuestras mediciones son de gran relevancia, y esperamos que sean un aporte para el proceso de revisión de normas primarias de calidad del aire.

*Atentamente***Rudolf Araneda Kauert**
Gerente General

Nor Oeste Pacífico Generación de Energía Ltda.

Tabla 1. Resumen de Resultados mediciones de Contaminantes Gaseosos Estación Mejillones. Período del 01 de junio al 31 de enero del 2000

Contaminante (ug/m ³)	Valor Medio Mes									Valor Máximo									Valor Mínimo									Limite Máximo Permissible										
	Jun			Jul			Ago			Sep			Jun			Jul			Ago			Sep			Jun			Jul			Ago			Sep			Diario	Horario
	Jun	Jul	Ago	Jun	Jul	Ago	Jun	Jul	Ago	Jun	Jul	Ago	Jun	Jul	Ago	Jun	Jul	Ago	Jun	Jul	Ago	Jun	Jul	Ago	Jun	Jul	Ago	Jun	Jul	Ago	Jun	Jul	Ago					
Ozono	12	3	5	4	21	13	13	12	49	37	61	27	4	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	160					
Oxidos de Nitrógeno	8	4	11	8	10	9	16	11	48	49	126	29	3	1	5	4	0	0	2	0	0	0	0	0	0	0	0	0	0	0	-	-						
Oxido Nítrico (NO)	4	3	4	4	7	9	8	6	39	49	117	25	1	1	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-						
Dioxido de Nitrógeno	1	1	7	4	3	5	10	6	6	11	13	13	0	0	5	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	80 (*)	-						
Monóxido de Carbono	200	200	200	0	300	300	400	200	1,400	800	2,400	1,000	100	0	100	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	10,000 (+)	40,000						

Contaminante (ug/m ³)	Valor Medio Mes												Valor Máximo									Valor Mínimo									Limite Máximo Permissible	
	Oct		Nov		Dic		Ene		Jun		Jul		Ago		Sep		Jun			Jul			Ago			Sep			Diario	Horario		
	Oct	Nov	Nov	Dic	Dic	Ene	Jun	Jul	Jul	Ago	Ago	Sep	Jun	Jul	Ago	Jun	Jul	Ago	Jun	Jul	Ago	Jun	Jul	Ago	Jun	Jul	Ago					
Ozono	4	4	8	6	8	9	16	12	25	27	33	37	1	2	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	-	160	
Oxidos de Nitrógeno	5	2	8	6	7	4	13	9	31	10	35	22	3	0	5	3	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-	
Oxido Nítrico (NO)	1	0	3	5	2	2	5	8	16	5	12	16	0	0	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-	
Dioxido de Nitrógeno	4	2	3	2	6	3	4	3	26	9	13	9	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	80 (*)	-	
Monóxido de Carbono	100	100	100	100	200	300	300	100	1,500	2,700	2,200	1,500	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	10,000 (+)	40,000	

(+): Concentración media máxima intervalo de 8 horas

(*) Promedio diario máximo, según normas Confederación Suiza.

Tabla 2. Resumen resultados de concentración de PM10
Estación Mejillones. Período del 01 de junio al 31 de enero del 2000

Fecha de Muestreo	PM10 ug/m ³ N
31-May-99	33
3-Jun-99	24
6-Jun-99	26
9-Jun-99	20
12-Jun-99	28
15-Jun-99	40
18-Jun-99	13
21-Jun-99	41
24-Jun-99	28
27-Jun-99	30
30-Jun-99	25
3-Jul-99	8
6-Jul-99	25
9-Jul-99	38
12-Jul-99	21
15-Jul-99	36
18-Jul-99	16
21-Jul-99	25
24-Jul-99	34
27-Jul-99	32
30-Jul-99	25
2-Ago-99	32
5-Ago-99	32
8-Ago-99	37
11-Ago-99	35
14-Ago-99	(*)
17-Ago-99	25
20-Ago-99	22
23-Ago-99	24
26-Ago-99	44
29-Ago-99	28
1-Sep-99	19
4-Sep-99	21
7-Sep-99	17
10-Sep-99	28
13-Sep-99	23
16-Sep-99	38
19-Sep-99	34
22-Sep-99	21
25-Sep-99	23
28-Sep-99	(*)

Fecha de Muestreo	PM10 ug/m ³ N
2-Oct-99	20
5-Oct-99	17
8-Oct-99	19
11-Oct-99	20
14-Oct-99	33
17-Oct-99	36
20-Oct-99	23
23-Oct-99	20
26-Oct-99	17
29-Oct-99	21
31-Oct-99	19
1-Nov-99	21
4-Nov-99	19
7-Nov-99	18
10-Nov-99	20
13-Nov-99	20
16-Nov-99	23
19-Nov-99	27
22-Nov-99	22
25-Nov-99	21
28-Nov-99	12
1-Dic-99	16
4-Dic-99	23
7-Dic-99	30
10-Dic-99	27
13-Dic-99	22
16-Dic-99	22
19-Dic-99	21
22-Dic-99	22
25-Dic-99	15
28-Dic-99	12
31-Dic-99	20
1-Ene-00	24
4-Ene-00	17
7-Ene-00	19
10-Ene-00	17
13-Ene-00	23
16-Ene-00	22
19-Ene-99	25
22-Ene-99	21
25-Ene-99	24
28-01-99	19
31-01-99	11
PROMEDIO	23

10/03/00

Identificador Interno **17.592**

000035

Número asignado en el Libro **225/FAX**

Fecha Ingreso **10/03/00**

Origen **CNE, OSCAR LANDERRETCHÉ**

Tipo Documento : **ORDEN OF.CNE N°198/2000, 08.03.00**

Prioridad **NORMAL**

Con Copias

Destino : **EGAÑA BARAONA RODRIGO**

Dpto./Unidad **DIRECCION EJECUTIVA**

Descripción : **DA RESPUESTA A OF. N°171 E INFORMA QUE PARTICIPARA EN EL COMITE DE REVISION DE NORMAS PRIMARIAS DE CALIDAD DE AIRE JAIME BRAVO O., REPRESENTADO POR ANDREA VARAS C.-**

Primera Derivación *P. Matus*

ENVIADO A JEFE DE	PARA	TIPO DE DOCUMENTO	PLAZO PARA GENERAR ACCION PEDIDA
Dirección Ejecutiva	Conocimiento	Secreto	
Fiscalía	Informar al Respecto	Confidencial	
Administración, Finanzas y Person	Dar curso/Tramites	Reservado	
Evaluación de Impacto Ambiental	Resolver	Ordinario	
Descontaminación, Planes y Norma	Preparar Respuesta	Observaciones : <i>ei / cc Directora.</i>	
Gestión SINIA y S. de informació	Responder Directamente		
Recursos Naturales	Acuse Recibo		
Participación Ciudadana	Biblioteca		
Economía Ambiental	Su Opinión		
Unidad de Proyectos	Dar Audiencia		
Asesor Técnico	Dar Difusión		
Relaciones Internacionales	Reclasificar		
Política	Otro		
Regiones			
Comunicaciones			
Cooperación Internacional			
Adquisiciones			
Capacitación			
Dirección Regional Conama			
N° Región			

Segunda Derivación

ENVIADO A :	PARA	1	2	3	UNA VEZ HECHO	1	2	3
1.- <i>Rodrigo</i>	Conocimiento	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Devolverme Dcto.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.-	Resolver	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reportar Avance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.-	Preparar Respuesta	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Archivar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Adjuntar Antecedentes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Otro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Acusar Recibo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
	Dar Difusión	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
	Visto Bueno	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Observaciones

Tercera Derivación

ENVIADO A :	PARA	UNA VEZ HECHO	OBSERVACIONES
	Conocimiento	<input type="checkbox"/>	
	Resolver	<input type="checkbox"/>	
	Preparar Respuesta	<input type="checkbox"/>	
	Adjuntar Antecedentes	<input type="checkbox"/>	
	Acusar Recibo	<input type="checkbox"/>	
	Dar Difusión	<input type="checkbox"/>	
	Visto Bueno	<input type="checkbox"/>	

Referencia a : _____ Archivado en : _____

Firma responsable 13-03-2000

Of Parts #1225/ - Yaqueen

FROM : COMISION NACIONAL DE ENERGIA

PHONE NO. : 56 2

Mar. 08 2000 01:03PM P1

fd = 17592



000036

ORDEN OF. CNE N°: 198/2000

ANT: Of. N° 171 del 14 de enero de 2000 de la Comisión Nacional de Medio Ambiente.

REF.: Representantes de la Comisión Nacional de Energía en el Comité de revisión de normas primarias de calidad de aire.

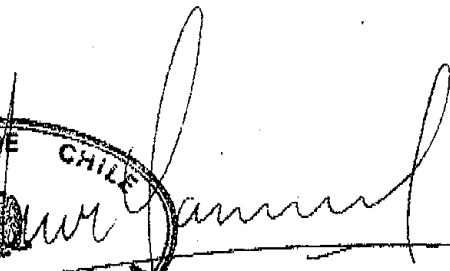

SANTIAGO, 08 MAR 2000

A: SR. RODRIGO EGAÑA
DIRECTOR EJECUTIVO
COMISION NACIONAL DEL MEDIO AMBIENTE

DE: SR OSCAR LANDERRETCHÉ
MINISTRO PRESIDENTE
COMISIÓN NACIONAL DE ENERGÍA

En relación a su oficio, en el cual solicita nombrar un representante para la participación en el Comité antes mencionado, le informamos a usted que el profesional delegado será Jaime Bravo O., Jefe Area Medio Ambiente de esta institución, el cual será representado en las reuniones por Andrea Varas C., ingeniero de esta área.

Sin otro particular se despide atentamente,



MINISTRO PRESIDENTE
COMISIÓN NACIONAL DE ENERGÍA

Comisión Regional del Medio Ambiente
Región del Bío Bío

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

17611

000037

ORD. N° 00160 /2000

N° INGRESO: 2229 / 1414

FECHA: 10 MAR 2000

DESPACHADO:

OBS:

P. Matus

ANT.: Ord.N°791 de 06/03/2000

MAT: Designa profesional, proceso revisión
Normas Primarias de Calidad de Aire.



CONAMA
COMISION NACIONAL DEL MEDIO AMBIENTE

Concepción, 08 de marzo del 2000

A: **SRA. PATRICIA MATUS C.**
JEFE DPTO. DESCONTAMINACION, PLANES Y NORMAS

DE: **DIRECCION REGIONAL CONAMA BÍO BÍO**

Mediante la presente informo a Ud. que hemos designado al Ing. Germán Oyola Fuentes, representante de esta Dirección Regional para participar en el proceso de revisión de las normas referenciadas, esto es, Comité Operativo y como coordinador Regional del proceso.

Sin otro particular, le saluda atentamente,


BOLIVAR RUIZ ADAROS
DIRECTOR REGIONAL CONAMA
REGION DEL BÍO BÍO



CC.
- Archivo CONAMA
- Calidad de Aire

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Aire206.doc



CONAMA

COMISION NACIONAL DEL MEDIO AMBIENTE

OF. ORD. N° 000926

ANT.: Oficios 171 y 172 de fecha 14 de enero de 2000, Oficio 791 de fecha 6 de marzo de 2000, solicitando representante Comité Operativo y Comité Ampliado.

MAT.: Invita a reunión Revisión Normas de Calidad de Aire.

SANTIAGO 14 MAR 2000

DE : PATRICIA MATUS C.
JEFE DEPTO. DESCONTAMINACIÓN, PLANES Y NORMAS
COMISIÓN NACIONAL DEL MEDIO AMBIENTE

A : MIEMBROS DEL COMITÉ OPERATIVO Y AMPLIADO

Por medio del presente y en relación a la revisión de las normas de calidad de aire para SO₂, PTS, CO, O₃ y NO₂ (Resolución Exenta N°1514 de la Dirección Ejecutiva de CONAMA), le invito a usted a una reunión de Comité Operativo y Ampliado para dar inicio al proceso de revisión de las mismas.

La reunión tiene por objeto, en primer lugar: dar a conocer aspectos generales del procedimiento mediante el cual se revisarán las normas y proponer la metodología de trabajo a seguir y en segundo lugar: dar a conocer los antecedentes disponibles a la fecha para la revisión de las normas.

La reunión se efectuará el día lunes 27 del presente en oficinas de CONAMA, piso 7, y se dará inicio a las 10:00 horas de acuerdo al siguiente programa:

1. 10:00 – 12:00 horas: Procedimiento elaboración de normas de calidad ambiental.
Metodología de trabajo.
2. 15:00 – 17:00 horas: Presentación del Estudio, Antecedentes para la Revisión de las Normas Contenidas en la Resolución 1215, a cargo del Sr. Jaime Solari, SGA-IBERSIS.

Durante el proceso de revisión de las normas se formarán grupos de trabajo por contaminante.

Solicito a usted confirmar su asistencia e indicar el grupo de trabajo en el cual podrá participar, a más tardar el día miércoles 22 del presente (Fono 2405729, Fax 244 3436, E-mail: eavila@conama.cl).

Sin otro particular, le saluda atentamente a usted,

PATRICIA MATUS C.
Jefe Depto. Descontaminación, Planes y Normas
Comisión Nacional del Medio Ambiente

Distribución:**Comité Operativo**

Julio Monreal, División de Medio Ambiente, Ministerio de Salud	639 7110
Erwin Oyanader, Unidad de Medio Ambiente, Ministerio de Minería	673 1130
Andrés Portales, Ministerio de Transporte y Telecomunicaciones	695 4344
Rafael Lorenzini, Secretario Ejecutivo, Producción Limpia	664 4318
Carlos Saavedra, Ministerio de Obras Públicas	361 2749
Pedro Santic, Comisión Chilena del Cobre	382 8300
Jaime Bravo, Comisión Nacional de Energía	365 6888
Juan Sánchez, Servicio de Salud Metropolitano del Ambiente, SESMA	671 3542
Manuel Zamorano, Servicio de Salud Antofagasta	55-221 972
Maricel Lavín, Servicio de Salud Viña del Mar - Quillota	32-680 428
Guillermo Carrasco, Servicio de Salud O'Higgins	72-226 902
Sergio Castro, Director Servicio de Salud Concepción	41-227 733
Roberto Fuentes, Director, Servicio de Salud Valparaíso - San Antonio	32-212160
Alex Caniulao, Servicio de Salud Talcahuano	41-409 183
Pedro Díaz, Servicio de Salud Araucanía Sur	45-407 138
María Angélica Ruiz-Tagle, CONAMA II Región	55-268 200
Gerardo Guzmán, CONAMA V Región	32-232 776
Sergio Alcayaga, CONAMA VI Región	72-239 106
Germán Oyola, CONAMA VIII Región	41-242 849
Rocío Toro, CONAMA IX Región	45-238 211
Patricio Vallespín, CONAMA Región Metropolitana	671 7710

Comité Ampliado

Marcos Lima, Corporación Nacional del Cobre, CODELCO	690 3059
Eduardo Giesen, Empresa Nacional de Minería, ENAMI	637 5452
Carlos Salvo, Sociedad Nacional de Minería, SONAMI	334 9700
Fernando Valenzuela, Sociedad Nacional de Minería, SONAMI	334 9700
Enrique Accorsi, Presidente Colegio Médico	633 0940
Mauricio Ilabaca, Sociedad Chilena de Epidemiología	236 2450
Rodrigo Cerda, Representante OPS/OMS	264 9311
Flavia Liberona, RENACE	225 8909
Ximena Abogabir, Casa de la Paz	777 5065
Anibal Mege, Sociedad de Fomento Fabril, SOFOFA	391 3200
Alfredo Cánepa, Asociación de Industrias Metalúrgicas y Metalmeccánicas	264 9311
Fernando Muñoz, Consultora Claiss	664 3624
Jaime Solari, SGA Ibersis	232 5070
Leonel Gil, Depto. Bioquímica, Universidad de Chile	777 4216
Paulina Pino, Escuela de Salud Pública, Universidad de Chile	204 7848
Luis Cifuentes, Depto. Ingeniería Industrial, P. Universidad Católica de Chile	552 1608
Jeannette Vega, Depto. de Salud Pública, P. Universidad Católica de Chile	633 1840
Dietrich von Baer, Facultad de Farmacia, Universidad de Concepción	41-231 903
Máximo Honorato, Colegio de Ingenieros de Chile	777 8681
Roberto Abeliuk, Instituto de Ingenieros de Chile	697 1136
Rosa Moreno, Greenpeace Pacífico Sur	204 0162
Hernán Sandoval, Chile Ambiente	341 5322
Fernando Valenzuela, Consejo Minero	230 6255
Demetrio Marinakis, Asociación Metropolitana de Transporte	369 6695
Manuel Oyarzún, CIMAB, Facultad de Medicina, Universidad de Chile	274 1628
Giorgio Solimano, Escuela de Salud Pública, Universidad de Chile	735 5582

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO
Nº INGRESO: 2533 / 1624.
FECHA: 17 MAR 2000
DESPACHADO:
OBS: P. Matus



CONAMA
COMISION NACIONAL DEL MEDIO AMBIENTE

ORD.: _____/2000
ANT.: Of. ORD Nº 000791 del 06.03.2000
MAT.: Revisión Normas Primarias de Calidad de Aire

17890 + coname

Fecha: Temuco, marzo 10 de 2000

De: Director CONAMA IX Región
Sr. Víctor Durán R.

A: Jefa Depto. Descontaminación, Planes y Normas
Dra. Patricia Matus C.

En respuesta a vuestra correspondencia del ANT., comunico a usted que se ha nominado a la profesional Rocío Toro R. de esta Dirección Regional, para participar en el proceso de revisión de las Normas Primarias de Calidad de Aire (PTS, CO, O3, SO2 y NO2).

Sin otro particular, le saluda atentamente,




Víctor Durán Rivera
Director Regional CONAMA
Región de La Araucanía

VDR/RTR
Distribución:

Indicada
Archivo



000041

COMISIÓN NACIONAL DEL MEDIO AMBIENTE (CONAMA)
DIRECCIÓN REGIONAL - SEXTA REGIÓN
DEL LIBERTADOR GENERAL BERNARDO O'HIGGINS
SAH/XUA/jog.

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO
Nº INGRESO: 2667/1719
FECHA: 21 MAR 2000
DESPACHADO:
OFG.:
Pratus 12/30/03
78020

MEMORANDUM Nº 028

20 MAR 2000

RANCAGUA

A: DRA. PATRICIA MATUS C., JEFA DEPARTAMENTO DESCONTAMINACIÓN PLANES Y NORMAS, CONAMA

DE: SR. SERGIO ALCAYAGA H., DIRECTOR CONAMA SEXTA REGION

MATERIA: ENVÍA NOMBRE DEL REPRESENTANTE DE ESTA OFICINA REGIONAL EN EL COMITÉ OPERATIVO DE LAS NORMAS PRIMARIAS DE CALIDAD DE AIRE..

En virtud de lo solicitado en su Ord. Of. Nº 000791 del 6 de marzo, del Departamento Descontaminación, Planes y Normas, informo a usted que la Sra. Ximena Ubilla Alvarez será el representante de esta Dirección Regional en el Comité Operativo de las normas primarias de calidad de aire para SO2, PTS, CO, O3 y NO2.

Sin otro particular. Saluda cordialmente a usted,



Sergio Alcayaga Herrera
Director
Comision Nacional de Medio Ambiente
Sexta Region

Cc.: Archivo

COMISIÓN NACIONAL DEL MEDIO AMBIENTE
REGIÓN DE ANTOFAGASTA

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO
Nº INGRESO: 2789 / 1811
FECHA: 23 MAR 2000
DESPACHADO:
OBS.:
P. JAHU 16
18152



CONAMA

COMISION NACIONAL DEL MEDIO AMBIENTE

ORD. Nº : 0129 / 2000

MAT. : Da respuesta al Oficio Nº 721 del 06 de marzo del 2000; y al Oficio Nº 000926 del 14 de marzo del 2000.-

Antofagasta, 22 de Marzo del 2000.

A : Patricia Matus C.
Depto. de Descontaminación, Planes y Normas
Comisión Nacional del Medio Ambiente

DE : Director Regional (s)
CONAMA II Región

De mi consideración:

Por intermedio del presente se da respuesta a los siguientes documentos remitidos por usted, detallados a continuación:

- En respuesta al Oficio Nº 791 del 06 de marzo del 2000; se ha nombrado como representante de Conama II Región para el Comité Operativo a la Sra. María Angélica Ruiz-Tagle.
- En respuesta al Oficio Nº 000926 del 14 de marzo del 2000; indicamos nuestra intención de participar en el grupo de trabajo de SO2.

Sin otro particular, le saluda cordialmente a usted,



María Angélica Ruiz-Tagle Borquéz
Director Regional (s)
Conama Región de Antofagasta

MRT/VHV/MOR/scc
c.c.: - Archivo CONAMA II Región.

COPIA FIEL DE ORIGINAL

MINISTERIO DE SALUD
SISTEMA NAC. DE SERVICIOS DE SALUD
SERVICIO DE SALUD TALCAHUANO
SUBDIRECCION DEL AMBIENTE
UNIDAD DE CONTROL INDUSTRIAL

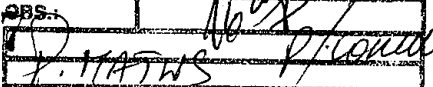
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COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

Nº INGRESO: 2927 / 1903

FECHA: 27 MAR 2000

DESPACHADO:

117 OBS: 

ORD. :
ANT. : Ord. 171/00 CONAMA, Santiago.
MAT. : Revisión Normas Primarias de Calidad de Aire. 18280
TALCAHUANO

09 MAR. 2000

DE: SR. JORGE RAMOS VARGAS
SUBDIRECTOR DEL AMBIENTE
SERVICIO DE SALUD TALCAHUANO

A: SRA. PATRICIA MATUS
JEFA DEPTO. DESCONTAMINACION PLANES Y NORMAS
COMISION NACIONAL DEL MEDIO AMBIENTE, SANTIAGO

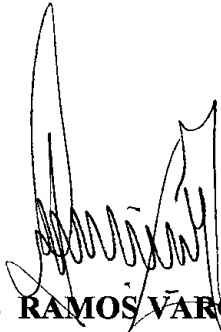

En atención a la solicitud de la designación de un representante en el Comité Operativo de la Revisión de Normas Primarias de Calidad de Aire, por parte de nuestro Servicio de Salud podemos informar lo siguiente:

- Representante Oficial: Sr. Alex Caniulao Castro Ingeniero Civil Químico, encargado del Programa de Contaminación Atmosférica y de la Unidad del Sistema de Evaluación Impacto Ambiental.
- Reemplazante: Sr. Hugo Rojas Bousoño Ingeniero (E) Prevención de Riesgos, Jefe Departamento de Unidades Técnicas, Subdirección del Ambiente.

Correo electrónico: sdamb@ssthno.cl
Fono: (41)-409180
Fax: (41)-409183

Saluda atentamente a Usted.

Por orden del Señor Director del Servicio


DR. JORGE RAMOS VARGAS
SUBDIRECTOR DEL AMBIENTE
SERVICIO DE SALUD TALCAHUANO


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DISTRIBUCION
- La indicada
- Subdirección del Ambiente.
- U.C.L.N.
- Of. Partes.
- cc. SEREMI SALUD VIII Reg.

COMISIÓN NACIONAL DEL MEDIO AMBIENTE
DEPARTAMENTO DE DESCONTAMINACIÓN, PLANES Y NORMAS

Revisión Norma de Calidad Primaria contenidas en
la Resolución N° 1215/78

ACTA DE REUNION DE COMITÉ OPERATIVO Y AMPLIADO

FECHA REUNION : 27 de marzo de 2000

LUGAR : CONAMA. Obispo Donoso 6. Santiago

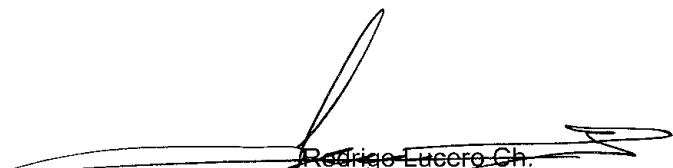
ASISTENCIA : Se adjunta hoja de asistencia

Tabla :

1. Presentación de disposiciones generales (Rodrigo Lucero, Depto. Descontaminación, Planes y Normas)

Discusión :

- **D.VanBaer** (*UdeConcepción*) consulta si la metodología de trabajo en grupos considera también realizar reuniones plenarias para informar sobre el avance de todos los grupos. **R.Lucero** (*CONAMA*) afirma que están contempladas reuniones plenarias e informa que el avance del proceso se podrá encontrar también en Internet.
- **A.Mege** (*SOFOFA*) consulta si se cuenta con datos actualizados, posteriores a 1997, considerando por ejemplo el uso del gas natural en fuentes fijas en la RM. **R.Lucero** (*CONAMA*) señala que se cuenta con datos actualizados de la RM y otras regiones, aunque a nivel regional es más complicado.
- **C.Salvo** (*SONAMI*) indica que no debiera ser necesario mantener el PTS normado. **R.Lucero** (*CONAMA*) señala que será parte del proceso definir eso.


Rodrigo Lucero Ch.
Depto. Descontaminación, Planes y Normas
CONAMA

COMISION NACIONAL DEL MEDIO AMBIENTE
 DEPTO. DESCONTAMINACION, PLANES Y NORMAS

Reunión "Revisión Normas Primarias de Calidad de Aire para SO2, PTS, CO, NO2 Y O3"
 Santiago, marzo 27 de 2000

N°	NOMBRE	INSTITUCION	FONO	FAX	E-MAIL
1.	Manuel Cortés	S.S. Antagorda	209293	267380	antolpa@interchil.net
2.	Manuel Retatado	"	"	"	"
3.	SANTIAGO TORRES	CODELCO	6903912	6903917	stones@stgo.coodelco.cl
4.	Carlos Sesevaca P.	Min. Obras Públicas	3612835	3612749	otma@map.cl
5.	German Oyola	CONAMA Bio Bio	242991	242849	goyola.8@conama.cl
6.	M. TERESA CASTRO B	GREENPEACE	3437788	2040162	mcastro@greenpeace.cl
7.	ALVARO GOMEZ C	RENACE	2234483	2234483	RENACE@MAG.cl
8.	NICOLAS BINDA	RENACE	2234483	2234483	RENACE@rdc.cl
9.	Frieta Figueroa	RENACE	2234483	2234483	RENACE@vare.cl
10.	Dietrich von Borstel	Univ. Concepción	203749	231903	dvonborst@uconec.cl
11.	Alex Casullo C	S.S. TALCAHUANO	409180	4091803	sdamb@SSTHNO.cl
12.	H.S. DE CAJUPILLO	UNIVERSIDAD	6713566	6713566	cajunillo@cejauniv.cl
13.	RODRIGO CEREDA	OPS/OMS	2849300	2849311	CEREDA@OPS-OMS.OPS
14.	JEANETTE VELLO	UNIVERSIDAD	6863038	6331840	Jvego@med.puc.cl
15.	MS Angeles Ruiz-Torres	UNAMA II REGION	182000	182000	jeanvego@med.puc.cl
16.					
17.					

N°	NOMBRE	INSTITUCION	FONO	FAX	E-MAIL
47.	PEDRO SANTIAC	COCHILCO	3828213	3828100	PSANTIC@COCHILCO.CL
48.	Roberto Abelink	Inst. Ingeniero CH2 Mill	2319205	23334046	r.abelink@yachoo.com
49.	Arbela Negro	SOFOLFA	3913130	3913210	arnego@soff.cl
50.	Andrés Muñoz	ASIMET	4216513	2033025	andres_muñoz@asimet.cl
51.	ALFREDO CANEPA	ASIMET	2468619	2468657	acane@crystalchile.cl
52.	Andrea Varan C	C.N.E.	3656800	3656888	avaras@cne.cl
53.	Aldo Bouyer G.	Servicios Salud Valpo.	239209	239209	abouyer@topia.com
54.	CARLOS OSORNO	SONAFI	2308686	2308666	
55.	Richard Vargas	Serv. S.L. Concep	201591	201545	rvargas@ssconcepcion.cl
56.	Pedro Saiz B.	S.S. Arqueología Seer	45-40736	45-40738	osoropa@seer.cl
57.	Eduardo Fisen	ENAMI	6377477	6377452	efisen@enami.cl
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N°	NOMBRE	INSTITUCION	FONO	FAX	E-MAIL
18.	DR. Andrei N. Tchornitchin	Colegio Médico de Chile	6786222		atcherni@machimedi.vchile.cl
19.	CLAUDIO CORVALAN	CANAMIA II REGION			CCORVALAN.5@CANAMIA.CC
20.	ANDRÉS FORSTAL M.	MINISTERIO	4213407	6954344	oportale@mtt.ccl
21.	CELESTINO MENEZES	AGMTP	3696627	3696685	
22.	FABRICA UNIBAS A.	CASA DE LA PAZ / ACPEH	2349060	3343830	unimed@chilbot.net
23.	CECILIA GODOY GONZALEZ	SERVICIO DE SALUD O'HIGGINS.	42-238686	42-226902	SIN/E-MAIL
24.	SUIWETA DO CARVALO SUAZO.	SERVICIO DE SALUD O'HIGGINS	42-228040	42-226902	✓
25.	SANTIAGO SALAZAR	RENACE.	223.4483		
26.	VIMENE ZUBILLO	LOW PPA W	224749	239106	xubillo.6@conarino.cl
27.	FERNANDA VALENZUELA	CONSEJO MINERO	2306301	2306255	fvalezuela@exxon.com
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**REVISION NORMAS PRIMARIAS DE CALIDAD DE
AIRE PARA SO2, NO2,O3,CO Y PTS**

**Comisión Nacional del Medio Ambiente
Depto. Descontaminación, Planes
y Normas**

PROGRAMA DE LA REUNION

10:00.

- Procedimiento Dictación Normas Ambientales
- Proceso de Revisión Normas

11:00

- Café

11:15

- Inscripción Grupos de Trabajo

15:00

- Presentación estudio realizado por SGA, Sr. Jaime Solari

ANTECEDENTES GENERALES

Normas ambientales:

- Normas de calidad ambiental
 - Primarias: Protege la salud de la población.
 - Secundaria: Protege los recursos naturales y el patrimonio ambiental.
- Normas de emisión

ANTECEDENTES GENERALES

Normas de Calidad Ambiental:

- Las normas de calidad ambiental fijan estándares ambientales, a cuyo cumplimiento deben orientarse el diseño de políticas públicas y la actividad productiva

PROCEDIMIENTO DICTACION NORMAS DE CALIDAD AMBIENTAL

- Según el Art. N°32 y 40 de la Ley N° 19300:


Un reglamento establecerá el procedimiento para la dictación de normas de calidad ambiental y de emisión

- El Reglamento D.S N° 93/95 del Ministerio Secretaría General de la Presidencia establece el procedimiento para la dictación de normas de calidad ambiental y de emisión

REGLAMENTO DICTACION NORMAS DE CALIDAD AMBIENTAL

Disposiciones Generales:


- El reglamento contempla procesos de coordinación interna de los organismos públicos competentes y la participación del sector productivo y organizaciones sociales
- Las normas primarias de calidad ambiental tienen aplicación en todo el territorio de la república
- Las normas primarias de calidad ambiental se dictan mediante D.S del Ministerio Secretaría General de la Presidencia y del Ministerio de Salud



**REGLAMENTO DICTACION NORMAS
DE CALIDAD AMBIENTAL**

Disposiciones Generales:


- La coordinación del proceso de generación de normas corresponde a CONAMA
- El Director ejecutivo de CONAMA podrá previa aprobación del Consejo Directivo de CONAMA crear Comités Operativos que intervengan en la dictación de una norma
- La tramitación del proceso dará origen a un expediente público de la norma y a una tabla pública



**REGLAMENTO DICTACION NORMAS
DE CALIDAD AMBIENTAL**

Disposiciones Generales:

- En marzo de cada año la Dirección Ejecutiva de CONAMA propone al Consejo Directivo un Programa Priorizado de dictación de normas de calidad ambiental y de emisión



**PROCEDIMIENTO Y CRITERIOS PARA
LA REVISION DE NORMAS VIGENTES**

- Toda norma de calidad ambiental y de emisión será revisada a lo menos cada cinco años
- La revisión de las normas deberá sujetarse a criterios de eficacia de la norma y de eficiencia en su aplicación

PROCEDIMIENTO Y CRITERIOS PARA LA REVISION DE NORMAS VIGENTES



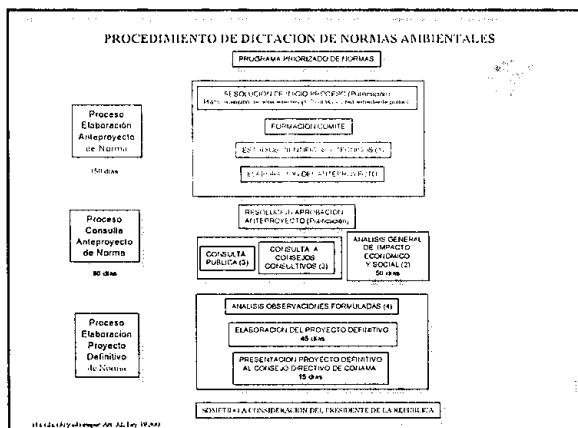
Los criterios para su revisión se ponderarán según:

- Antecedentes considerados para la determinación de la norma
- Nivel de cumplimiento y vigencia actual de los objetivos al momento de su dictación
- Cambios en las condiciones ambientales
- Resultados de investigaciones científicas que aporten nuevos antecedentes

PRINCIPALES ETAPAS PARA LA DICTACION O REVISION DE NORMAS DE CALIDAD AMBIENTAL

- Elaboración del anteproyecto de norma
- Evaluación del impacto económico y social del Anteproyecto
- Consulta a organismos competentes públicos y privados del anteproyecto de norma
- Análisis de observaciones formuladas al anteproyecto y elaboración del proyecto definitivo norma.
- Aprobación del proyecto definitivo de norma por el Consejo Directivo y sometimiento a consideración del Presidente de la República

PROCEDIMIENTO DE DICTACION DE NORMAS AMBIENTALES



EXPEDIENTE PUBLICO

Contenido:

- Resoluciones que se dicten
- Consultas evacuadas
- Observaciones que se formulen
- Todos los datos y documentos relativos a la dictación o revisión de la norma

ANTEPROYECTODE NORMA

Contenidos:

- Fundamentos, objetivo y definiciones.
- Valores de la norma.
- Valores que definen situaciones de emergencia.
- Metodologías de medición y control de la norma.
- Organismos encargados de la fiscalización.
- Plazos de entrada en vigencia de la norma.

CONSULTA DEL ANTEPROYECTO

- Cualquier persona, natural o jurídica, podrá formular observaciones al anteproyecto, dentro de los plazos establecidos
- Las observaciones deberán ser fundadas y entregarse por escrito a CONAMA

**ANALISIS DEL IMPACTO ECONOMICO Y SOCIAL
DEL ANTEPROYECTO**

Análisis del impacto económico y social de la norma evalúa la aplicación de la norma en términos de costos y beneficios para:

- La población, ecosistemas, especies directamente afectadas o protegidas
- Emisores que deberán cumplir la norma
- Estado como responsable de su fiscalización

PARTICIPACION CIUDADANA

- Publicación programa priorizado de normas
- Publicación de resolución de inicio
- Expediente público.
- Tabla pública
- Publicación de extracto de anteproyecto
- Etapa consulta pública
- Publicación en el Diario Oficial de la norma
- Mecanismo de reclamo

**PROCESO DE REVISION DE LAS NORMAS DE
CALIDAD DE AIRE PARA SO2, CO, NO2,
O3 Y PTS**

- En el tercer Programa Priorizado de Normas (1998/1999) se estableció la revisión de las normas de calidad de aire para los contaminantes SO2, NO2, O3, CO y PTS.

COMITE OPERATIVO

- Ministerio de Salud
- Ministerio de Minería
- Ministerio Transporte y Telecomunicaciones
- Ministerio de Obras Públicas
- Ministerio de Economía
- COCHILCO
- Comisión Nacional de Energía
- Servicio de Salud Metropolitano del Ambiente

COMITE OPERATIVO:

- Servicio de salud de Antofagasta
- Servicio de Salud Viña del Mar-Quillota
- Servicio de Salud de Valparaíso - San Antonio
- Servicio de Salud O'Higgins
- Servicio de Salud de Concepción
- Servicio de Salud de Talcahuano
- Servicio de Salud de Araucanía Sur

COMITE AMPLIADO:

Funciones:

- Proponer y entregar antecedentes para la toma de decisiones
- Emitir observaciones y opiniones a las decisiones que sean tomadas por el Comité Operativo

COMITE AMPLIADO:


- Colegio Médico
- Sociedad Chilena de Epidemiología
- OPS/OMS
- Renace
- Casa de la Paz
- Consejo Minero
- CODELCO - Chile
- ENAMI
- SONAMI
- SOFOFA
- ASIMET

COMITE AMPLIADO

- Greenpeace
- Universidad de Chile
- Pontificia Universidad Católica de Chile
- Universidad de Concepción
- Colegio Ingenieros de Chile
- Instituto Ingenieros de Chile
- Chile Ambiente
- Asociación Metropolitana de Transportes


CRONOGRAMA

Actividades	Plazo	2 0 0 0												
		ene	feb	mar	abr	may	jun	jul	ago	sep	oct	nov	dic	
Resolución Inicio	05 Feb													
Recepción antecedentes	15 Mar													
Anteproyecto Norma	03 Jun													
Evaluación económica	23 Jul													
Consulta pública	02 Ago													
Análisis Observaciones	10 Sep													
Proyecto definitivo	16 Sep													
Aprobación Consejo Directivo														



**ACTIVIDADES REALIZADAS
A LA FECHA**


- Estudio "Generación de antecedentes para la revisión de las normas contenidas en la Res. Nº1215.
- Reuniones con diferentes Ministerios
- Recopilación Antecedentes



ANTECEDENTES DISPONIBLES

Información:

- Estudio "Generación de Información para la Revisión de los Contaminantes contenidos en la Res. Nº1215 (SGA):
 - Efectos del contaminante en la salud (nacional e internacional)
 - Niveles de calidad de aire en Chile
 - Comparación con normas internacionales
 - Metodologías de medición
 - Criterios considerados para fijar norma
 - Criterio para manejo de excedencias
 - Normas para situaciones de emergencia
 - Fiscalización y cumplimiento de la Res. 1215
 - Evaluación técnico - económica



ANTECEDENTES DISPONIBLES

Información:

- Resultados Estudio SGA:
 - Propuesta inicial de normas
 - Evaluación técnico - económica de la aplicación de la propuesta inicial.
 - Propuesta de norma definitiva.

ANTECEDENTES DISPONIBLES

Información:

- Documentos de base utilizados para el establecimiento de la normativa vigente en la CE (1999/30/CE) (SO₂, NO_X)
 - Efectos en salud
 - Evaluación del riesgo en salud
 - Evaluación niveles de concentración
 - Evaluación de costos
- Estudio de Calidad de Aire en Regiones Urbanas - Industriales de Chile, Proyecto COSUDE.

ANTECEDENTES DISPONIBLES

Información:

- Resultados de monitoreo de calidad de aire y emisiones asociado Planes de Descontaminación vigentes
- Resultados de monitoreo de monitoreo de calidad de aire asociado a centros urbanos y generada por estudios de impacto ambiental, solicitada a CONAMAs Regionales

ANTECEDENTES DISPONIBLES

Modelos:

- Modelación a escala Regional para macrozonas
 - VI Región
 - V Región
 - Región Metropolitana

OTROS ANTECEDENTES

Expertos Internacionales :

- Expertos Escuela de Salud Pública, Universidad de Harvard.
 - Fecha probable: Mayo-Junio
- Expertos de la Agencia Ambiental Suiza: División Control Atmosférico.
 - Fecha probable: Mayo y Agosto

ORGANIZACION DEL TRABAJO

- Se trabajará en grupos por contaminantes.
- Existirá un coordinador general del proceso (Rodrigo Lucero)
- Existirán tres coordinadores según contaminantes:
 - Para CO y PTS: Andrea Muñoz
 - Para NO2 y O3: Fernando Parías
 - Para SO2: Rodrigo Lucero

ORGANIZACION DEL TRABAJO

- Evaluación Económica y Social del Anteproyecto:
 - Juan Ladrón de Guevara, Unidad de Economía Ambiental de CONAMA
- Participación Ciudadana:
 - Rodrigo Calderón, Unidad de Participación Ciudadana de CONAMA

ORGANIZACION DEL TRABAJO

Se estima la siguiente programación para las reuniones de Comité Operativo y/o Comité Ampliado:

- Días de reunión:
 - Lunes y Martes según contaminante
- Frecuencia de reuniones por contaminante:
 - SO2 y O3 : Dos veces por mes
 - CO y NO2 : 1 vez cada tres semanas
 - PTS : Una vez por mes

ORGANIZACION DEL TRABAJO

Próxima reunión:

- Grupo PTS, SO2 y O3: Lunes 17 Abril
- Grupo CO y NO2 : Martes 18 Abril
- Presentación antecedentes específicos por contaminante:
 - Antecedentes en salud
 - Normativa Internacional
 - Nivel de cumplimiento de las normas en Chile
 - Fuentes emisoras y niveles de emisión
- Requerimiento de nuevos antecedentes

ORGANIZACION DEL TRABAJO

Principales vías de distribución de información:

- E-MAIL
- Página WEB CONAMA



GOBIERNO DE CHILE
COMISION NACIONAL
DEL MEDIO AMBIENTE

Con fecha 30 de marzo de 2000 se archivaron bajo los números que a continuación se indican los siguientes antecedentes para la Revisión de las Normas Primarias de Calidad de Aire para CO, O3, NO2, SO2 y PTS:

- 1-NOR-1/00 Estudio Antecedentes para la Revisión de las Normas de Calidad de Aire contenidas en la Resolución N°1215, del Ministerio de Salud, SGA Ibersis.
- 2-NOR-1/00 Estudio de Calidad de Aire en regiones urbano-industriales de Chile, COSUDE.
- 3-NOR-1/00 Council Directive, on ambient air quality assessment and management, European Communities.



RODRIGO LUCERO CH.
Depto. Descontaminación, Planes y Normas
Comisión Nacional del Medio Ambiente



GOBIERNO DE CHILE
COMISION NACIONAL
DEL MEDIO AMBIENTE

Con fecha 30 de marzo de 2000 se archivaron los documentos que a continuación se indican sobre antecedentes para la Revisión de las Normas Primarias de Calidad de Aire para CO, O3, NO2, SO2 y PTS:

1. Anhídrido Sulfuroso y Material Particulado.
2. Información Monitoreo de polvo sedimentable, Dirección Regional XII Región, Aysén.
3. Información Monitoreo Calidad de Aire de CO, NOx O3, PTS y SO2, Dirección Regional II Región.
4. Información Monitoreo Calidad de Aire SO2, NO2, Huasco, Dirección Regional III Región.
5. Resolución N°1215, del Ministerio de Salud.
6. Documento Contraloría General de la República, Resolución N°1215.
7. Análisis de antecedentes para la revisión de normas de calidad contenidas en la Resolución N°1215, Claiss.
8. Guidelines for Equality, WHO Geneva, 1999.
9. Directiva 1999, Comunidad Europea (CE) del Consejo, relativa a los valores límite de dióxido de azufre, dióxido de nitrógeno y óxidos de nitrógeno, partículas y plomo en el aire ambiente.



RÓDRIGO LUCERO CH.

Depto. Descontaminación, Planes y Normas
Comisión Nacional del Medio Ambiente

Sulfur dioxide and particulate matter

General Description

Sulfur dioxide (SO_2) and particles derived from the combustion of fossil fuels are major air pollutants in urban areas of the world. Sulfur oxides (SO_x) and particulate matter are parts of a complex pollutant mixture. For guideline purposes, a division into three categories is appropriate:

- (a) sulfur dioxide,
- (b) the acid aerosols that may result from the oxidation of sulfur dioxide in the atmosphere, and
- (c) sulfur dioxide plus particles.

Sulfur dioxide. Sulfur dioxide is a colourless gas that reacts on the surface of a variety of airborne solid particles. It is readily soluble in water and can be oxidized within airborne water droplets.

Sulfur dioxide results from the combustion of sulfur-containing fossil fuels, the smelting of sulfur-containing ores, and other industrial processes. Domestic fires can also produce emissions containing sulfur dioxide.

Acid aerosol. Sulfuric acid (H_2SO_4) is a strong acid that is formed from the reaction of sulfur trioxide gas (SO_3) with water. Sulfuric acid is strongly hygroscopic. As a pure material, it is a clear colourless liquid with a boiling-point of 330°C . Ammonium bisulfate (NH_4HSO_4), which is less acidic than sulfuric acid as a pure material, is a crystalline solid, with a melting-point of 147°C .

Particulate matter. Airborne particulate matter represents a complex mixture of organic and inorganic substances. Mass and composition tend to divide into two principal groups: coarse particles larger than $2.5\mu\text{m}$ in aerodynamic diameter, and fine particles smaller than $2.5\mu\text{m}$ in aerodynamic diameter. The smaller particles contain the secondarily formed

aerosols (gas to particle conversion), combustion particles and recondensed organic and metal vapours. The larger particles usually contain earth crustal materials and fugitive dust from roads and industries. The acid component of particulate matter, and most of its mutagenic activity, is generally contained in the fine fraction, although in fog some coarse acid droplets are also present.

Because of the complexity of particulate matter and the importance of particle size in determining exposure, multiple terms are used to describe particulate matter. Some terms are derived from and defined by sampling methods, e.g. suspended particulate matter, total suspended particulates, black smoke. Other terms refer more to the site of deposition in the respiratory tract, e.g. inhalable, thoracic particles that deposit primarily in the lower respiratory tract below the larynx. Other terms, such as PM_{10} (particulate matter with an aerodynamic diameter of $10\mu m$), have both physiological and sampling components.

Methods for sampling and analysing suspended particulate matter were discussed by WHO (1) and the US Environmental Protection Agency (EPA) (2). These methods included "smoke" measurements, which may represent the darkness of stain obtained on a white filter-paper through which air has been passed (according to the British smoke method, sometimes referred to as the black smoke method), and also total suspended particulate measurements (gravimetric measurement of particulates of all sizes collected on a glass fibre filter by a high volume sampler according to the method of the US Department of Health, Education, and Welfare (3), as well as by several other methods).

Respirable particles (1), typically with a $4.5\mu m$ aerodynamic diameter (50% cut-off point), are collected by the black smoke method and its variations; some particles up to $7-9\mu m$ are also collected.

Methods to measure total suspended particulates (by high volume sampler) have been used extensively in the USA. There are problems with this method, however, in that the size range of particles sampled extends well beyond those particles that are able to penetrate the upper respiratory tract, and in arid regions the method is liable to sample wind-entrained dust of noncombustive origin. This problem has been recognized by US EPA who recommended that particulate matter of less than $10\mu m$ aerodynamic diameter (PM_{10}) be measured, as a better indicator of health-related particles.

Recommendations have been made by the International Organization for Standardization (ISO) regarding the aerodynamic particle size range corresponding with thoracic penetration (4), and samplers that have acceptance characteristics that approximate that curve are being increasingly used. Such thoracic particle measurements according to the ISO standard (ISO-TP) are roughly equivalent to the sampling characteristics for particulate matter with a 50% cut-off point at $10\mu m$ diameter.

Sources

Sulfur dioxide

While there are some natural sources of sulfur dioxide (such as volcanoes) that contribute to environmental levels in the European Region, man-made

contributions from the combustion of fossil fuels are of prime concern in relation to human exposures. Over the past 10–20 years there has been a tendency towards declining emissions in much of the Region, due to changes in the types or amounts of fuel used. More importantly, however, the types of sources have changed even more, away from small multiple sources (domestic, commercial or industrial) towards large single sources such as power stations, which disperse pollutants at higher altitudes. The net result has been a marked reduction in concentrations of sulfur dioxide in many large cities that were at one time highly polluted. A more widespread distribution, by long-distance transport within the Region, is now the dominant pattern.

Acid aerosol

The major proportion of sulfur emissions from combustion sources is emitted as sulfur dioxide, which is further oxidized to sulfur trioxide in the atmosphere at a rate of 0.5–10% per hour. As a result of the presence of moisture, sulfuric acid is formed; this is present as an aerosol, often associated with other pollutants in droplets or solid particles extending over a wide range of sizes. Most of the sulfuric acid in ambient air results from sulfur dioxide emitted by combustion. Other direct or primary point sources of sulfuric acid include acid manufacturing plants and consuming industries, such as fertilizer and pigment factories.

Sulfuric acid and its partial atmospheric neutralization product, ammonium bisulfate, represent almost all of the strong acid content in the ambient aerosol. The ultimate neutralization product, ammonium sulfate ($(\text{NH}_4)_2\text{SO}_4$), is only weakly acidic. Other strong acids in the ambient air, e.g. nitric acid (HNO_3) and hydrochloric acid (HCl), will be present as vapours, except when incorporated into fog droplets.

Because of its hygroscopic property, sulfuric acid in ambient air will always be present as a solution droplet whose H^+ concentration varies with ambient humidity. Pure ammonium bisulfate can be present as a salt crystal at humidities up to 80%. However, once it is dissolved into droplet form it will not become a crystal again until the humidity falls below 69%. Once inhaled into the moist respiratory tract, it will take up water vapour and deposit as dilute droplets.

Particulate matter

Suspended particulate matter is a term used to cover a range of finely divided solids or liquids that originate from a number of natural or man-made sources.

Particulate matter of respirable size may be emitted from a number of sources, some of them natural (e.g. volcanoes and dust storms) and many others that are more widespread and more important (e.g. power plants and industrial processes, vehicular traffic, domestic coal burning, industrial incinerators). The majority of these non-natural sources are concentrated in limited portions of the territory, i.e. the urbanized areas, where populations are also concentrated (1,5).

Occurrence in air

Sulfur dioxide

As a result of the changes in sources, annual mean levels of sulfur dioxide in major cities of Europe, stated earlier by WHO (1) to be within the range $100\text{--}200\mu\text{g}/\text{m}^3$, are now largely below $100\mu\text{g}/\text{m}^3$. Similarly, there has been a decline in maximum daily mean values, which are now mainly in the range $250\text{--}500\mu\text{g}/\text{m}^3$. Peaks over shorter averaging periods, such as 1 hour, extend to $1000\text{--}2000\mu\text{g}/\text{m}^3$ and in some situations higher transient peaks may also occur. Indoor concentrations of sulfur dioxide are generally lower than outdoor concentrations, since absorption of sulfur dioxide occurs on walls, furniture, clothes and in ventilation systems. An exception is occupational exposure, where concentrations of several thousand micrograms may occur regularly (1).

Data on European concentrations of sulfur dioxide and deposition of other sulfur compounds are based either on national monitoring networks, which are largely concentrated in urban areas, or on cooperative programmes for the study of the long-range transport of pollutants (6,7). Natural concentrations of sulfur dioxide are normally below $5\mu\text{g}/\text{m}^3$. The annual mean sulfur dioxide concentrations in most rural areas of Europe are between $5\mu\text{g}/\text{m}^3$ and $25\mu\text{g}/\text{m}^3$. However, as a result of the common practice of using high chimneys to disperse emissions, there are also large rural areas in Europe where average concentrations now exceed $25\mu\text{g}/\text{m}^3$. Sulfur dioxide is often accompanied by elevated levels of nitrogen oxides (NO_x) (8).

Acid aerosol

Current average acid aerosol levels in Europe and North America are not known. The highest current levels reported in recent years have been summarized by Lioy & Lippmann (9). They are in the range of $20\text{--}30\mu\text{g}$ sulfuric acid per m^3 (6–12 hours average) in various parts of North America, and $28\mu\text{g}$ sulfuric acid per m^3 in Europe (Berlin (West)). The highest reported level in the United Kingdom was $680\mu\text{g}$ sulfuric acid per m^3 (1-hour average) in London in 1962. Higher levels were almost certainly present in London in earlier years. Maximum ambient concentrations are likely to occur in urban fogs or downwind of coal- and oil-fired power plants and industrial sources. The distribution of secondary acidic aerosol is much more general, ambient levels depending on the rates of sulfur dioxide oxidation and the subsequent neutralization of sulfuric acid in the ambient air by ammonia (NH_3). Rates of sulfur dioxide oxidation depend on ambient temperature, humidity, and concentrations of oxidants and catalytic components of particles in the atmosphere and cloud droplets. Rates of ammonia neutralization depend on the strength of ammonia sources and atmospheric mixing. Ammonia emissions are lowest over water and afforested regions, and higher over urban and agricultural regions. Indoor sources of sulfuric acid are generally not significant except in some occupational environments.

Particulate matter

In rural areas within Europe, black smoke values range from near zero to about $10\mu\text{g}/\text{m}^3$. In the larger cities, annual mean concentrations of smoke range from 10 to $40\mu\text{g}/\text{m}^3$. Where gravimetric measurements of particulates are made, the annual values lie between about 50 and $150\mu\text{g}/\text{m}^3$. Corresponding maxima are $100\text{--}250\mu\text{g}/\text{m}^3$ (black smoke) and $200\text{--}400\mu\text{g}/\text{m}^3$ (suspended particulate matter gravimetric).

Conversion factors*Sulfur dioxide*

$$1 \text{ ppm} = 2860 \mu\text{g}/\text{m}^3$$

$$1 \text{ mg}/\text{m}^3 = 0.35 \text{ ppm}$$

Acid aerosol

Acidic aerosol concentrations can be expressed as μmols of H^+/m^3 or as sulfuric acid equivalent in $\mu\text{g}/\text{m}^3$. There are $98\mu\text{g}$ per μmol .

Particulate matter

As indicated, no generally applicable conversion factors can be set between black smoke values and various gravimetric particulate matter values (e.g. total suspended particulates or ISO-TP).

Routes of Exposure

Inhalation is the only route of exposure that is of interest in relation to the effects of sulfur dioxide, acidic aerosol and suspended particulate matter on human health. For some special substances, which are constituents such as lead and some highly toxic organic compounds, other routes of uptake such as the alimentary tract may also be of interest. In this context, however, only health effects on the respiratory tract will be considered.

Kinetics and Metabolism*Sulfur dioxide*

Absorption of sulfur dioxide in the mucous membranes of the nose and upper respiratory tract occurs as a result of its solubility in aqueous media. The absorption is concentration-dependent, with 85% absorption in the nose at $4\text{--}6\text{ mg}/\text{m}^3$ and about 99% at $46\text{ mg}/\text{m}^3$. Only minimal amounts reach the lower respiratory tract (2, 10, 11). From the respiratory tract, sulfur dioxide enters the blood. Elimination occurs (after biotransformation to sulfate in the liver), mainly by the urinary route.

Acid aerosol

The deposition pattern within the respiratory tract is dependent on the size distribution of the ambient droplets and humidity. Acidic ambient aerosol typically has a mass median aerodynamic diameter of $0.3\text{--}0.6\mu\text{m}$. Thus,

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even with hygroscopic growth in diameter in the respiratory airways by a factor of between 2 and 4, particles remain within the fine-particle range and deposit preferentially in the distal lung airways and airspaces. Some neutralization of the droplets can occur before deposition, due to the normal excretion of endogenous ammonia into the airways. Deposited free H^+ reacts with components of the mucus of the respiratory tract, changing its viscosity (12). The unreacted part of H^+ diffuses into surrounding tissues. The capacity of the mucus to react with H^+ is dependent on the H^+ absorption capacity, which is reduced in acidic saturated mucus as found, for example, in asthmatics.

Under fog conditions the ambient acid is incorporated into droplets, with average droplet sizes in the range of 10–15 μm . Such droplets can also contain dissolved nitric acid and other acidic vapours. Inhaled fog droplets will deposit primarily in the upper respiratory tract; very little will penetrate to the deeper lung airways, where most of the fine acidic aerosol will deposit.

Particulate matter

As discussed elsewhere (1,11,13,14), a portion of the inhaled aerosol is deposited by contact with airway surfaces and the remainder is exhaled. In inhalation toxicology, the term "deposition" refers to removal from inspired air of inhaled particles. "Clearance" refers to the subsequent removal of deposited material from the respiratory tract. Within a species, deposition of inhaled particles in the respiratory tract depends mainly on breathing pattern and particle size (aerodynamic diameter). Larger particles (10 μm and above) are mainly deposited in the extrathoracic part of the respiratory tract (above the epiglottis) and the main proportion of particles 5–10 μm in size are deposited in proximity to the fine airways (respiratory bronchioles) with normal nasal breathing. With mouth breathing, the regional deposition pattern changes markedly, extrathoracic deposition being reduced and tracheobronchial and pulmonary deposition enhanced. The proportion of mouth breathing to nose breathing increases with exercise and conversation (15).

During mouth breathing, fine particles (<2.5 μm aerodynamic equivalent diameter (D_{ac})) deposit primarily in the pulmonary region; between about 3 and 5 μm D_{ac} significant deposition in both the pulmonary and the tracheobronchial regions occurs; at larger sizes (about 7–15 μm D_{ac}), deposition is predominantly in the tracheobronchial region as opposed to the pulmonary region (16).

Health Effects

Sulfur dioxide

Acute effects

High concentrations of sulfur dioxide can give rise to severe effects in the form of bronchoconstriction and chemical bronchitis and tracheitis, as seen

in animal experiments (1) and in occupational exposures to more than $10\,000\ \mu\text{g}/\text{m}^3$. Concentrations of sulfur dioxide in the range $2600\text{--}2700\ \mu\text{g}/\text{m}^3$ give rise to frank effects with bronchospasm in asthmatics (17).

The effects of concern in relation to short-term exposures are those on the respiratory tract. There is an extremely large variability of sensitivity to sulfur dioxide exposure among individuals. This is true for normal persons, but especially so if asthmatics are included (12). Asthmatics have very labile airways and resistance is likely to change in response to many other stimuli, including pollens (1,2,11). Effects observed in asthmatics at relatively low concentrations of sulfur dioxide under laboratory exposure situations are listed in Table I.

Effects of repeated and/or long-term exposures

Repeated short-term occupational exposure to high concentrations of sulfur dioxide combined with long-term exposure to lower concentrations can give rise to an increased prevalence of chronic bronchitis, especially in cigarette smokers. A possible contribution of simultaneously occurring sulfuric acid aerosol has, however, not been examined in these studies (24). Several epidemiological studies have associated the occurrence of pulmonary effects in communities with combined exposure to sulfur dioxide and particulates.

A continuum of response to sulfur dioxide exposures at relatively low concentrations has been observed in laboratory investigations of human volunteers. The magnitude of the effects was much enhanced when subjects increased their breathing rates through exercise. The findings in a wide range of studies among asthmatics (Table I) are consistent with a linear relationship (25) between magnitude of effect (in terms of proportionate increase in airway resistance) and dose of sulfur dioxide delivered to the airways (after allowing for removal of a substantial proportion in the nose or mouth). Thus, in a strict sense it would be difficult to define a lowest-adverse-effect level since the effect appears to be a function of the sensitivity of the subject, concentration, duration of exposure (10 minutes being the most usual duration of test exposure), level of activity and mucus rheological properties. It was, nevertheless, considered that effects of concern to the health of exercising asthmatic subjects were demonstrable down to sulfur dioxide levels of about $1000\ \mu\text{g}/\text{m}^3$, with discernible effects of less certain consequence below that level.

Another aspect, of greater importance to public health, is the proportion of the population liable to be affected. Detailed information regarding the proportion of asthmatic or otherwise sensitive people in the community is not available, although estimates of around 5% have been suggested.

Sensory effects

At concentrations of $10\,000\ \mu\text{g}/\text{m}^3$, sulfur dioxide has a pungent, irritating odour. Since the odour threshold of sulfur dioxide is several thousand $\mu\text{g}/\text{m}^3$, this criterion is not critical in relation to public health.

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Acid aerosol: effects on experimental animals

Acute exposures

Respiratory mechanical function. Alterations of pulmonary function, particularly increases in pulmonary flow resistance, occur after acute exposure. Reports of the irritant potency of various sulfate species are variable (2,11), owing in part to differences in animal species and strains, and also to differences in particle size, pH, composition and solubility. Sulfuric acid is more potent than any of the sulfate salts in terms of increased airway irritancy. For short-term (1-hour) exposures, the lowest concentration of sulfuric acid reported to increase airway resistance was $100\mu\text{g}/\text{m}^3$ (in guinea pigs). The irritant potency of sulfuric acid depends in part on particle size, with smaller particles having more effect.

Particle clearance function. Donkeys exposed by inhalation for 1 hour to $0.3\text{--}0.6\mu\text{m}$ sulfuric acid at concentrations ranging from 100 to $1000\mu\text{g}/\text{m}^3$ exhibited slowed bronchial mucociliary clearance function at concentrations of $\geq 200\mu\text{g}/\text{m}^3$, while rabbits undergoing similar exposures showed an acceleration of clearance at concentrations between 100 and $300\mu\text{g}/\text{m}^3$, and a progressive slowing of clearance at concentrations of $\geq 500\mu\text{g}/\text{m}^3$ (26).

Subchronic exposures

Particle clearance function. Donkeys exposed for 1 hour per day, 5 days per week, for 6 months to an aerosol ($0.3\text{--}0.6\mu\text{m}$) of sulfuric acid at a concentration of $100\mu\text{g}/\text{m}^3$ developed highly variable clearance rates, and a persistent shift from baseline rate of bronchial mucociliary clearance during the exposures and for 3 months after the final exposure. During the 3 months of follow-up, 2 animals had much slower clearance than the baseline rate, while 2 had rates faster than the baseline (26). Rabbits exposed for 1 hour per day, 5 days per week for 20 days to $0.3\mu\text{m}$ sulfuric acid at $250\mu\text{g}/\text{m}^3$ developed variable mucociliary clearance rates during the exposure period, and their clearance during a 2-week period following the exposure was substantially faster than their baseline rates (26).

Histology. In the study cited above, in which rabbits were exposed to $250\mu\text{g}/\text{m}^3$ for 4 weeks and sacrificed 2 weeks later, histological examinations of the airways showed increased numbers of secretory cells in distal airways, and thickened epithelial cell layers in airways extending from medium-sized airways to terminal bronchioles. There were no corresponding changes in the trachea or other large airways (26). In a study in which dogs were exposed daily for 5 years to $1100\mu\text{g}$ sulfur dioxide per m^3 plus $90\mu\text{g}$ sulfuric acid per m^3 and were then allowed to remain in unpolluted air for 2 years, there were small changes in pulmonary functions during the exposure, which continued following the termination of exposure. Morphometric lung measurements made at the end of the two-year post-exposure period showed changes analogous to an incipient stage of human centrilobular emphysema (14).

Table 1. Effects observed in asthmatic subjects during laboratory conditions of exposure to sulfur dioxide

Sulfur dioxide concentration ^a (ppm)	Duration of exposure (min)	Number and type of subject	Type of exposure	Type of activity	Effects ^b	Reference
1, 3, 5	10	7, normal 7, atopic 7, asthmatic	Mouthpiece	Rest	<i>SRaw</i> increased significantly at all concentrations for asthmatic subjects, only at 5 ppm for normal and atopic subjects. Some asthmatics exhibited marked dyspnoea requiring bronchodilation therapy	(18)
1.0 0.1, 0.25, 0.5	5 10	6, asthmatic 7, asthmatic	Mouthpiece	Exercise	<i>SRaw</i> significantly increased in the asthmatic group at 0.5 and 0.25 ppm of sulfur dioxide and at 0.1 ppm in the two most responsive subjects. At 0.5 ppm three asthmatic subjects developed wheezing and shortness of breath	(19,20)
0.50	180	40, asthmatic	Oral chamber Nose clips	Rest	<i>MMFR</i> significantly decreased 2.7%; recovery within 30 minutes	(21)
0.5	10	5, asthmatic	Mouthpiece	Exercise	<i>SRaw</i> increases were observed over exercise baseline rates for 80% of the subjects	(22)
0.25, 0.5	60	24, asthmatic	Chamber	Exercise	No statistically significant changes in <i>FVC</i> or <i>SRaw</i>	(22)

0.5	10	5, asthmatic	Mouthpiece	Exercise	<i>SRaw</i> increases were observed over exercise baseline rates for 80% of the subjects	(22)
0.25, 0.5	60	24, asthmatic	Chamber	Exercise	No statistically significant changes in <i>FVC</i> or <i>SRaw</i>	(22)

0.30	120	19, asthmatic	Chamber	Exercise	No pulmonary effects seen with 0.3 ppm of sulfur dioxide and 0.5 ppm of nitrogen dioxide exposure compared to exercise baseline	(23)
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^a 0.1 ppm of sulfur dioxide \cong 262 $\mu\text{g}/\text{m}^3$; 0.5 ppm \cong 1310 $\mu\text{g}/\text{m}^3$; 1.0 ppm \cong 2620 $\mu\text{g}/\text{m}^3$; 5.0 ppm \cong 13100 $\mu\text{g}/\text{m}^3$; 10 ppm \cong 26200 $\mu\text{g}/\text{m}^3$; 60 ppm \cong 131000 $\mu\text{g}/\text{m}^3$

^b Significant increase or decrease noted here refers to "statistically significant" effects, independent of whether the observed effects are "medically significant" or not. Abbreviations are as follows: *SRaw*, specific airway resistance; *MMFR*, maximum mid-expiratory flow rate; *FVC*, forced vital capacity.

Acid aerosol: effects on humans*Acute effects*

Respiratory mechanical function. Sulfuric acid and other sulfates have been found to affect both the sensory and the respiratory function in humans.

Respiratory effects from exposure to sulfuric acid ($350\text{--}500\mu\text{g}/\text{m}^3$) have been reported to include increased respiratory rate and decreased maximal inspiratory and expiratory flow rates and tidal volume (2,11). However, other studies of pulmonary function in nonsensitive healthy adult subjects indicated that pulmonary mechanical function was little affected when subjects were exposed to $100\text{--}1000\mu\text{g}$ sulfuric acid per m^3 for 10–120 minutes. In one study, the bronchoconstrictive action of carbachol was potentiated by sulfuric acid and other sulfate aerosols, more or less in relation to their acidity. Asthmatics are substantially more sensitive in terms of changes in pulmonary mechanics than healthy people, and vigorous exercise potentiates the effects at a given concentration. The lowest-demonstrated-effect level for sulfuric acid was $100\mu\text{g}/\text{m}^3$ via mouthpiece inhalation in exercising adolescent asthmatics. The effects were relatively small and disappeared within about 15 minutes. In adult asthmatics undergoing similar protocols, the lowest-observed-effect level was $350\mu\text{g}/\text{m}^3$ (11,27).

Particle clearance function. In healthy nonsmoking adult volunteers exposed to $0.5\mu\text{m}$ sulfuric acid at rest at $100\mu\text{g}/\text{m}^3$ for 1 hour, there was an acceleration of bronchial mucociliary clearance of particles which deposited primarily in large thoracic airways, and a slowing of clearance when the exposure was raised to $1000\mu\text{g}/\text{m}^3$. For particles that deposited primarily in medium-sized and small airways, there was a small but significant slowing of clearance at $100\mu\text{g}/\text{m}^3$ and a greater slowing at $1000\mu\text{g}/\text{m}^3$. These changes are consistent with the greater deposition of acid in medium-sized to smaller airways. Exposures to $100\mu\text{g}/\text{m}^3$ for 2 hours produced slower clearance than the same exposure for 1 hour, indicating a cumulative relationship to dose (26).

Effects of longer-term exposure

Kitagawa (28) identified sulfuric acid as the probable causal agent for approximately 600 cases of respiratory disease in the Yokkaichi area of central Japan between 1960 and 1969. The patients' homes were concentrated within 5 km of a titanium dioxide plant with a 14 m stack that emitted from 100 000 to 300 000 kg sulfuric acid per month in the period 1961–1967. The average concentration of sulfur trioxide in February 1965 in Isozu, a village 1–2 km from the plant, was $130\mu\text{g}/\text{m}^3$, equivalent to a sulfuric acid concentration of $159\mu\text{g}/\text{m}^3$. Kitagawa estimated that peak concentrations might be up to 100 times as high when a north wind was blowing. Electrostatic precipitators were installed to control aerosol emissions in 1967, and after 1968 the number of newly found patients with "allergic asthmatic bronchitis" or "Yokkaichi asthma" gradually decreased. Kitagawa's quantitative estimates of exposure to sulfuric acid and the criteria used to describe

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cases of respiratory disease may differ from current methods. The unique aspect of this report is the identification of sulfuric acid as the likely causal agent for excess morbidity.

Other evidence of links between high concentrations of ambient sulfuric acid and effects on human health is more circumstantial. Sulfuric acid concentrations in the ambient air were certainly much higher than current levels during the classic episodes in London, the Meuse valley, and Donora, but so were concentrations of many other pollutants. Similarly, the decline in the prevalence of chronic bronchitis in the United Kingdom over the past three decades could have been due to the decline in emissions of any of several pollutants. However, on mechanistic grounds and in view of known exposure-response relationships, sulfuric acid is a more plausible candidate than sulfur dioxide, carbonaceous particles and other known constituents (29).

In an analysis of 1980 cross-sectional mortality for the USA (30), predictors of mortality due to air pollution were expressed in terms of four aerosol pollutant surrogates, i.e. total suspended particulates, inhalable particles $< 15\mu\text{m}$, fine particles $< 2.5\mu\text{m}$, and sulfate (SO_4^{2-}). Among these, only fine particles and sulfate had statistical significance as predictors of response, but these two surrogates' P values were typically < 0.01 .

The measured sulfate includes strong acids (sulfuric acid), the less acidic salt (ammonium bisulfate) and the fully neutralized salt (ammonium sulfate). Since the $\text{H}^+/\text{SO}_4^{2-}$ ratio is highly variable in time and location and is often close to zero, sulfate is a relatively poor surrogate for acid aerosol concentration. The conclusion that sulfate is a better surrogate for the active component of fine particles than the other three surrogates does not necessarily make it a good one (29). It does, however, lend support to the hypothesis that H^+ is the active agent (12). Unfortunately, epidemiological studies are not available by which mortality and/or morbidity can be related to the acidity (i.e. H^+ ion concentration) of respirable particles (29). This would be expected to constitute a more appropriate measurement (12).

Sensory effects

The odour threshold for sulfuric acid has been estimated to be $750\mu\text{g}/\text{m}^3$ on the basis of one study and $3000\mu\text{g}/\text{m}^3$ on the basis of another (2).

Sulfur dioxide and particulate matter

Short-term health effects related to 24-hour average values of sulfur dioxide and particulate matter

Variations in 24-hour average concentrations of sulfur dioxide, black smoke and total suspended particulates have been associated with increased mortality, morbidity and deficits in pulmonary function tests (1,2,11). Regression analysis of daily pollution variables in relation to urban death rates results in significant coefficients, even after accounting for temperature and other associations. These relationships cannot clearly establish a threshold effect. However, on the basis of the London studies (31) in which 24-hour concentrations of sulfur dioxide and black smoke were above $500\mu\text{g}/\text{m}^3$, the daily mortality increased significantly above baseline rates. This does not

preclude the possibility that mortality effects occur below these concentrations. In fact, recent time-series analyses of New York City mortality data over 15 years (32) suggest that variations in fine particle measures can explain approximately 5% of the fluctuation in mortality, regardless of weather effects. Concentrations in a range below 500 µg black smoke per m³ were reported in the London analysis, but a different measurement method was used in the report from the USA. Short-term effects of air pollution have been investigated in several studies involving responses in "sensitive" populations. Panel studies of asthmatic individuals have been the most frequently used design (11). Some of the earlier studies, using the responses of asthmatics to varying daily pollution levels, have not been relied upon, primarily because of their small sample size and inadequate exposure measurements. In addition, incidences of illness within a population of bronchitic patients have been studied with respect to daily air pollution concentrations. Significant changes in patients' conditions were observed when black smoke exceeded 250 µg/m³ and sulfur dioxide exceeded 500 µg/m³ (33). Taking into account indications from some other studies, as in the earlier WHO report (1), the minimum level of smoke and sulfur dioxide needed to produce effects was taken as 250 µg/m³.

In some studies, deviations in pulmonary function measures have been observed in children and adults that are associated with short-term fluctuations in particulate concentrations (1,2,11,34,35). In another study of approximately 200 children living in an industrialized community, a statistically significant negative mean slope of forced vital capacity (FVC) and forced expiratory volume (FEV) was found for total suspended particulates (11-272 µg/m³) and sulfur dioxide (0-281 µg/m³), with a correlation coefficient $r = 0.75$ (36). In this study total suspended particulate measurements were complemented by parallel inhalable particle measurements (37,38). Since inhalable particle values are generally similar to thoracic particle values, it was possible to estimate total suspended particulates/ISO-TP ratios. From the data collected by Dockery et al. (36) it can be calculated that in those 25% of children who were most sensitive, there was at least a four times greater deficit in pulmonary function compared with those of average sensitivity (for this subgroup a decrease in FEV of 0.39 ml/µg per m³ was observed). Those effects are associated with concentrations of total suspended particulates in the range of 150-200 µg/m³ (in the presence of sulfur dioxide), although total suspended particulate concentrations have frequently exceeded 260 µg/m³. Minimum levels for effects were judged to be 180 µg/m³ in the presence of sulfur dioxide. Relating total suspended particulates to ISO-TP would result in the same deficit in pulmonary function at concentrations of thoracic particles above 110 µg/m³ in the presence of sulfur dioxide. These values are estimated using specific total suspended particulates/ISO-TP ratios (37).

Although these changes are of health concern, the physiological significance of such apparently reversible effects on the immediate or long-term health of the individual is unknown.

In Table 2 the evidence on short-term health effects is summarized in terms of the lowest-observed-effect levels of air pollutants on health.

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Table 2. Summary of effects on human health of lowest-observed-effect levels of sulfur dioxide and particulate matter (short-term exposure)

Effect	24-hour mean exposure to:			
	SO ₂ ($\mu\text{g}/\text{m}^3$)	smoke ($\mu\text{g}/\text{m}^3$)	total suspended particulates ($\mu\text{g}/\text{m}^3$)	thoracic particles ($\mu\text{g}/\text{m}^3$)
Excess mortality	500	500		
Increased acute respiratory morbidity (adults)	250	250		
Decrements in lung function (children)			180	110

Long-term health effects related to annual means of sulfur dioxide and particulate matter

Mortality. Variations in mortality (all causes) and, more specifically, in mortality from cardiorespiratory diseases have been found during comparison of the findings from different cities in several countries (1). Multiple-regression analyses, using various indices of pollution (as long-term means), together with socioeconomic factors, indicate associations with pollutants (particulates and sulfate being the ones generally incorporated in analyses in the USA) that account for a small proportion (about 4%) of the variation in death rates between cities (30,39-41). Thus, it could be said that there are discernible effects of long-term exposure to the pollution complex of the particulate matter/sulfur dioxide type at relatively low annual mean levels, but it is considered that no firm guidance on lowest-observed-effect levels can be given on the basis of relationships of this type.

Morbidity. Further epidemiological studies on differences in the prevalence of respiratory symptoms (adults and children) and the frequency of respiratory illness (children) between communities with differing levels of pollution have provided results that are consistent with the conclusions reached earlier by WHO (1), indicating detectable increases where annual mean concentrations of both black smoke and sulfur dioxide exceed $100\mu\text{g}/\text{m}^3$ (42,43). Other pollutants, such as sulfates (or acid sulfates) may be relevant, but no measurements were available in the studies in question. The more recent studies have mainly been analysed using multiple-regression models, taking confounding variables into account as far as possible (44,45). In this way, the relative importance of different factors

Table 4. Guideline values for combined exposure to sulfur dioxide and particulate matter^a

	Averaging time	Sulfur dioxide ($\mu\text{g}/\text{m}^3$)	Reflectance assessment: black smoke ^b ($\mu\text{g}/\text{m}^3$)	Gravimetric assessment	
				Total suspended particulates (TSP) ^c ($\mu\text{g}/\text{m}^3$)	Thoracic particles (TP) ^d ($\mu\text{g}/\text{m}^3$)
Short term	24 hours	125	125	120 ^e	70 ^e
Long term	1 year	50	50	—	—

^a No direct comparisons can be made between values for particulate matter in the right- and left-hand sections of this table, since both the health indicators and the measurement methods differ. While numerically TSP/TP values are generally greater than those of black smoke, there is no consistent relationship between them, the ratio of one to the other varying widely from time to time and place to place, depending on the nature of the sources.

^b Nominal $\mu\text{g}/\text{m}^3$ units, assessed by reflectance. Application of the black smoke value is recommended only in areas where coal smoke from domestic fires is the dominant component of the particulates. It does not necessarily apply where diesel smoke is an important contributor.

^c TSP: measurement by high volume sampler, without any size selection.

^d TP: equivalent values as for a sampler with ISO-TP characteristics (having 50% cut-off point at $10\mu\text{m}$); estimated from TSP values using site-specific TSP/ISO-TP ratios.

^e Values to be regarded as tentative at this stage, being based on a single study (involving sulfur dioxide exposure also).

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has been shown more clearly and relationships are taken to be continuous, indicating that effects may well extend below the pollution levels quoted.

Community-based health studies are useful in attributing excess illness rates or differences in pulmonary performance to air pollution. Communities differ for a variety of cultural, social, economic and other factors that can result in different frequencies of illness. While air pollution may contribute to elevated illness rates, it is difficult to describe with certainty a level, an averaging time or even a specific contaminant that is unequivocally associated with a threshold effect level. Increased age-adjusted illness rates are associated with indices for sulfur dioxide, black smoke, total suspended particulates, and fine particles in several studies (1,2,11). Community differences in illness rates can be discerned in several more contemporary studies conducted in the late 1970s and early 1980s. It is of interest to note that the annual sulfur dioxide and total suspended particulate concentrations are lower than the concentrations associated with effects in earlier studies. For instance, in the USA (46) differences in community illness rates have been associated with annualized total suspended particulate concentrations ranging from 30 to 100 $\mu\text{g}/\text{m}^3$ (20–55 $\mu\text{g}/\text{m}^3$ when the particles measure less than 10 μm in diameter). The two communities with the highest illness rates had particle concentrations (for particles less than 10 μm in diameter) of 35 and 55 $\mu\text{g}/\text{m}^3$ (annual means).

In the Netherlands, a decreasing difference in respiratory symptom rates between a polluted and a cleaner area was observed (47). Initially, annual average sulfur dioxide concentrations above 200 $\mu\text{g}/\text{m}^3$ were observed in the polluted area, but after the mid-1970s sulfur dioxide levels were between 45 and 80 $\mu\text{g}/\text{m}^3$, while black smoke decreased from 34–45 to 25–35 $\mu\text{g}/\text{m}^3$. In the cleaner area sulfur dioxide values, measured after 1975, were 10–25 $\mu\text{g}/\text{m}^3$, and black smoke levels, measured after 1982, were 10–15 $\mu\text{g}/\text{m}^3$. In France (48) differences in symptom rates are associated with annual averages of sulfur dioxide over a range of 13–127 $\mu\text{g}/\text{m}^3$, measured by acidimetry, or a range of 22–85 $\mu\text{g}/\text{m}^3$, as measured by a specific technique.

Decrements in lung function. Measurements of respiratory physiology were included in several of the studies referred to above. Several of these observations have been reviewed by WHO (1), EPA (2) and Ericsson & Camner (11). Studies that have been conducted in the same communities over a period of years show associations between the magnitude of lung function changes and the levels of pollution. One series of such studies, carried out in the USA (49–51), indicated effects associated with particulates (measured as total suspended particulates) at an annual mean of 180 $\mu\text{g}/\text{m}^3$, though documentation of pollution levels in the series as a whole was incomplete and other pollutants could have been involved. From a more extensive series carried out in the Netherlands (47) it has been concluded that consistently lower lung function values in an urban, as compared with a rural, area might point to long-term effects of pollution. While much current information on a wide range of pollutants was available, it was considered that the effect could have related to earlier higher

levels, and lowest-observed

Sensory effects. Community studies have shown that sulfur dioxide and nitrogen oxides are irritants which can cause respiratory effects (1,52). Annoyance has been reported in a Swedish study of the population of a town classified as being smaller than the smaller Swedish towns. Surveys of annoyance reactions are in relation to a determined level of pollution.

Evaluation

Sulfur dioxide. When using the guideline to draw up a list of people from a community, peak values should be incorporated in order to protect the population subject to the highest pollution at the level of the guideline. The observed-effect level appears reasonable for the protection of people from the effects of sulfur dioxide (10 minutes exposure) from the effects of sulfur dioxide using some of the data in the case of sulfur dioxide.

Predictions of the source and distribution of pollution solutions. The towns in Europe should ensure that the guideline is based on the basis of the data (55), the concentration should be 350 $\mu\text{g}/\text{m}^3$.

Acid aerosols. While the data are limited, the guideline, the

levels, and no firm guidance can be given at this stage in relation to lowest-observed-adverse-effect levels.

Sensory effects

Community exposure to urban air pollutants, including sulfur oxides, nitrogen oxides and particulate matter, may give rise to feelings of discomfort, which can only be assessed subjectively by those persons who are affected (1,52). Annoyance reactions to urban air pollutants are common phenomena. In a Swedish study (52) of population groups in central Stockholm, 60% of the population reported annoyance of this kind. One quarter of those were classed as being very annoyed. Comparative studies in suburban areas and smaller Swedish towns disclosed lower prevalence figures for annoyance. Surveys of annoyance are fraught with many problems (1). Since annoyance reactions have a large sociocultural component, prevalence figures in relation to air pollution levels may vary from place to place and should be determined for each locality.

Evaluation of Human Health Risks

Sulfur dioxide

When using the evidence from human experimental studies of sulfur dioxide to draw up recommendations for guideline values aimed at protecting people from the risk of adverse effects, the need to avoid brief exposures to peak values is implied. Some protection (safety) factor may have to be incorporated when using information on the lowest-observed-effect level in order to protect especially sensitive asthmatic patients (who have not been subject to testing), though they would be less likely to be involved in exercise at the levels used in the experimental exposures. In relation to a lowest-observed-effect level of concern to health of $1000\mu\text{g}/\text{m}^3$ (10 minutes), it appears reasonable to apply a protection (safety) factor of 2 for the protection of public health; this would give a concentration of $500\mu\text{g}/\text{m}^3$ (10 minutes). The occurrence of such concentrations can often be predicted from the frequency distribution of locally measured concentrations, by using some existing models for averaging values over different time periods in the case of diffuse or multiple sources (53).

Predictions for point sources can also be made if the characteristics of the source and the local diffusion conditions are known (54). Frequency distribution characteristics can also help in guiding authorities towards solutions. These frequency distributions are known for a large number of towns in Europe (55) and the USA (56). As an example, if the aim were to ensure that the 10-minute mean value of $500\mu\text{g}/\text{m}^3$ was not exceeded, then on the basis of calculations of multiple-source situations in the Netherlands (55), the corresponding 1-hour value that should not be exceeded would be $350\mu\text{g}/\text{m}^3$.

Acid aerosol

While the data currently available are insufficient to establish a numerical guideline, they do raise serious concern that acidic aerosol could account

for past associations between particulate air pollution and the exacerbation and development of chronic bronchitis.

Recent 1-hour acute experimental inhalation exposure data on humans and two animal species (donkeys and rabbits) show similar exposure-response relationships in terms of transient and reversible changes in the rate of tracheobronchial mucociliary clearance. Comparable exposures, when repeated on a daily basis in the two animal species, produced persistent changes in clearance rates, and in the one species in which histological examinations were made, changes in the airways after only 20 days of exposure were of a similar character to those seen in young human smokers examined at autopsy. The analogy with cigarette smoke, which is a known causal factor in chronic bronchitis, has been pointed out by Lippmann (29).

The association shown in Japan (Yokkaichi) between sulfuric acid aerosols and respiratory morbidity gives support to the hypothesis that acid aerosol is an important component of urban air pollution. This hypothesis is also consistent with the results of cross-sectional studies of daily mortality in major cities in the USA, which indicate that sulfate is a better predictor for mortality than any of the nonspecific gravimetric indices that have been used.

More data on human exposures are clearly needed to test the hypothesis of causality. Situations that would be of concern for monitoring purposes would be those where humans were exposed repeatedly to concentrations at or above $10\mu\text{g}/\text{m}^3$ (sulfuric acid or equivalent acidity of aerosol).

Sulfur dioxide and particulate matter

The lowest-observed-effect levels for short-term and long-term (annual mean) average air pollution measurements are summarized in Tables 2 and 3. Evaluation of the measured components of air pollution in relation to public health is, however, difficult for a number of reasons noted in the

Table 3. Summary of effects on human health of lowest-observed-effect levels of sulfur dioxide and particulate matter (long-term exposure)

Effect	Annual mean exposure to:		
	SO ₂ ($\mu\text{g}/\text{m}^3$)	smoke ($\mu\text{g}/\text{m}^3$)	total suspended particulates ($\mu\text{g}/\text{m}^3$)
Increased respiratory symptoms or illness	100	100	
Decrements in lung function			180

WHO publication (1). A number of these points still remain largely unresolved. For example, it is not clear whether long-term effects can be related simply to annual mean values or to repeated exposures to peak values. Similarly, it remains uncertain which components of the sulfur dioxide/particulates complex are involved in the adverse effects, though increasingly attention is being given to the role of secondary products such as acid sulfates. Arbitrary protection (safety) factors of 2 in relation to the morbidity and mortality data, and 1.5 for decrements in lung functions (considered to represent a less severe effect), seem to be appropriate according to the present state of knowledge.

Measurements of black smoke can no longer be interpreted in terms of $\mu\text{g}/\text{m}^3$ in many localities, and decisions have already been made (by ISO) to abandon any attempt at mass equivalence. The method is still of value as an index of soiling capacity and of the type of pollution (coal smoke) that has been associated in the past with adverse health effects, and to provide continuity with any further epidemiological studies. Therefore, observations should be continued.

Various direct gravimetric measurements have been used in recent decades, notably the total suspended particulate measurements (by high volume sampler) in the USA. There are problems, however, with the wide size range of particles sampled and the influence of wind-entrained dust. Although a large body of data on such measurements exists, it is now considered misleading to attempt to specify guidelines in terms of total suspended particulates.

Total suspended particulate measurements may, nevertheless, be used for comparison with newer indices of pollution, and they may be of value as a supplement to gravimetric ISO-TP measurements, especially in areas where there is special concern about larger particles.

Efforts should now be made to establish a method of gravimetric measurement representing more realistically the size range of particles that can be inhaled into the thoracic region, even though uncertainties must remain about the component or components most relevant to health. Recommendations have already been made by ISO regarding the (aerodynamic) particle size range corresponding with thoracic penetration, and it is proposed that samplers should have acceptance characteristics that approximate to that curve.

The inclusion of the somewhat wider size range of particles than those sampled by the black smoke method would mean that, even in areas where coal smoke still forms a dominant part of the suspended particulates, results from these gravimetric instruments would be somewhat higher than might be obtained from co-located smoke samplers. Thus, in those circumstances the corresponding guidelines would be a little higher in true gravimetric terms (possibly by about 10%). Now that the characteristics of present-day pollution differ from those of coal smoke pollution, the old data cannot be used with any confidence as a basis for guidelines.

In view of the considerable uncertainties involved in formulating guidelines for particulate matter, there is a need for further epidemiological studies, particularly in those areas where high concentrations will occur,

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using well defined methods for particulate measurement and epidemiological assessment, including the control of possible confounding factors such as smoking.

Guidelines

Sulfur dioxide

It appears reasonable to apply a protection factor of 2 for the protection of public health; a guideline value of $500\mu\text{g}/\text{m}^3$ (10 minutes, not to be exceeded) is recommended. A 1-hour maximum value that conforms with this guideline can be calculated as approximately $350\mu\text{g}/\text{m}^3$.

Acid aerosol

Recommendations for air quality guideline values for the strong acid content of ambient aerosol cannot now be made owing to the sparsity of current data on effects and ambient exposure levels. However, monitoring is warranted when levels (sulfuric acid or equivalent acidity of aerosol) exceed $10\mu\text{g}/\text{m}^3$. Therefore, ambient air should be regularly monitored for the H^+ ion concentration of the aerosol (which should be sampled in a size-fractionating particulate sampler) when levels of this magnitude are likely to occur.

Combined effects

In proposing guidelines based on the present knowledge of exposure to both sulfur dioxide and particulate matter, an arbitrary protection (safety) factor of 2 has been used in relation to morbidity and mortality, and a factor of 1.5 has been used for the decrement in lung function, which is considered to be a less severe effect. The recommended guideline values are shown in Table 4.

References

1. *Sulfur oxides and suspended particulate matter*. Geneva, World Health Organization, 1979 (Environmental Health Criteria, No. 8).
2. *Air quality criteria for particulate matter and sulfur oxides*, Vol. I, II & III. Research Triangle Park, NC, US Environmental Protection Agency, 1982 (EPA-600/8-82-029a, b & c).
3. *Air pollution measurements of the National Air Sampling Network, 1957-1961*. Cincinnati, OH, US Department of Health, Education, and Welfare, 1962, pp. 3-4.
4. *Air quality — particle size fraction definitions for health-related sampling*. Geneva, International Organization for Standardization, 1983 (Technical Report ISO/TR 7708-1983 (E)).
5. Proceedings of the Symposium on Biological Tests in the Evaluation of Mutagenicity and Carcinogenicity of Air Pollutants with Special Reference to Motor Exhausts and Coal Combustion Products. *Environmental health perspectives*, 47: 1-324 (1983).
6. *Manual for sampling and chemical analysis*. Lillestrøm, Norwegian Institute for Air Research, 1977 (EMEP/CHEM 3/77).



COMISION NACIONAL DEL MEDIO AMBIENTE
XI REGION AYSEN

COMISION NACIONAL DEL MEDIO AMBIENTE
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Coyhaique, 15 DIC 1999

DE SRA.: MILLARAY HERNÁNDEZ ERAZO - DIRECTORA REGIONAL CONAMA
XI REGIÓN AYSÉN.

A SRA.: PATRICIA MATUS C. - JEFE DEPARTAMENTO DE
DESCONTAMINACIÓN, PLANES Y NORMAS

1. Adjunto remito a Ud. información sobre monitoreo de polvo sedimentable correspondiente al proyecto Fachinal, aprobado por el SEIA.
2. Con respecto a datos de otros contaminantes (CO, NO2, SO2 y O3), comunico a Ud. que no existen programas de monitoreo que los incluyan.
3. Sin otro particular, saluda atentamente a Ud.



MILLARAY HERNÁNDEZ ERAZO
Directora Regional
CONAMA XI Región Aysén

MHE/PMV

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Bilbao 413 - Coyhaique - XI Región - Chile - Teléfonos (67) 237875-239396 - 210208 - Fax (67) 231132

Nombre de la actividad industrial encargada del monitoreo:

El monitoreo lo realiza la empresa Servicios y Proyectos Ambientales S.A., para el proyecto Fachinal de Compañía Minera CDE Fachinal Ltda.

Ubicación de las estaciones de la red de monitoreo:

E1: ciudad de Chile Chico.

E2: Bahía Jara

E3: Pampa La Perra

E4: Laguna Verde

E5: Antes del proyecto

Las estaciones E2, E3, E4, y E5 pueden observarse en el plano adjunto.

Metodología de medición utilizada para medir el contaminante:

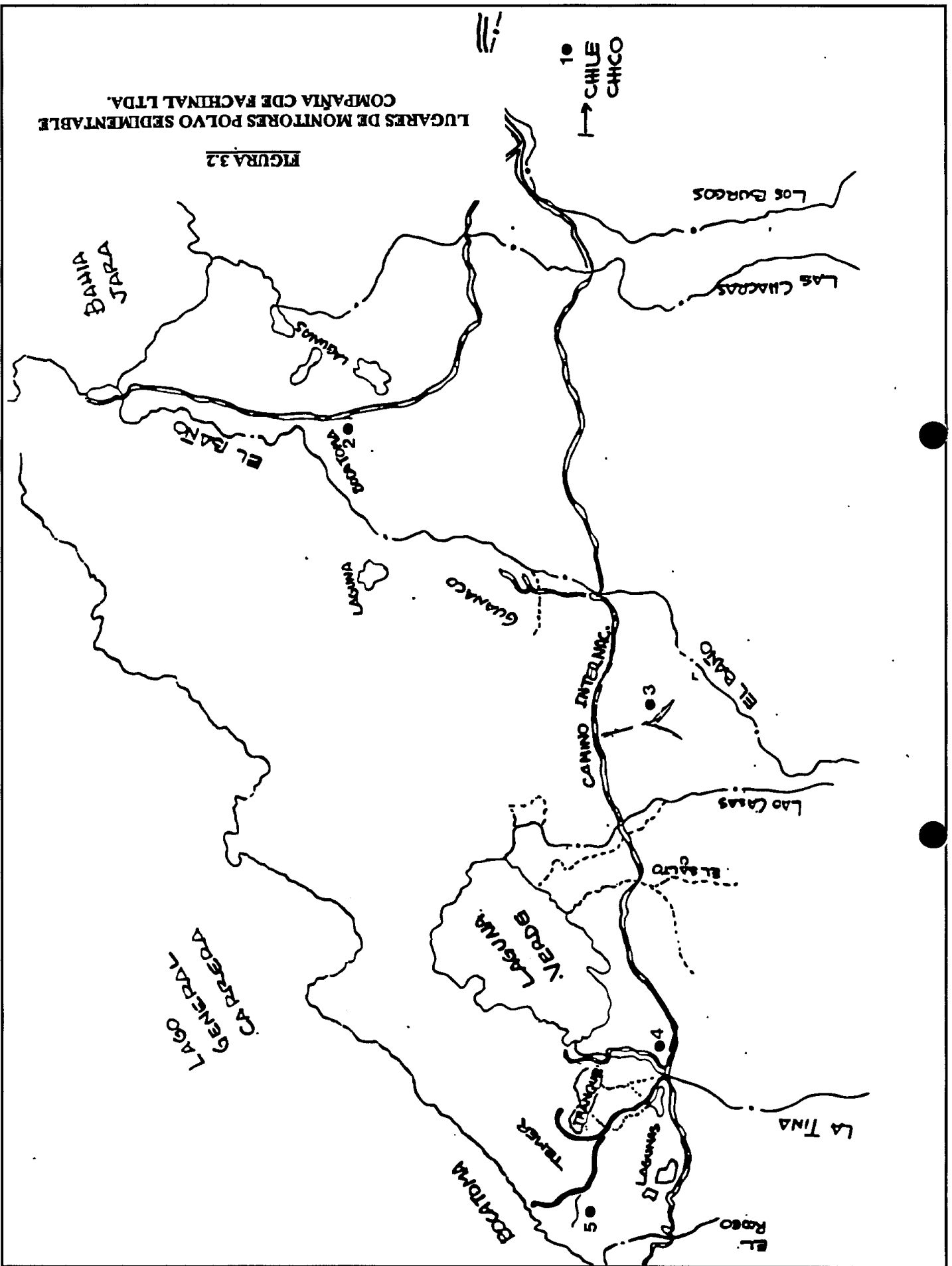
Coletores de agua destilada son expuestos al aire ambiente durante 30 días y luego son enviados al laboratorio químico para ser analizados.

Certificación de mediciones por parte del Servicio de Salud correspondiente:

Los informes de resultados remitidos por la empresa son enviados al Departamento Programas sobre el Ambiente/Servicio de Salud Aysén, a modo de información. No existe certificación de las mediciones.

LUGARES DE MONTORES POLVO SEDIMENTABLE
COMPANIA CDE FACHINAL LTDA.

FIGURA 3.2



000089

Enero 1997			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	1,2086	2,73	44,20
E2	Bahía Jara	0,6978	2,06	7,51
E3	Pampa La Perra	0,2590	2,52	6,00
E4	Laguna Verde	0,1151	2,75	13,50
E5	Antes del proyecto	0,0180	1,89	3,45

Febrero 1997			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	-----	-----	-----
E2	Bahía Jara	-----	-----	-----
E3	Pampa La Perra	-----	-----	-----
E4	Laguna Verde	-----	-----	-----
E5	Antes del proyecto	-----	-----	-----

Marzo 1997			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	-----	-----	-----
E2	Bahía Jara	-----	-----	-----
E3	Pampa La Perra	-----	-----	-----
E4	Laguna Verde	-----	-----	-----
E5	Antes del proyecto	-----	-----	-----

Abril 1997			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	-----	-----	-----
E2	Bahía Jara	-----	-----	-----
E3	Pampa La Perra	-----	-----	-----
E4	Laguna Verde	-----	-----	-----
E5	Antes del proyecto	-----	-----	-----

Mayo 1997			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	-----	-----	-----
E2	Bahía Jara	-----	-----	-----
E3	Pampa La Perra	-----	-----	-----
E4	Laguna Verde	-----	-----	-----
E5	Antes del proyecto	-----	-----	-----

Junio 1997			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	0,1835	2,75	7,20
E2	Bahía Jara	0,0540	1,97	3,23
E3	Pampa La Perra	0,1007	2,05	6,75
E4	Laguna Verde	0,1079	2,47	6,54
E5	Antes del proyecto	0,0863	2,54	2,01

000090

Julio 1997			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	0,1547	2,78	6,03
E2	Bahía Jara	0,0612	3,02	2,20
E3	Pampa La Perra	0,0360	4,19 <1	
E4	Laguna Verde	0,0612	3,58	7,21
E5	Antes del proyecto	0,0360	3,20 <1	

Agosto 1997			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	0,7206	3,05	7,93
E2	Bahía Jara	0,1427	2,27	3,41
E3	Pampa La Perra	0,1114	2,84	1,85
E4	Laguna Verde	0,2576	3,45	6,54
E5	Antes del proyecto	0,1218	1,93	1,03

Septiembre 1997			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	0,5360	2,87	9,81
E2	Bahía Jara	0,3813	2,78	7,51
E3	Pampa La Perra	0,6475	1,59	6,10
E4	Laguna Verde	0,5612	3,29	6,05
E5	Antes del proyecto	0,1835	1,61	5,31

Octubre 1997			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	0,9568	2,59	5,40
E2	Bahía Jara	0,3165	2,23	2,10
E3	Pampa La Perra	Muestra perdida		
E4	Laguna Verde	0,5216	3,32	3,30
E5	Antes del proyecto	0,1834	1,52	3,40

Noviembre 1997			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	2,8023	2,57	4,30
E2	Bahía Jara	0,2123	2,41	1,80
E3	Pampa La Perra	Muestra perdida		
E4	Laguna Verde	0,8703	3,30	2,90
E5	Antes del proyecto	0,0627	2,51	2,60

Diciembre 1997			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	2,4496	0,90	3,90
E2	Bahía Jara	0,3813	0,75	1,30
E3	Pampa La Perra	0,1295	1,99	0,90
E4	Laguna Verde	0,6151	2,98	1,90
E5	Antes del proyecto	0,0971	2,03	1,90

000091

Enero 1998			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	3,8988	0,82	3,20
E2	Bahía Jara	0,7345	0,51	1,04
E3	Pampa La Perra	0,0800	0,94	1,91
E4	Laguna Verde	0,6092	1,41	1,95
E5	Antes del proyecto	0,1392	0,83	1,35

Febrero 1998			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	1,8183	0,97	2,80
E2	Bahía Jara	0,8935	0,55	1,90
E3	Pampa La Perra	0,1739	1,25	1,30
E4	Laguna Verde	0,5257	1,72	2,40
E5	Antes del proyecto	0,2569	1,15	2,60

Marzo 1998			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	1,5421	2,10	2,70
E2	Bahía Jara	0,2785	0,80	2,00
E3	Pampa La Perra	0,1059	2,80	2,30
E4	Laguna Verde	0,5117	3,12	2,20
E5	Antes del proyecto	0,0974	1,48	1,70

Abril 1998			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	0,5711	1,45	1,44
E2	Bahía Jara	0,2060	0,72	1,86
E3	Pampa La Perra	0,0997	1,46	2,57
E4	Laguna Verde	0,2619	1,78	1,27
E5	Antes del proyecto	0,0835	1,21	1,16

Mayo 1998			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	0,1224	1,20	1,21
E2	Bahía Jara	0,0705	1,02	1,81
E3	Pampa La Perra	0,0445	1,18	1,70
E4	Laguna Verde	0,1414	1,53	1,80
E5	Antes del proyecto	0,0447	1,12	0,80

Junio 1998			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	0,1804	1,45	0,96
E2	Bahía Jara	0,0442	0,90	1,31
E3	Pampa La Perra	0,0340	0,88	1,92
E4	Laguna Verde	0,1055	1,53	1,90
E5	Antes del proyecto	0,0443	67,00	0,98

Julio 1998			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	0,3203	1,38	1,53
E2	Bahía Jara	0,0975	0,92	2,23
E3	Pampa La Perra	0,0348	1,89	1,76
E4	Laguna Verde	0,3028	1,44	1,60
E5	Antes del proyecto	0,1009	0,76	1,41

Agosto 1998			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	0,3701	1,22	1,74
E2	Bahía Jara	0,2663	1,05	1,29
E3	Pampa La Perra	0,0934	1,40	1,51
E4	Laguna Verde	0,3182	1,45	1,90
E5	Antes del proyecto	0,1141	0,72	1,30

Septiembre 1998			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	0,3717	1,41	1,60
E2	Bahía Jara	0,7832	1,10	0,88
E3	Pampa La Perra	0,1985	1,50	2,28
E4	Laguna Verde	0,7025	1,51	1,30
E5	Antes del proyecto	0,5051	0,78	0,75

Octubre 1998			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	1,6963	0,44	1,52
E2	Bahía Jara	1,6115	0,91	1,54
E3	Pampa La Perra	0,1906	0,79	1,72
E4	Laguna Verde	0,5055	1,31	2,21
E5	Antes del proyecto	0,3155	0,45	1,30

Noviembre 1998			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	0,9343	3,34	1,80
E2	Bahía Jara	0,7782	3,12	1,23
E3	Pampa La Perra	0,1601	1,25	1,03
E4	Laguna Verde	0,2619	2,16	1,52
E5	Antes del proyecto	0,1814	19,00	1,01

Diciembre 1998			Composición química (%)	
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂
E1	Chile Chico	0,8999	0,92	1,08
E2	Bahía Jara	0,5554	0,99	0,99
E3	Pampa La Perra	0,1566	0,86	0,98
E4	Laguna Verde	0,4247	0,92	0,55
E5	Antes del proyecto	0,1515	0,83	0,95

000093

Enero 1999			Composición química (%)		
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂	
E1	Chile Chico	0,7133	0,20	0,89	
E2	Bahía Jara	0,3733	0,78	1,04	
E3	Pampa La Perra	0,1446	0,53	1,78	
E4	Laguna Verde	0,1842	0,96	1,02	
E5	Antes del proyecto	0,0739	0,67	1,13	

Febrero 1999			Composición química (%)		
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂	
E1	Chile Chico	0,8242	0,79	1,60	
E2	Bahía Jara	1,0301	1,19	1,10	
E3	Pampa La Perra	0,2026	0,73	1,60	
E4	Laguna Verde	0,3258	0,89	2,20	
E5	Antes del proyecto	0,3480	0,50	1,10	

Marzo 1999			Composición química (%)		
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂	
E1	Chile Chico	0,3358	1,26	1,20	
E2	Bahía Jara	0,0500	0,32	2,00	
E3	Pampa La Perra	0,0750	1,53	1,80	
E4	Laguna Verde	0,2037	1,63	2,20	
E5	Antes del proyecto	0,0929	0,52	1,80	

Abril 1999			Composición química (%)		
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂	
E1	Chile Chico	0,0652	1,41	1,30	
E2	Bahía Jara	0,4764	0,68	1,40	
E3	Pampa La Perra	0,0686	1,38	1,50	
E4	Laguna Verde	0,4454	1,51	1,90	
E5	Antes del proyecto	0,1408	0,66	2,10	

Mayo 1999			Composición química (%)		
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂	
E1	Chile Chico	1,1312	1,10	1,10	
E2	Bahía Jara	0,3147	0,85	1,20	
E3	Pampa La Perra	0,1180	0,96	2,00	
E4	Laguna Verde	0,4650	1,33	1,10	
E5	Antes del proyecto	0,1591	1,00	2,10	

Junio 1999			Composición química (%)		
Número muestra	Lugar de muestreo	Polvo sedimentable mg/cm ² /30 días	Fe	SiO ₂	
E1	Chile Chico	0,1990	1,29	1,20	
E2	Bahía Jara	0,1327	1,25	1,20	
E3	Pampa La Perra	0,1093	1,81	1,60	
E4	Laguna Verde	0,1490	1,58	0,70	
E5	Antes del proyecto	0,0546	1,00	1,10	



CONAMA

COMISIÓN NACIONAL DEL MEDIO AMBIENTE
ORIGINA DE PARTES Y ARCHIVO

COMPRESO: 14502 / 10678

FECHA: 20 DIC 1999

DESPACHADO:

RES.

P. MATUS P30/3
ASMB x correo

ORD. N°: 0523 / 99 COMISIÓN NACIONAL DEL MEDIO AMBIENTE

ANT. : No Hay

MAT. : Remite resultados solicitados de
monitoreos, según ORD. N°
995613 de fecha 10 de
Noviembre de 1999.

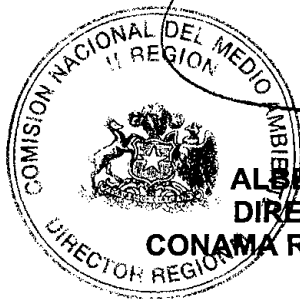
Antofagasta, 15 de Diciembre de 1999

A : SRA. PATRICIA MATUS CORREA
JEFE DEPTO. DESCONTAMINACIÓN, PLANES Y NORMAS
CONAMA

DE : SR. ALBERTO ACUÑA CERDA
DIRECTOR REGIONAL (S)
CONAMA II REGIÓN

En respuesta a la solicitud de resultados de monitoreo de CO, NOx, O3, PTS y SO2 a nivel urbano y aquellos realizados como consecuencia de los compromisos asumidos por proyectos que fueron aprobados por el S.E.I.A., se adjunta información enviada por el Servicio de Salud de Antofagasta.

Sin otro particular, saluda atentamente a usted,



ALBERTO ACUÑA CERDA
DIRECTOR REGIONAL (S)
CONAMA REGIÓN DE ANTOFAGASTA

AAC/MRT/mem
c.c.: Archivo CONAMA II Región.

COPIA FIEL DE ORIGINAL

EMPRESA : REFIMET
 CONTAMINANTE : ANHIDRIDO SULFUROSO(SO₂) Y MATERIAL PARTICULADO (PM-10)
 NORMA : CONCENTRACIÓN MEDIA DIARIA SO₂=365 µg/m³
 : CONCENTRACIÓN MEDIA DIARIA PM-10=150 µg/m³

AÑO 1998									
Mes	Ubicación Estación	N°Mediciones		N°Mediciones sobre Norma		Promedio µg/m ³		Conc. Máxima Diaria µg/m ³	
		SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10
Enero	Coviefi	30	14	-	-	2	35	18	39
	Sur	31	14	1	-	134	36	384	76
	Negra	31	12	-	-	23	32	103	48
Febrero	Coviefi	28	12	-	-	3	30	30	41
	Sur	28	11	1	-	150	52	506	90
	Negra	26	12	-	-	39	37	222	57
Marzo	Coviefi	28	11	-	-	5	49	27	128
	Sur	22	13	3	-	207	58	452	102
	Negra	29	12	-	-	36	56	184	128
Abril	Coviefi	29	12	-	-	9	38	64	50
	Sur	27	11	5	-	280	52	764	93
	Negra	30	12	-	-	52	61	196	114
Mayo	Coviefi	30	13	-	-	7	41	49	55
	Sur	30	12	9	-	235	49	681	79
	Negra	31	12	-	-	49	45	231	81
Junio	Coviefi	24	12	-	-	5	39	26	59
	Sur	30	12	9	-	276	45	762	57
	Norte	30	12	-	-	69	48	203	79
Julio	Coviefi	31	13	-	-	14	38	145	50
	Sur	30	13	14	-	366	50	861	77
	Norte	31	10	-	-	115	50	314	72
Agosto	Coviefi	31	13	-	-	4	39	22	52
	Sur	30	12	26	-	689	50	1459	75
	Norte	30	10	-	-	102	54	239	72
Septiembre	Coviefi	30	11	-	-	4	33	30	52
	Sur	30	13	16	-	602	54	1492	136
	Negra	30	12	1	-	76	50	416	71
Octubre	Coviefi	31	12	-	-	0	24	2	38
	Sur	31	14	11	-	328	44	983	67
	Norte	31	13	-	-	22	41	106	69
Noviembre	Coviefi	27	11	-	-	3	25	23	36
	Sur	30	11	8	-	324	45	844	67
	Norte	29	12	-	-	28	41	281	65
Diciembre	Coviefi	29	6	-	-	2	28	19	34
	Sur	31	14	2	-	160	35	473	88
	Norte	29	13	-	-	18	37	107	50
TOTAL	Coviefi	348	140	0	0	5	35	145	128
	Sur	350	150	105	0	313	48	1492	136
	Norte	357	142	1	0	52	46	416	128

EMPRESA : REFIMET
 CONTAMINANTE : ANHIDRIDO SULFUROSO(SO₂) Y MATERIAL PARTICULADO (PM-10)
 NORMA : CONCENTRACIÓN MEDIA DIARIA SO₂=365 µg/m³
 : CONCENTRACIÓN MEDIA DIARIA PM-10=150 µg/m³

Mes	Ubicación Estación	AÑO 1999							
		N°Mediciones		N°Mediciones sobre Norma		Promedio µg/m ³		Conc. Máxima Diaria µg/m ³	
		SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10
Enero	Coviefi	27	10	-	-	4	34	46	93
	Sur	28	12	1	-	200	42	428	62
	Negra	31	13	-	-	12	41	58	108
Febrero	Coviefi	28	12	-	-	0	25	4	33
	Sur	28	12	1	-	206	45	552	77
	Negra	28	12	-	-	18	54	96	88
Marzo	Coviefi	31	12	-	-	1	31	15	41
	Sur	31	12	3	-	205	46	430	68
	Negra	31	13	-	-	15	53	58	70
Abril	Coviefi	26	12	-	-	1	36	15	43
	Sur	25	10	-	-	69	61	247	116
	Negra	27	12	-	-	4	52	29	75
Mayo	Coviefi	31	12	-	-	3	32	14	44
	Sur	31	11	-	-	109	57	261	88
	Negra	30	11	-	-	18	61	86	130
Junio	Coviefi	28	11	-	-	3	42	18	60
	Sur	30	11	-	-	109	56	309	114
	Negra	30	11	-	-	29	71	102	103
Julio	Coviefi	29	14	-	-	3	36	19	54
	Sur	14	14	-	-	139	51	272	136
	Negra	30	13	-	-	22	58	125	126
Agosto	Coviefi	23	13	-	-	5	36	44	57
	Sur	11	13	-	-	180	58	307	93
	Negra	30	13	-	-	22	56	137	84
Septiembre	Coviefi	25	12	-	-	1	30	11	66
	Sur	28	12	1	-	188	48	383	92
	Negra	30	12	-	-	44	41	152	71
Octubre	Coviefi	29	17	-	-	1	32	9	58
	Sur	31	10	1	-	161	40	639	58
	Negra	30	13	-	-	34	50	115	107
Noviembre	Coviefi								
	Sur								
	Negra								
Diciembre	Coviefi								
	Sur								
	Negra								
TOTAL	Coviefi	277	125	0	0	2	33	46	93
	Sur	257	117	7	0	157	50	639	136
	Negra	297	123	0	0	22	54	152	130

000097

EMPRESA : REFIMET
 CONTAMINANTE : ANHIDRIDO SULFUROSO(SO₂) Y MATERIAL PARTICULADO (PM-10)
 NORMA : CONCENTRACIÓN MEDIA DIARIA SO₂=365 µg/m³
 : CONCENTRACIÓN MEDIA DIARIA PM-10=150 µg/m³

AÑO 1997									
Mes	Ubicación Estación	N° Mediciones		N° Mediciones sobre Norma		Promedio µg/m ³		Concentración Máxima Diaria µg/m ³	
		SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10
Enero	J. Sur	31	10	-	-	3	27	60	33
	Sur	31	11	-	-	163	43	316	51
	Negra	31	10	-	-	35	35	124	50
Febrero	J. Sur	26	12	-	-	2	27	19	40
	Sur	28	12	3	-	220	48	465	79
Marzo	Negra	24	11	-	-	32	40	69	49
	J. Sur	31	12	-	-	5	23	26	57
	Sur	31	12	20	-	463	50	1103	68
Abril	Negra	31	12	-	-	60	40	234	60
	J. Sur	30	13	-	-	17	35	94	47
	Sur	30	13	23	-	618	66	1213	87
Mayo	Negra	30	13	-	-	76	57	286	94
	J. Sur	30	13	-	-	22	28	114	33
	Sur	30	12	28	-	735	79	1350	138
Junio	Negra	31	13	2	-	148	59	461	114
	J. Sur	30	11	-	-	9	24	29	41
	Sur	30	12	25	-	675	59	1431	84
Julio	Negra	30	12	1	-	108	55	383	81
	J. Sur	31	12	-	-	7	31	36	52
	Sur	27	14	24	-	933	82	1969	133
Agosto(1)	Negra	25	13	2	-	147	61	415	90
	J. Sur	12	3	-	-	4	41	11	48
	Sur	29	12	2	-	195	63	431	144
Septiembre(2)	Negra	29	12	21	-	635	76	1257	136
	-	-	-	-	-	-	-	-	-
	Sur	22	12	14	-	527	65	1018	93
Octubre	Negra	30	12	1	-	137	38	405	56
	Coviefi	22	8	-	-	1	26	8	28
	Sur	31	13	15	-	422	55	1741	129
Noviembre	Negra	31	13	1	-	83	37	404	66
	Coviefi	30	12	-	-	10	27	88	31
	Sur	30	13	8	-	266	53	668	113
Diciembre	Negra	28	11	-	-	94	39	332	50
	Coviefi	31	10	-	-	2	23	15	38
	Sur	13	11	3	-	265	37	737	54
TOTAL	Negra	29	9	-	-	36	32	134	50
	Coviefi	304	116	0	0	7	28	114	57
	Sur	332	147	165	0	457	58	1969	144
	Negra	349	141	28	0	133	47	1257	136

Nota: (1) Estación sufre atentado vandálico.
 (2) Fuera de servicio estación J. Sur.

EMPRESA : MINERA ESCONDIDA
CONTAMINANTE : MATERIAL PARTICULADO (PM-10) y SÓLIDOS TOTALES EN SUSPENSIÓN (PTS)
NORMA : CONCENTRACIÓN MEDIA DIARIA PM-10=150 µg/m³
 CONCENTRACIÓN MEDIA DIARIA PTS=260 µg/m³

Mes	AÑO 1997							
	N°Mediciones		N°Mediciones sobre Norma		Promedio µg/m ³		Concentración Máxima Diaria µg/m ³	
	PM-10	PTS	PM-10	PTS	PM-10	PTS	PM-10	PTS
Julio	8	1	-	-	80	112	114	112
Agosto	9	5	-	-	81	136	111	174
Septiembre	11	6	-	-	64	134	85	183
Octubre	11	5	-	-	71	128	107	176
Noviembre	7	5	-	-	80	106	140	144
Diciembre(1)(2)	3	0	-	-	51	-	63	-
TOTAL	49	22	0	0	71	123	140	183

Mes	AÑO 1998							
	N°Mediciones		N°Mediciones sobre Norma		Promedio µg/m ³		Concentración Máxima Diaria µg/m ³	
	PM-10	PTS	PM-10	PTS	PM-10	PTS	PM-10	PTS
Enero(2)	0	0	-	-	-	-	-	-
Febrero	5	1	-	-	87	194	119	194
Marzo	9	4	-	-	69	128	99	144
Abril	10	5	-	-	82	120	91	148
Mayo	11	5	-	-	73	92	147	134
Junio	10	5	-	-	70	98	96	137
Julio	10	6	-	-	76	87	106	129
Agosto	10	5	1	-	81	109	154	129
Septiembre	10	5	-	-	52	74	80	85
Octubre	9	4	-	-	48	200	61	197
Noviembre	3	2	-	-	50	59	57	64
Diciembre	9	4	-	-	42	90	62	136
TOTAL	96	46	1	0	66	114	154	197

Notas

Todas las mediciones estan referidas a la estación Playa Amarilla.

1. Falla en equipo muestreador.
2. Estación fuera de servicio por traslado a nueva ubicación.

Mes	AÑO 1999							
	N°Mediciones		N°Mediciones sobre Norma		Promedio µg/m ³		Concentración Máxima Diaria µg/m ³	
	PM-10	PTS	PM-10	PTS	PM-10	PTS	PM-10	PTS
Enero	10	*	-	*	43	*	63	*
Febrero	9	*	-	*	54	*	87	*
Marzo	11	*	-	*	53	*	65	*
Abril	10	*	-	*	44	*	57	*
Mayo	10	*	-	*	44	*	60	*
Junio	10	*	-	*	43	*	86	*
Julio	10	*	-	*	36	*	48	*
Agosto	10	5	1	-	81	109	154	129
Septiembre	9	-	-	*	39	*	56	*
Octubre								
Noviembre								
Diciembre								
TOTAL	89	5	1	0	49	109	154	129

Notas

1. La empresa informa sobre la modificación de parámetros a medir, eliminado PTS

EMPRESA

: NOPEL

CONTAMINANTE

: DIÓXIDO DE NITRÓGENO(NO₂), OZONO (O₃), MONÓXIDO DE CRABONO (CO) Y MATERIAL PARTICULADO (PM-10)

NORMA

: CONCENTRACIÓN MEDIA DIARIA NO₂=80 µg/m³ (SUIZA)

: CONCENTRACIÓN MEDIA HORARIA O₃=160 µg/m³

: CONCENTRACIÓN MEDIA HORARIA CO= 40.000 µg/m³

: CONCENTRACIÓN MEDIA DIARIA PM-10=150 µg/m³

AÑO 1999

Mes	Nº Mediciones				Nº Mediciones sobre norma				Nº Mediciones sobre 80% norma				Promedio Mensual µg/m ³				Conc. Máxima µg/m ³				
	NO ₂	O ₃	CO	PM-10	NO ₂	O ₃	CO	PM-10	NO ₂	O ₃	CO	PM-10	NO ₂	O ₃	CO	PM-10	NO ₂	O ₃	CO	PM-10	
Junio	30	30	30	11	-	-	-	-	-	-	-	-	1	12	200	28	3	49	1400	41	
Julio	31	31	31	10	-	-	-	-	-	-	-	-	1	3	200	26	2	37	800	38	
Agosto	31	31	31	9	-	-	-	-	-	-	-	-	7	5	200	31	10	61	2400	44	
Septiembre																					
Octubre																					
Noviembre																					
Diciembre																					
TOTAL	92	30	0	0	0	0	0	0	0	0	9	20	3	7	200	28	10	61	2400	44	

EMPRESA : EDELNOR
 CONTAMINANTE : MATERIAL PARTICULADO PM-10
 NORMA : CONCENTRACIÓN MEDIA DIARIA PM-10=150 $\mu\text{g}/\text{m}^3$

AÑO 1998				
Mes	NºMediciones	NºMediciones sobre Norma	Promedio $\mu\text{g}/\text{m}^3$	Concentración Máxima Diaria $\mu\text{g}/\text{m}^3$
Enero	9	-	18	26
Febrero	9	-	17	31
Marzo	11	-	21	38
Abril	15	-	21	46
Mayo	16	-	25	58
Junio				
Julio	12	-	30	51
Agosto	16	-	33	71
Septiembre	15	-	26	49
Octubre	15	-	17	26
Noviembre	14	-	19	24
Diciembre	16	-	21	29
TOTAL	148	0	22	71

AÑO 1999				
Mes	NºMediciones	NºMediciones sobre Norma	Promedio $\mu\text{g}/\text{m}^3$	Concentración Máxima Diaria $\mu\text{g}/\text{m}^3$
Enero	11	-	14	20
Febrero	13	-	20	45
Marzo	15	-	15	26
Abril	14	-	22	30
Mayo	16	-	23	35
Junio	15	-	27	70
Julio	14	-	26	39
Agosto	16	-	22	29
Septiembre	14	-	21	31
Octubre	14	-	20	33
Noviembre				
Diciembre				
TOTAL	142	0	21	70

EMPRESA : ENAEX
CONTAMINANTE : DIÓXIDO DE NITRÓGENO NO2
NORMA : CONCENTRACIÓN ANUAL NO₂=100µg/m³
: CONCENTRACIÓN MEDIA DIARIA NO₂=80 µg/m

000101

AÑO 1999				
Mes	Nº Mediciones	Nº Mediciones sobre Norma	Promedio µg/m ³	Concentración Máxima Diaría µg/m ³
Enero	31	-	2,35	3,76
Febrero	14	-	9,41	10,20
Marzo	27	-	5,63	14,16
Abril	30	-	6,32	12,18
Mayo	30	-	5,36	11,51
Junio	30	-	5,44	10,12
Julio				
Agosto				
Septiembre				
Octubre				
Noviembre				
Diciembre				
TOTAL	162	0	5,75	14,16

NOTA

En el mes de febrero se cambia equipo de muestreo a Jardín Infantil ubicado en andalican N°920.

EMPRESA : ENAEX
 CONTAMINANTE : DIÓXIDO DE NITRÓGENO NO₂
 NORMA : CONCENTRACIÓN ANUAL NO₂=100µg/m³
 : CONCENTRACIÓN MEDIA DIARIA NO₂=80 µg/m³(SUIZA)

AÑO 1993				
Mes	NºMediciones	NºMediciones sobre Norma	Promedio µg/m ³	Concentración Máxima Diaria µg/m3
Agosto	15		1,75	3,76
TOTAL	15	0	1,75	3,76

AÑO 1996				
Mes	NºMediciones	NºMediciones sobre Norma	Promedio µg/m ³	Concentración Máxima Diaria µg/m3
Abril	18	-	6,26	22,18
Mayo	13	-	5,83	10,85
Junio	31	-	7,14	29,10
TOTAL	62	0	6,41	29,10

AÑO 1997				
Mes	NºMediciones	NºMediciones sobre Norma	Promedio µg/m ³	Concentración Máxima Diaria µg/m3
Agosto	12	-	2,44	5,13
Septiembre	30	-	1,7	4,49
Octubre	31	-	1,43	3,41
Noviembre	30	-	0,94	2,75
TOTAL	103	0	1,63	5,13

AÑO 1998				
Mes	NºMediciones	NºMediciones sobre Norma	Promedio µg/m ³	Concentración Máxima Diaria µg/m3
Enero	30	-	4,14	40,89
Febrero	28	6	45,66	254,10
Marzo	31	1	8,45	196,86
Abril	26	-	2,70	6,74
Mayo	23	-	3,34	6,44
Junio	27	-	5,13	10,02
Julio	31	-	4,07	8,62
Agosto	31	-	4,03	6,72
Septiembre	30	-	3,31	6,87
Octubre	31	-	3,24	4,53
Noviembre	30	-	2,77	10,19
Diciembre	28	-	2,83	4,68
TOTAL	346	7	7,47	254,10

Nota

La norma anual chilena no se sobrepasó, pero la referencia suiza diaria en 7 oportunidades.

EMPRESA : ELECTROANDINA
 CONTAMINANTE : ANHIDRIDO SULFUROSO(SO₂) Y MATERIAL PARTICULADO (PM-10)
 NORMA : CONCENTRACIÓN MEDIA DIARIA SO₂=365 µg/m³
 CONCENTRACIÓN MEDIA DIARIA PM-10=150 µg/m³
 CONCENTRACIÓN MEDIA DIARIA NO₂= 80 µg/m³(SUIZA)

Mes	AÑO 1996														
	NºMediciones			NºMediciones sobre Norma			NºMediciones sobre 80%Norma			Promedio µg/m ³			Conc. Máxima Diaria µg/m ³		
	SO ₂	NO ₂	PM-10	SO ₂	NO ₂	PM-10	SO ₂	NO ₂	PM-10	SO ₂	NO ₂	PM-10	SO ₂	NO ₂	PM-10
Enero	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Febrero	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Marzo	24	24	12	-	-	-	-	-	1	64	7,1	87	177	9,6	121
Abril	11	29	12	-	-	-	-	-	-	112	7,4	82	203	11,4	114
Mayo	*	31	12	*	-	-	*	-	-	*	6,6	82	*	10,4	93
Junio	*	30	11	*	-	-	*	-	-	*	6,3	77	*	10,8	106
Julio	5	31	13	-	-	-	-	-	-	36	6,3	67	57	9,5	91
Agosto	27	26	12	-	-	-	-	-	-	22	5,2	67	127	11,0	84
Septiembre	19	17	11	-	-	-	-	-	-	27	2,2	78	114	6,9	102
Octubre	24	22	13	-	-	-	-	-	-	37	3,8	63	99	8,2	91
Noviembre	*	*	12	*	-	-	*	-	1	*	*	74	*	*	148
Diciembre	*	25	12	*	-	-	*	-	-	*	0,18	67	*	0,35	93
TOTAL	110	235	120	0	0	0	0	0	2	50	5,0	74	203	11,4	148

Mes	AÑO 1997									
	NºMediciones		NºMediciones sobre Norma		NºMediciones sobre 80% Norma		Promedio µg/m ³		Conc. Máx. Diaria µg/m ³	
	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10
Enero	22	12	-	-	-	-	51	75	78	103
Febrero	28	12	-	-	-	-	67	79	164	119
Marzo	25	12	-	-	-	1	90	98	146	128
Abril	30	12	-	-	-	3	53	98	174	128
Mayo	31	12	-	-	-	-	22	74	92	110
Junio	30	13	-	-	-	-	13	72	54	116
Julio	12	13	-	-	-	-	7	64	21	98
Agosto	*	12	*	-	*	-	*	72	*	94
Septiembre	*	12	*	-	*	-	*	63	*	89
Octubre	*	12	*	-	*	-	*	70	*	83
Noviembre	*	12	*	-	*	-	*	64	*	96
Diciembre	*	12	*	-	*	-	*	50	*	66
TOTAL	178	146	0	0	0	4	43	73	174	128

NOTA

1. En año 1997 no se mide NO₂ por desperfectos en instrumentos.

EMPRESA : ELECTROANDINA
 CONTAMINANTE : ANHIDRIDO SULFUROSO(SO₂) Y MATERIAL PARTICULADO (PM-10)
 NORMA : CONCENTRACIÓN MEDIA DIARIA SO₂=365 µg/m³
 CONCENTRACIÓN MEDIA DIARIA PM-10=150 µg/m³
 CONCENTRACIÓN MEDIA DIARIA NO₂= 80 µg/m³(SUIZA)

Mes	AÑO 1999														
	N°Mediciones			N°Mediciones sobre Norma			N°Mediciones sobre 80% Norma			Promedio µg/m ³			Conc, Máxima Diaria µg/m ³		
	SO ₂	NO ₂	PM-10	SO ₂	NO ₂	PM-10	SO ₂	NO ₂	PM-10	SO ₂	NO ₂	PM-10	SO ₂	NO ₂	PM-10
Enero	*	14	19	*	-	-	*	-	-	*	13	62	*	16	85
Febrero	*	28	13	*	-	-	*	-	-	*	10	78	*	13	98
Marzo	28	28	14	-	-	-	-	-	-	70	22	84	70	22	114
Abril	30	30	13	-	-	-	-	-	-	40	28	74	79	36	108
Mayo	31	28	13	-	-	-	-	-	-	34	19	78	95	31	112
Junio	30	30	12	-	-	-	-	-	1	17	27	73	78	49	129
Julio	23	23	9	-	-	-	-	-	-	13	26	63	43	38	72
Agosto	20	20	9	-	-	-	-	-	-	19	19	64	58	40	115
Septiembre	23	23	13	-	-	-	-	-	-	22	19	53	77	30	86
Octubre	31	31	12	-	-	-	-	-	-	15	22	73	50	34	107
Noviembre															
Diciembre															
TOTAL	216	255	127	0	0	0	0	0	1	29	20	70	95	49	129

Nota

1. En el mes de Enero problemas en monitor de SO₂
2. En el mes de Febrero continuan problemas con monitor, se arrienda equipo a CIMM quedando en operaciones 04-03-99

EMPRESA : NORGENER
 CONTAMINANTE : ANHIDRIDO SULFUROSO(SO₂) Y MATERIAL PARTICULADO (PM-10)
 NORMA : CONCENTRACIÓN MEDIA DIARIA SO₂=365 µg/m³

000105

Mes	AÑO 1996									
	N°Mediciones		N°Mediciones sobre Norma		N°Mediciones sobre 80% Norma		Promedio µg/m ³		Conc. Máxima Diaria µg/m3	
	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10
Enero	-	-	-	-	-	-	-	-	-	-
Febrero	-	-	-	-	-	-	-	-	-	-
Marzo	5	-	-	-	-	-	59	-	107	-
Abril	30	11	-	-	-	-	31	64	61	92
Mayo	31	10	-	-	-	-	22	61	56	86
Junio	-	10	-	-	-	-	-	50	-	69
Julio	22	11	-	-	-	-	18	53	66	71
Agosto	31	10	-	-	-	-	12	43	54	56
Septiembre	30	10	-	-	-	1	15	51	83	144
Octubre	31	10	-	-	-	-	23	43	52	58
Noviembre	30	10	-	-	-	-	20	36	64	45
Diciembre	31	10	-	-	-	-	22	50	67	80
TOTAL	241	92	0	0	0	1	25	50	107	144

Mes	AÑO 1997									
	N°Mediciones		N°Mediciones sobre Norma		N°Mediciones sobre 80% Norma		Promedio µg/m ³		Conc. Máxima Diaria µg/m3	
	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10
Enero	29	10	-	-	-	-	30	71	56	91
Febrero	28	10	-	-	-	1	40	84	90	141
Marzo	31	10	-	-	-	-	37	58	65	95
Abril	-	-	-	-	-	-	-	-	-	-
Mayo	-	-	-	-	-	-	-	-	-	-
Junio	-	-	-	-	-	-	-	-	-	-
Julio	-	-	-	-	-	-	-	-	-	-
Agosto	-	-	-	-	-	-	-	-	-	-
Septiembre	30	7	-	-	-	-	43	47	75	53
Octubre	31	10	-	-	-	-	20	53	54	73
Noviembre	30	10	-	-	-	-	42	39	164	63
Diciembre	31	10	-	-	-	-	42	41	164	59
TOTAL	210	67	0	0	0	1	36	56	164	141

EMPRESA : NORGENER
 CONTAMINANTE : ANHIDRIDO SULFUROSO(SO₂) Y MATERIAL PARTICULADO (PM-10)
 NORMA : CONCENTRACIÓN MEDIA DIARIA SO₂=365 µg/m³
 : CONCENTRACIÓN MEDIA DIARIA PM-10=150 µg/m³

000106

Mes	AÑO 1999									
	N°Mediciones		N°Mediciones sobre Norma		N°Mediciones sobre 80 %Norma		Promedio µg/m ³		Conc. Máxima Diaria µg/m ³	
	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10
Enero	23	10	-	-	-	-	13	69	27	89
Febrero	28	9	-	-	-	1	59	79	122	123
Marzo	31	10	-	-	-	5	44	116	122	148
Abril	29	10	-	-	-	-	44	61	23	113
Mayo	31	10	-	-	-	-	17	50	104	59
Junio	30	10	-	-	-	-	4	43	11	68
Julio	31	10	-	-	-	-	5	43	16	58
Agosto	31	9	-	-	-	-	6	40	42	57
Septiembre	30	10	-	-	-	-	34	37	71	63
Octubre										
Noviembre										
Diciembre										
TOTAL	264	88	0	0	0	6	25	60	122	148

Mes	AÑO 1998									
	N°Mediciones		N°Mediciones sobre Norma		N°Mediciones sobre 80 %Norma		Promedio µg/m ³		Conc. Máxima Diaria µg/m ³	
	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10
Enero	31	11	-	-	-	-	41	59	83	75
Febrero	25	9	-	-	-	2	65	82	177	143
Marzo	31	10	-	-	-	-	55	57	152	85
Abril	30	10	-	-	-	-	56	59	134	83
Mayo	31	10	-	-	-	-	76	62	216	102
Junio	30	10	-	-	-	-	29	56	128	98
Julio	31	11	-	-	-	-	13	56	46	75
Agosto	29	10	-	-	-	-	17	58	74	101
Septiembre	30	10	-	-	1	-	39	52	327	84
Octubre	25	10	-	-	-	-	14	51	46	74
Noviembre	30	8	-	-	-	-	5	43	25	58
Diciembre	31	9	-	-	-	-	15	49	66	92
TOTAL	354	118	0	0	1	2	35	57	327	143

EMPRESA
CONTAMINANTE
NORMA

: CODELCO
: ANHIDRIDO SULFUROSO(SO₂) Y MATERIAL PARTICULADO (PM-10)
: CONCENTRACIÓN MEDIA DIARIA SO₂=365 µg/m³
: CONCENTRACIÓN MEDIA DIARIA PM-10=150 µg/m³

000107

Mes	Ubicación Estación	AÑO 1999							
		N°Mediciones		N°Mediciones sobre Norma		Promedio µg/m ³		Conc. Máxima Diaria µg/m ³	
		SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10
Enero	J. BRAD.	23	10	1	-	121	109	366	146
	EANA	30	10	1	-	181	114	369	143
	AUKA	29	10	1	-	85	75	390	88
	V.AYQUIN.	27	10	-	-	0	67	8	101
	V.CASPA.	25	10	-	-	0	52	6	60
Febrero	J. BRAD.	24	9	6	-	240	79	759	107
	EANA	23	9	3	-	143	82	462	107
	AUKA	28	9	2	-	96	62	499	88
	V.AYQUIN.	28	8	-	-	0	64	0	88
	V.CASPA.	28	9	-	-	0	47	4	55
Marzo	J. BRAD.	31	11	5	-	188	82	613	110
	EANA	26	11	3	-	171	82	869	106
	AUKA	29	11	5	-	204	58	991	82
	V.AYQUIN.	31	11	-	-	0	59	8	84
	V.CASPA.	31	11	-	-	0	52	0	62
Abril	J. BRAD.	30	10	3	-	174	98	518	149
	EANA	28	10	2	-	124	98	600	145
	AUKA	*	10	*	-	*	53	*	103
	V.AYQUIN.	30	10	-	-	5	63	73	84
	V.CASPA.	30	10	-	-	3	52	26	67
Mayo	J. BRAD.	27	10	2	2	149	116	509	211
	EANA	31	10	7	2	203	116	757	176
	AUKA	30	10	4	-	198	63	747	106
	V.AYQUIN.	26	10	-	-	11	66	60	91
	V.CASPA.	26	10	-	-	4	60	19	78
Junio	J. BRAD.	30	10	2	-	78	60	616	104
	EANA	30	10	2	-	89	78	705	117
	AUKA	30	10	2	-	109	41	777	61
	V.AYQUIN.	30	9	-	-	5	68	46	90
	V.CASPA.	30	10	-	-	1	58	23	84
Julio	J. BRAD.	29	9	1	-	48	56	424	148
	EANA	26	10	1	-	44	50	395	117
	AUKA	24	9	-	-	56	32	300	83
	V.AYQUIN.	27	10	-	-	1	59	7	79
	V.CASPA.	29	10	-	-	0	52	6	65
Agosto	J. BRAD.	31	11	2	-	101	84	520	111
	EANA	28	11	2	-	160	115	960	143
	AUKA	31	11	2	-	158	52	1003	82
	V.AYQUIN.	31	11	-	-	7	66	63	85
	V.CASPA.	31	11	-	-	4	59	31	83
Septiembre	J. BRAD.	30	10	4	-	209	76	672	122
	EANA	30	10	2	-	184	100	543	138
	AUKA	29	10	6	-	222	51	618	75
	V.AYQUIN.	30	10	-	-	10	65	54	88
	V.CASPA.	30	9	-	-	2	54	20	67
Octubre	J. BRAD.								
	EANA								
	AUKA								
	V.AYQUIN.								
	V.CASPA.								
Noviembre	J. BRAD.								
	EANA								
	AUKA								
	V.AYQUIN.								
	V.CASPA.								
Diciembre	J. BRAD.								
	EANA								
	AUKA								
	V.AYQUIN.								
	V.CASPA.								
TOTAL	J. BRAD.	255	90	26	2	145	84	759	211
	EANA	252	91	23	2	144	93	960	176
	AUKA	230	90	22	0	141	54	1003	106
	V.AYQUIN.	260	89	0	0	4	64	73	101
	V.CASPA.	260	90	0	0	2	54	31	84

EMPRESA : CODELCO
 CONTAMINANTE : ANHIDRIDO SULFUROSO(SO₂) Y MATERIAL PARTICULADO (PM-10)
 NORMA : CONCENTRACIÓN MEDIA DIARIA SO₂=365 µg/m³
 : CONCENTRACIÓN MEDIA DIARIA PM-10=150 µg/m³

Mes	Ubicación Estación	AÑO 1998							
		Nº Mediciones		Nº Mediciones sobre Norma		Promedio µg/m ³		Conc. Máxima Diaria µg/m ³	
		SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10	SO ₂	PM-10
Enero	J. BRAD.	28	10	5	0	228	90	995	149
	EANA	30	10	1	0	132	87	914	144
	AUKA	30	10	1	0	142	69	890	107
	V.AYQUIN.	30	10	0	0	2	78	24	103
	V.CASPA.	30	10	0	0	0	53	0	67
Febrero	J. BRAD.	22	10	0	0	162	68	359	89
	EANA	27	10	1	0	84	66	474	90
	AUKA	22	9	2	0	118	51	615	69
	V.AYQUIN.	26	10	0	0	0	61	0	86
	V.CASPA.	17	10	0	0	0	48	0	56
Marzo	J. BRAD.	28	10	5	0	272	78	1023	115
	EANA	30	10	4	0	201	79	838	110
	AUKA	29	10	4	0	182	62	788	134
	V.AYQUIN.	31	10	0	0	1	59	16	80
	V.CASPA.	9	10	0	0	2	40	10	56
Abril	J. BRAD.	21	10	1	0	121	50	408	81
	EANA	28	10	1	0	82	56	429	86
	AUKA	29	10	0	0	49	39	186	60
	V.AYQUIN.	30	9	0	0	1	69	13	81
	V.CASPA.	23	10	0	0	1	54	18	100
Mayo	J. BRAD.	29	10	3	0	124	57	882	104
	EANA	31	10	2	0	94	80	667	139
	AUKA	29	10	1	0	66	47	521	82
	V.AYQUIN.	31	10	0	0	1	75	21	105
	V.CASPA.	22	10	0	0	2	67	34	104
Junio	J. BRAD.	30	10	1	0	138	51	529	83
	EANA	30	10	0	0	51	74	196	109
	AUKA	20	10	0	0	26	43	120	72
	V.AYQUIN.	29	10	0	0	1	67	18	89
	V.CASPA.	29	9	0	0	0	62	0	73
Julio	J. BRAD.	31	11	0	0	100	42	330	77
	EANA	31	11	0	0	28	65	167	121
	AUKA	31	11	0	0	21	37	209	84
	V.AYQUIN.	28	11	0	0	1	65	17	97
	V.CASPA.	28	11	0	0	0	66	0	142
Agosto	J. BRAD.	31	10	2	0	104	44	470	100
	EANA	31	10	0	0	73	58	328	110
	AUKA	31	10	0	0	41	37	287	75
	V.AYQUIN.	23	10	0	0	2	74	27	83
	V.CASPA.	20	10	0	0	2	68	10	85
Septiembre	J. BRAD.	30	10	0	0	65	51	289	92
	EANA	26	10	0	0	59	64	293	103
	AUKA	30	10	0	0	66	42	361	66
	V.AYQUIN.	28	10	0	0	0	71	0	106
	V.CASPA.	22	10	0	0	0	59	0	78
Octubre	J. BRAD.	31	10	1	0	49	80	384	117
	EANA	30	10	0	0	45	88	206	120
	AUKA	31	10	0	0	62	54	338	77
	V.AYQUIN.	26	10	0	0	2	80	11	103
	V.CASPA.	17	10	0	0	0	56	5	69
Noviembre	J. BRAD.	30	9	2	0	186	95	1029	130
	EANA	28	9	1	0	156	100	779	131
	AUKA	24	10	1	0	147	44	715	90
	V.AYQUIN.	27	9	0	0	4	72	38	81
	V.CASPA.	10	10	0	0	2	57	25	76
Diciembre	J. BRAD.	31	11	4	0	177	114	680	148
	EANA	26	11	4	0	230	107	720	146
	AUKA	31	11	2	0	157	72	739	103
	V.AYQUIN.	29	11	0	0	2	70	14	86
	V.CASPA.	31	11	0	0	1	55	28	70
TOTAL	J. BRAD.	342	121	24	0	144	68	1029	149
	EANA	348	121	14	0	103	77	914	146
	AUKA	337	121	11	0	90	50	890	134
	V.AYQUIN.	338	120	0	0	1	70	38	106
	V.CASPA.	258	121	0	0	1	57	34	142

474 11/01-11/11
 158 11/11-11/19
 351 10/11-11/11
 200 11/11-11/11
 111 11/11-11/11
 111 11/11-11/11



Servicio de Salud
ANTOFAGASTA
Departamento de Salud

Depto. Programas
Sobre el Ambiente

COMISION NACIONAL DEL MEDIO AMBIENTE	
OFICINA DE PARTES	
PROVIDENCIA N°	3447
DESTINO :	MRT
FECHA :	14-12-1999
<input checked="" type="checkbox"/>	TOMAR CONOCIMIENTO
<input type="checkbox"/>	DAR CUMPLIMIENTO
<input type="checkbox"/>	INFORMAR
<input type="checkbox"/>	ESTUDIAR Y PROPONER
<input type="checkbox"/>	RESPONDER
<input type="checkbox"/>	INFORMAR A COORDINACION
<input type="checkbox"/>	ARCHIVAR
OBSERVACIONES:	

ORD : N° 7091

ANT : OF.ORD.N°0487/99 CONAMA.
REGIONAL

MAT : REMITE INFORME SOLICITADO.

ANTOFAGASTA,

DE : DIRECTOR SERVICIO DE SALUD ANTOFAGASTA.

A : DIRECTOR REGIONAL(S)
CONAMA REGION ANTOFAGASTA
A.Prat N°461,of.1407
ANTOFAGASTA

En relación a su solicitud de antecedentes sobre monitoreos de calidad de aire en la región, comunico a Ud. lo siguiente:

1.-Monóxido de Carbono(CO) y Ozono(O3):

Actualmente existe solo una estación de monitoreo que mide monóxido de carbono(CO) y ozono(O3) a nivel urbano en la región. Está ubicada en la localidad de Mejillones(Compañía de Bomberos) y funciona desde el mes de Junio del presente año; pertenece a la empresa NOPEL y la opera SERPRAM. La metodología de medición es el **infrarojo no dispersivo con filtro de correlación** para el CO y **espectrofotetría UV** para el ozono.

2.-Dióxido de Nitrógeno(NO):

Este contaminante es medido a nivel urbano en las localidades de Tocopilla y Mejillones. En Mejillones existen tres estaciones que miden este contaminante: Jardín Integra, FCAB y Cia de Bomberos, las cuales pertenecen a las empresas ENAEX, EDELNOR y NOPEL. Los operadores de estas estaciones son ENAEX, CIMM y SERPRAM respectivamente. La metodología de medición es **luminiscencia química** en todos los casos.

3.-Anhídrido sulfuroso(SO2):

A nivel urbano,este contaminante se mide actualmente en las localidades de Tocopilla,Mejillones y en las ciudades de Antofagasta y Calama,empleandose la metodología de **fluorescencia UV** en todos los casos.Las estaciones pertenecen a las empresas ELECTROANDINA y NORGENER en Tocopilla,NOPEL y EDELNOR en Mejillones,FUNDICION ALTONORTE en Antofagasta y CODELCO Chuquicamata en Calama.Las estaciones de Calama son operadas por la misma empresa.

4.-Partículas totales en suspensión(PTS):

Actualmente,a nivel urbano no se está midiendo partículas totales en suspensión sino solo partículas respirables(MP-10).En la ciudad de Antofagasta el Srvcio de Salud Antofagasta midió con equipos propios PTS durante los años 1997 y 1998 con motivo de la problemática de los acopios de concentrados de minerales bolivianos,empleándose para el efecto dos estaciones:Pasaje Loa y Gobernación Marítima,ubicadas frente a dichos acopios.

Para información más detallada sobre otros aspectos,se adjuntan tablas que incluyen resúmenes de los resultados por estación.Si se desean los datos completos,deberán ser copiados directamente en las oficinas del Depto. de Programas sobre el Ambiente de este Servicio,ya que no existen bases de datos computacionales para todos los casos.

Saluda atentamente a Ud.


DR. MANUEL ZAMORANO GODOY
MÉDICO CIRUJANO
DIRECTOR


MOC/MCC/JTF/mcc.

DISTRIBUCIÓN: N° 2194

- La indicada
- Dirección SSA
- SDM
- DPA
- Ofipar

“HACIA LA REGION QUE QUEREMOS”

REDES DE MONITOREO DE CALIDAD DEL AIRE II REGION

1111000

COMUNA	PROPIETARIO	ESTACIONES		VARIABLES MONITOREADAS	METODOLOGIA MEDICION	AUTORIZACION
		Nº	UBICACION			
CALAMA	CODELCO DIVISION CHUQUICAMATA	5	3 Chuquicamata: Auka, J. Bradford, San José	SO ₂ PM-10	F.U.V. G	Resolución N°4074 del 22-09-1998
			2 Calama: V. Ayquina, V. Caspana	As en PM-10 Meteorología	A.A	
		3	Todas ubicadas en terrenos de la Planta	PM-10 PTS Meteorología	G G	
	SCM EL ABRA	2	1 Hotel el Abra 1 Sector Conchi	PM-10 PTS	G G	✓
ANTOFAGASTA	FUNDICION ALTONORTE (EX-REFIMET)	3	2 La Negra, Sur 1 Covieñ	SO ₂ PM-10 As en PM-10 Meteorología	F.U.V. G A.A	Res. Jurídica N°2084 27-Jul-94
			3 Todas ubicadas en Sector Coloso	PM-10 PTS	G G	Ord N°6445 del 23/11/1998 (sólo Est. Coloso)
		2	1 Sector Campamentos 1 Mina	PM-10 PTS	G	Ord N°1013 del 24/02/1999
MARIA ELENA	SQM NITRATOS	2	1 Iglesia 1 Hospital	PM-10 Meteorología	G	Resolución N°4075 del 22-09-1998
TOCOPILLA	ELECTROANDINA	1	Escuela E-10	SO ₂ , NO ₂ , NO _x PM-10 Meteorología	F.U.V., L.Q. G	✓
			1 Comisaría Carabineros	SO ₂ PM-10 Meteorología	F.U.V. G	✓
		1	Jardin Infantil Integra	NO ₂ NO _x , NO _x Meteorología	L.Q. L.Q.	✓
MEJILLONES	EDELNOR	1	Estación Ferrocarriil	SO ₂ , NO ₂ (campana) PM-10 Meteorología	F.U.V., L.Q. G	✓
			1 Cía. De Bomberos	O ₃ , NO ₂ , CO PM-10	E.U.V., L.Q., I.N.D. G	✗
		1				

Simbología

- F.U.V. Fluorescencia UV
- G Gravimetría
- L.Q. Luminiscencia química
- E.U.V. Espectrofotometría U.V
- I.N.D. Infrarrojo no dispersivo con filtro de correlación
- A.A. Absorción Atómica
- ✓ ha sido inspeccionada
- ✗ no ha sido inspeccionada

REDES DE MONITOREO DE CALIDAD DEL AIRE II REGION

000112

COMUNA	PROPIETARIO	MANEJO	
		OPERACION	ANALIS/MANTENC/CALIB.
CALAMA	CODELCO DIVISION CHUQUICAMATA	PROPIO	PROPIO
		CESMEC	CESMEC
		RADOMIRO TOMIC	
	SCM EL ABRA		
ANTOFAGASTA	FUNDICION ALTONORTE (EX-REFINMET)	CIMM	CIMM
		ESCONDIDA	SGS ECOOCARE
		SGS ECOOCARE	SGS ECOOCARE
		SGS ECOOCARE	SGS ECOOCARE
MARIA ELENA	SQM NITRATOS	PROPIO	PROPIO+SK ECOLOGIA+ SERPRAM (pesaje)
TOCOPILLA	ELECTROANDINA	PROPIO	CIMM PROPIO (pesaje)
		NORGENER	SERPRAM (Mantenición,pesaje)
MEJILLONES	ENAEX	ENAEX	SK-ECOLOGIA
		EDELNOR	CESMEC
	NOPEL		SERPRAM

Simbología

F.U.V.

Fluorescencia UV

G

Gravimetría

LQ

Luminiscencia química

E.U.V.

Espectrofotometría U.V

I.N.D.

Infrarrojo no dispersivo con filtro

A.A.

Absorción Atómica

✓

Inspeccionada

✗

Inspeccionada

**DIRECCION REGIONAL
COMISION NACIONAL DEL MEDIO AMBIENTE
REGION DE ATACAMA**

COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO
RECORRIDO: 14280 / 10506
FECHA: 14 DIC 1999
DESPECHADO:
PRE:
P. matus 12/13/99
14824

ORD.: N° 01104 /

ANT.: Su Ord. N° 995613 del
10.11.1999.

MAT.: Remite información.

COPIAPO, 13 DIC 1999

**DE: DIRECTOR REGIONAL COMISION NACIONAL DEL MEDIO AMBIENTE
REGION DE ATACAMA**

**A: DRA. PATRICIA MATUS C.
JEFE DEPTO. DESCONTAMINACION PLANES Y NORMAS
COMISION NACIONAL DEL MEDIO AMBIENTE**

En atención a lo solicitado mediante documento citado en Antecedentes, adjunto me permito remitir a Ud. información de la red de monitoreo de calidad del aire por los parámetros SO2 y NO2 de la Empresa Eléctrica Guacolda en Huasco correspondiente a los años 1997-1999.

Saluda atentamente a Ud.


**DIRECTOR REGIONAL
COMISION NACIONAL DEL MEDIO AMBIENTE
ATACAMA
JORGE TRONCOSO CONTRERAS
DIRECTOR REGIONAL
COMISION NACIONAL DEL MEDIO AMBIENTE**

JTC/RRD/rrd
DISTRIBUCION

- Destinatario
- Archivos

INFORMACION RED DE MONITOREO DE CALIDAD DEL AIRE

ACTIVIDAD INDUSTRIAL PROPIETARIA DE LA RED: EMPRESA ELECTRICA GUACOLDA

ADMINISTRADOR DE LA RED : CESMEC LTDA.

UBICACIÓN DE LA RED : CUERPO DE BOMBEROS ZONA URBANA DE HUASCO.

SITUACION LEGAL DE LA RED : CERTIFICADA POR EL SERVICIO DE SALUD DE ATACAMA

METODOLOGIA MEDICION SO2 : FLUORESCENCIA ULTRAVIOLETA

METODOLOGIA DE MEDICION NO2 : QUIMIOLUMINISCENCIA ULTRAVIOLETA

Nota : La red de monitoreo fue establecida como parte del programa de seguimiento del EIA del Proyecto Guacolda y obtiene, además de SO2 Y NO2, datos de concentración de PM10, NO y variables meteorológicas.

MONITOREO DE ANHIDRIDO SULFUROSO



SEB-10328

MONITOREO DE CALIDAD DEL AIRE

VARIABLE : ANHIDRIDO SULFUROSO (SO₂)

UNIDAD : µg/m³N

TABLA 3.

LUGAR : CUERPO DE BOMBEROS

PERIODO : 1 AL 30 DE SEPTIEMBRE DE 1999

D/H	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA	
1-Sep	28.8	26.1	39.2	26.1	47.0	26.1	44.4	26.1	31.4	47.0	31.4	31.4	26.1	44.4	26.1	41.8	26.1	39.2	26.1	36.6	26.1	44.4	26.1	26.1	26.1	47.0	26.1	33.1
2-Sep	36.6	26.1	41.8	26.1	44.4	26.1	44.4	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1
3-Sep	28.8	26.1	34.0	26.1	44.4	26.1	39.2	26.1	36.6	31.4	57.5	49.7	31.4	26.1	44.4	26.1	31.4	26.1	44.4	26.1	39.2	26.1	36.6	26.1	26.1	57.5	26.1	33.2
4-Sep	34.0	26.1	36.6	26.1	34.0	26.1	34.0	26.1	36.6	26.1	36.6	26.1	34.0	26.1	31.4	26.1	36.6	26.1	36.6	26.1	47.0	26.1	26.1	26.1	26.1	47.0	26.1	30.8
5-Sep	28.8	26.1	34.0	26.1	44.4	26.1	39.2	26.1	31.4	44.4	36.6	31.4	26.1	31.4	36.6	31.4	26.1	36.6	26.1	26.1	39.2	26.1	18.3	54.9	39.2	54.9	18.3	32.8
6-Sep	36.6	26.1	39.2	26.1	36.6	26.1	31.4	26.1	28.8	31.4	26.1	31.4	26.1	31.4	28.8	26.1	34.0	26.1	36.6	26.1	36.6	26.1	28.8	26.1	39.2	26.1	29.9	
7-Sep	34.0	26.1	36.6	26.1	28.8	26.1	31.4	26.1	39.2	36.6	36.6	26.1	31.4	26.1	28.8	26.1	26.1	18.3	26.1	47.0	26.1	34.0	26.1	26.1	47.0	18.3	29.8	
8-Sep	26.1	26.1	26.1	26.1	26.1	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3
9-Sep	41.8	39.2	31.4	28.8	34.0	36.6	39.2	31.4	36.6	34.0	57.5	36.6	26.1	31.4	26.1	39.2	26.1	44.4	26.1	34.0	26.1	28.8	26.1	26.1	57.5	26.1	33.7	
10-Sep	28.8	26.1	34.0	26.1	44.4	26.1	31.4	26.1	34.0	26.1	36.6	44.4	31.4	26.1	36.6	26.1	44.4	26.1	34.0	26.1	31.4	26.1	28.8	26.1	44.4	26.1	31.1	
11-Sep	36.6	26.1	34.0	26.1	36.6	26.1	34.0	26.1	28.8	26.1	28.8	26.1	26.1	44.4	36.6	26.1	34.0	26.1	44.4	26.1	34.0	26.1	28.8	26.1	44.4	26.1	30.9	
12-Sep	28.8	26.1	34.0	26.1	39.2	26.1	31.4	26.1	39.2	31.4	31.4	26.1	26.1	34.0	26.1	31.4	26.1	39.2	26.1	34.0	26.1	39.2	26.1	26.1	39.2	26.1	26.1	30.5
13-Sep	28.8	26.1	34.0	26.1	39.2	26.1	31.4	26.1	44.4	36.6	26.1	36.6	26.1	34.0	26.1	36.6	26.1	39.2	26.1	44.4	26.1	44.4	26.1	47.0	26.1	47.0	26.1	31.9
14-Sep	34.0	26.1	39.2	26.1	44.4	26.1	39.2	26.1	41.8	26.1	31.4	26.1	36.6	26.1	31.4	26.1	34.0	26.1	44.4	26.1	44.4	26.1	39.2	26.1	44.4	26.1	31.5	
15-Sep	36.6	26.1	34.0	26.1	39.2	26.1	31.4	26.1	31.4	34.0	26.1	28.8	26.1	31.4	26.1	34.0	26.1	39.2	26.1	31.4	26.1	39.2	26.1	26.1	39.2	26.1	30.2	
16-Sep	31.4	26.1	39.2	26.1	36.6	26.1	28.8	26.1	34.0	26.1	34.0	26.1	26.1	31.4	26.1	31.4	26.1	28.8	26.1	34.0	26.1	34.0	26.1	26.1	39.2	26.1	29.5	
17-Sep	20.9	26.1	28.8	26.1	39.2	26.1	47.0	26.1	28.8	34.0	26.1	34.0	26.1	34.0	26.1	31.4	26.1	28.8	26.1	34.0	26.1	28.8	26.1	26.1	47.0	20.9	30.2	
18-Sep	31.4	26.1	34.0	26.1	36.6	26.1	44.4	26.1	41.8	26.1	26.1	26.1	26.1	34.0	26.1	36.6	26.1	36.6	26.1	34.0	26.1	28.8	26.1	31.4	47.0	26.1	31.0	
19-Sep	31.4	26.1	34.0	26.1	36.6	26.1	39.2	26.1	44.4	26.1	28.8	26.1	26.1	34.0	26.1	36.6	26.1	44.4	26.1	44.4	26.1	28.8	26.1	31.4	44.4	26.1	31.7	
20-Sep	31.4	26.1	36.6	26.1	34.0	26.1	39.2	26.1	44.4	26.1	28.8	26.1	26.1	34.0	26.1	36.6	26.1	44.4	26.1	41.8	26.1	28.8	26.1	31.4	44.4	26.1	31.1	
21-Sep	31.4	26.1	36.6	26.1	34.0	26.1	39.2	26.1	44.4	26.1	28.8	26.1	26.1	34.0	26.1	36.6	26.1	44.4	26.1	41.8	26.1	28.8	26.1	31.4	44.4	26.1	31.5	
22-Sep	47.0	26.1	39.2	26.1	44.4	26.1	36.6	26.1	34.0	26.1	28.8	26.1	26.1	34.0	26.1	36.6	26.1	44.4	26.1	47.0	26.1	47.0	26.1	26.1	47.0	26.1	31.5	
23-Sep	31.4	26.1	34.0	26.1	44.4	26.1	39.2	26.1	31.4	36.6	26.1	31.4	26.1	18.3	26.1	34.0	26.1	39.2	26.1	34.0	26.1	44.4	26.1	44.4	26.1	47.0	18.3	31.5
24-Sep	26.1	34.0	26.1	36.6	26.1	39.2	26.1	31.4	26.1	31.4	36.6	26.1	31.4	36.6	26.1	31.4	26.1	41.8	26.1	41.8	26.1	28.8	26.1	28.8	44.4	26.1	31.7	
25-Sep	36.6	26.1	31.4	26.1	47.0	26.1	36.6	26.1	44.4	26.1	44.4	26.1	44.4	26.1	34.0	26.1	44.4	26.1	36.6	26.1	34.0	26.1	39.2	26.1	47.0	26.1	31.5	
26-Sep	26.1	36.6	26.1	34.0	26.1	28.8	26.1	44.4	26.1	39.2	31.4	26.1	31.4	26.1	36.6	26.1	31.4	26.1	44.4	26.1	47.0	26.1	39.2	26.1	47.0	26.1	31.5	
27-Sep	34.0	26.1	44.4	26.1	39.2	26.1	44.4	26.1	36.6	26.1	57.5	36.6	26.1	36.6	26.1	48.7	26.1	34.0	26.1	44.4	26.1	44.4	26.1	36.6	26.1	44.4	26.1	31.4
28-Sep	26.1	31.4	26.1	39.2	26.1	36.6	26.1	44.4	26.1	49.7	26.1	44.4	26.1	36.6	26.1	18.3	18.3	18.3	26.1	39.2	26.1	47.0	26.1	26.1	57.5	26.1	33.7	
29-Sep	26.1	39.2	26.1	47.0	26.1	49.7	26.1	52.3	26.1	54.9	26.1	34.0	26.1	62.7	31.4	26.1	39.2	26.1	36.6	26.1	34.0	26.1	31.4	26.1	62.7	26.1	34.4	
30-Sep	34.0	26.1	36.6	26.1	39.2	26.1	44.4	26.1	41.8	47.0	26.1	31.4	26.1	34.0	26.1	36.6	18.3	20.9	18.3	26.1	41.8	26.1	44.4	26.1	47.0	18.3	31.2	
MAXIMA	47.0	39.2	44.4	47.0	49.7	47.0	52.3	47.0	54.9	57.5	49.7	39.2	62.7	44.4	44.4	44.4	44.4	44.4	47.0	47.0	47.0	47.0	47.0	47.0	47.0	47.0	47.0	
MINIMA	20.9	26.1	26.1	26.1	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	18.3	
MEDIA	31.8	27.8	34.2	27.9	37.3	27.9	35.7	28.5	36.0	33.4	33.1	31.4	29.8	31.9	32.1	30.7	30.4	31.0	31.9	33.0	31.1	31.1	31.1	30.8	26.1	26.1	26.1	

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 : 99.6 %
 : Día de Medición
 : Hora de Medición

Código ausencia de datos por mantenimiento del equipo
 Código ausencia de datos por calibración del equipo
 Código ausencia de datos por falta de energía eléctrica temporalmente
 N° de datos válidos
 Recuperación de datos

D H

Nota importante al reverso

MONITOREO DE CALIDAD DEL AIRE

TABLA 3.

LUGAR : CUERPO DE BOMBEROS
PERIODO : 01 DE JULIO AL 31 DE JULIO DE 1999
VARIABLE : ANHIDRIDO SULFUROSO (SO2)
UNIDAD : µg/m³N

Table with columns: D/H, 1-24, MAXIMA, MINIMA, MEDIA. Rows include dates from 1-Jul to 31-Jul and summary rows MAXIMA, MINIMA, MEDIA.

Código ausencia de datos por mantenimiento del equipo
Código ausencia de datos por calibración del equipo
Código ausencia de datos por falta de energía eléctrica temporalmente
N° de datos válidos
Recuperación de datos
D H

Nota Importante al reverso

SEB-10273

MONITOREO DE CALIDAD DEL AIRE

VARIABLE : ANHIDRIDO SULFUROSO (SO₂)

UNIDAD : µg/m³N

TABLA 3.

LUGAR : CUERPO DE BOMBEROS

PERIODO : 1 AL 30 DE JUNIO DE 1999

D/H	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA
1-jun	26.1	31.3	34.0	31.3	39.2	31.3	49.6	52.2	26.1	31.3	28.7	26.1	49.6	#	C	C	26.1	28.7	26.1	26.1	26.1	47.0	31.3	36.6	52.2	26.1	33.9
2-jun	28.7	26.1	47.0	26.1	49.6	28.7	26.1	47.0	31.3	34.0	54.9	62.7	67.9	49.6	62.7	67.9	49.6	26.1	26.1	75.8	26.1	31.3	26.1	151.5	151.5	26.1	44.3
3-jun	47.0	26.1	67.9	62.7	41.8	62.7	41.8	39.2	31.3	47.0	31.3	26.1	28.7	26.1	31.3	39.2	31.3	49.6	26.1	31.3	44.4	31.3	39.2	44.4	67.9	26.1	39.5
4-jun	31.3	26.1	65.3	31.3	39.2	49.6	31.3	44.4	31.3	47.0	31.3	39.2	31.3	26.1	28.7	26.1	36.6	26.1	28.7	47.0	31.3	26.1	28.7	31.3	65.3	26.1	34.8
5-jun	26.1	39.2	26.1	47.0	26.1	47.0	26.1	39.2	75.8	88.8	31.3	26.1	5.2	151.5	122.8	122.8	122.8	222.0	47.0	49.6	36.6	41.8	148.9	222.0	5.2	62.6	
6-jun	49.6	62.7	109.7	73.1	146.3	36.6	41.8	62.7	41.8	120.2	31.3	47.0	57.5	31.3	26.1	36.6	26.1	62.7	26.1	128.0	26.1	73.1	26.1	47.0	146.3	26.1	57.9
7-jun	28.7	120.2	39.2	36.6	36.6	151.5	122.8	39.2	120.2	65.3	36.6	120.2	36.6	122.8	39.2	31.3	47.0	31.3	26.1	36.6	36.6	26.1	26.1	36.6	151.5	26.1	58.9
8-jun	41.8	47.0	28.7	52.2	54.9	36.6	28.7	26.1	31.3	52.2	54.9	78.4	62.7	36.6	26.1	31.3	28.7	26.1	52.2	26.1	47.0	31.3	39.2	54.9	78.4	26.1	41.5
9-jun	39.2	31.3	26.1	122.8	31.3	36.6	31.3	47.0	31.3	41.8	31.3	52.2	39.2	57.5	62.7	67.9	73.1	52.2	41.8	39.2	31.3	26.1	31.3	26.1	122.8	26.1	44.6
10-jun	36.6	31.3	47.0	31.3	26.1	31.3	28.7	718.4	+	741.9	553.8	57.5	83.6	96.7	62.7	31.3	26.1	26.1	36.6	31.3	26.1	20.9	26.1	31.3	741.9	20.9	126.2
11-jun	36.6	31.3	26.1	28.7	26.1	31.3	54.9	41.8	31.3	26.1	31.3	26.1	28.7	39.2	47.0	54.9	44.4	41.8	36.6	31.3	28.7	26.1	26.1	36.6	54.9	26.1	34.7
12-jun	41.8	44.4	52.2	54.9	52.2	47.0	39.2	31.3	44.4	39.2	31.3	36.6	26.1	57.5	75.8	44.4	31.3	28.7	26.1	54.9	47.0	41.8	31.3	31.3	75.8	26.1	42.1
13-jun	36.6	41.8	41.8	36.6	31.3	26.1	28.7	26.1	44.4	49.6	44.4	39.2	34.0	31.3	28.7	31.3	36.6	26.1	39.2	26.1	26.1	36.6	31.3	47.0	49.6	26.1	35.0
14-jun	36.6	54.9	47.0	41.8	36.6	28.7	31.3	36.6	39.2	44.4	49.6	39.2	62.7	39.2	47.0	52.2	39.2	31.3	26.1	57.5	88.8	52.2	57.5	57.5	88.8	26.1	45.7
15-jun	52.2	44.4	44.4	39.2	39.2	31.3	47.0	31.3	49.6	31.3	31.3	26.1	26.1	101.9	44.4	31.3	31.3	31.3	52.2	26.1	26.1	39.2	39.2	39.2	101.9	26.1	39.8
16-jun	47.0	31.3	36.6	28.7	31.3	44.4	39.2	31.3	39.2	57.5	57.5	39.2	31.3	52.2	96.7	39.2	36.6	31.3	28.7	39.2	31.3	36.6	31.3	36.6	96.7	28.7	40.7
17-jun	36.6	41.8	39.2	39.2	31.3	36.6	31.3	31.3	41.8	31.3	31.3	44.4	70.5	75.8	44.4	31.3	31.3	26.1	28.7	26.1	47.0	31.3	26.1	28.7	75.8	26.1	37.6
18-jun	36.6	41.8	47.0	49.6	28.7	34.0	36.6	41.8	39.2	57.5	57.5	57.5	39.2	88.8	26.1	36.6	41.8	31.3	49.6	26.1	28.7	31.3	31.3	34.0	88.8	26.1	41.4
19-jun	31.3	28.7	39.2	41.8	39.2	34.0	39.2	44.4	39.2	44.4	101.9	141.1	164.6	52.2	70.5	31.3	26.1	39.2	26.1	31.3	31.3	49.6	31.3	31.3	164.6	26.1	50.4
20-jun	31.3	39.2	44.4	44.4	39.2	44.4	52.2	52.2	154.1	185.5	141.1	62.7	39.2	39.2	39.2	39.2	31.3	36.6	41.8	28.7	26.1	47.0	26.1	26.1	185.5	26.1	55.2
21-jun	31.3	36.6	39.2	36.6	31.3	41.8	44.4	47.0	49.6	39.2	62.7	96.7	88.8	31.3	26.1	624.3	96.7	75.8	75.8	62.7	57.5	52.2	57.5	57.5	624.3	26.1	78.7
22-jun	26.1	31.3	36.6	31.3	41.8	31.3	28.7	31.3	34.0	31.3	31.3	26.1	36.6	26.1	44.4	52.2	54.9	31.3	26.1	49.6	31.3	31.3	31.3	26.1	54.9	26.1	34.3
23-jun	31.3	36.6	62.7	62.7	70.5	70.5	75.8	75.8	83.6	96.7	133.2	57.5	62.7	67.9	52.2	54.9	52.2	75.8	52.2	62.7	31.3	52.2	57.5	52.2	133.2	52.2	67.8
24-jun	57.5	62.7	57.5	52.2	67.9	52.2	67.9	73.1	52.2	54.9	52.2	57.5	62.7	67.9	52.2	54.9	52.2	75.8	52.2	62.7	31.3	52.2	57.5	52.2	62.7	75.8	57.4
25-jun	67.9	65.3	52.2	54.9	52.2	62.7	67.9	73.1	62.7	54.9	52.2	44.4	44.4	44.4	44.4	44.4	44.4	44.4	44.4	44.4	44.4	44.4	44.4	44.4	44.4	44.4	53.1
26-jun	44.4	49.6	52.2	54.9	44.4	52.2	73.1	60.1	54.9	52.2	75.8	44.4	44.4	41.8	44.4	47.0	44.4	49.6	52.2	62.7	52.2	67.9	52.2	54.9	75.8	41.8	53.0
27-jun	57.5	60.1	73.1	52.2	62.7	67.9	57.5	52.2	54.9	52.2	62.7	120.2	57.5	52.2	52.2	52.2	44.4	52.2	44.4	52.2	44.4	52.2	52.2	52.2	120.2	44.4	57.9
28-jun	44.4	49.6	44.4	52.2	62.7	52.2	57.5	52.2	57.5	57.5	52.2	57.5	83.6	57.5	57.5	52.2	44.4	44.4	52.2	52.2	62.7	57.5	52.2	52.2	83.6	44.4	54.6
MAXIMA	67.9	120.2	109.7	122.8	146.3	151.5	122.8	718.4	154.1	185.5	741.9	553.8	164.6	128.0	624.3	151.5	122.8	122.8	222.0	128.0	88.8	75.8	57.5	151.5			
MINIMA	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	26.1	20.9	26.1	26.1			
MEDIA	40.0	44.7	46.5	46.2	45.5	46.1	46.5	67.2	49.5	55.5	74.1	71.7	49.0	54.5	72.0	50.7	44.1	42.4	45.4	43.4	40.0	42.0	36.9	47.7			

C
+
714
99.2 %
Dia de Medicion
Hora de Medicion

Código ausencia de datos por mantenimiento del equipo
Código ausencia de datos por calibración del equipo
Código ausencia de datos por falta de energía eléctrica temporalmente
Nº de datos válidos
Recuperación de datos
D
H

Nota Importante al reverso

SEB-10255

MONITOREO DE CALIDAD DEL AIRE

VARIABLE : ANHIDRIDO SULFUROSO (SO₂)
UNIDAD : µg/m³N

LUGAR : CUERPO DE BOMBEROS
PERIODO : 1 AL 31 DE MAYO DE 1999

D/H	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA	
1-may	28.7	26.1	31.3	26.1	44.4	39.2	26.1	26.1	28.7	26.1	26.1	18.3	31.3	44.4	52.2	31.3	18.3	31.3	38.2	26.1	26.1	18.3	31.3	13.1	52.2	13.1	29.6	
2-may	26.1	28.7	26.1	18.3	13.1	18.3	23.5	18.3	0.0	18.3	20.9	18.3	39.2	83.6	62.7	26.1	26.1	18.3	20.9	18.3	31.3	31.3	26.1	26.1	83.6	0.0	25.8	
3-may	39.2	31.3	26.1	28.7	26.1	31.3	26.1	34.0	31.3	+	39.2	141.1	83.6	44.4	44.4	26.1	26.1	18.3	26.1	31.3	31.3	26.1	26.1	26.1	141.1	18.3	37.3	
4-may	28.7	26.1	31.3	26.1	31.3	26.1	31.3	39.2	70.5	39.2	39.2	0.0	31.3	39.2	15.7	13.1	26.1	18.3	26.1	31.3	39.2	31.3	31.3	26.1	70.5	0.0	29.9	
5-may	28.7	26.1	28.7	26.1	31.3	26.1	31.3	26.1	28.7	26.1	28.7	18.3	+	31.3	26.1	28.7	18.3	+	31.3	26.1	28.7	26.1	26.1	26.1	39.2	18.3	27.9	
6-may	31.3	26.1	36.6	26.1	41.8	26.1	47.0	26.1	52.2	26.1	146.3	109.7	44.4	31.3	26.1	28.7	26.1	28.7	26.1	39.2	26.1	26.1	26.1	18.3	146.3	18.3	39.3	
7-may	20.9	18.3	26.1	18.3	18.3	26.1	18.3	23.5	18.3	26.1	18.3	18.3	23.5	18.3	26.1	18.3	26.1	18.3	26.1	18.3	0.0	18.3	0.0	18.3	52.2	0.0	20.9	
8-may	23.5	18.3	31.3	18.3	39.2	18.3	26.1	18.3	28.7	18.3	20.9	18.3	23.5	18.3	26.1	18.3	26.1	18.3	26.1	18.3	0.0	18.3	18.3	18.3	44.4	0.0	23.8	
9-may	26.1	18.3	31.3	18.3	39.2	18.3	26.1	18.3	28.7	18.3	26.1	18.3	23.5	18.3	26.1	44.4	83.6	26.1	26.1	18.3	26.1	18.3	18.3	18.3	83.6	18.3	27.1	
10-may	26.1	18.3	31.3	18.3	39.2	18.3	26.1	18.3	28.7	18.3	26.1	18.3	23.5	18.3	26.1	18.3	26.1	18.3	26.1	18.3	26.1	39.2	26.1	31.3	47.0	18.3	28.0	
11-may	26.1	28.7	26.1	39.2	26.1	47.0	31.3	31.3	34.0	26.1	28.7	18.3	20.9	18.3	23.5	18.3	26.1	18.3	28.7	26.1	39.2	26.1	31.3	31.3	47.0	18.3	28.0	
12-may	26.1	39.2	31.3	26.1	28.7	26.1	31.3	39.2	44.4	57.5	0.0	0.0	0.0	0.0	0.0	+	31.3	+	31.3	39.2	26.1	47.0	26.1	26.1	57.5	0.0	24.7	
13-may	20.9	31.3	26.1	31.3	26.1	41.8	26.1	31.3	26.1	52.2	26.1	54.9	70.5	26.1	26.1	26.1	31.3	26.1	28.7	26.1	39.2	26.1	31.3	31.3	39.2	26.1	33.1	
14-may	39.2	26.1	47.0	26.1	49.6	26.1	31.3	31.3	44.4	39.2	31.3	26.1	26.1	47.0	31.3	26.1	49.6	31.3	47.0	31.3	39.2	44.4	44.4	44.4	39.2	26.1	37.3	
15-may	36.6	39.2	31.3	34.0	31.3	39.2	31.3	49.6	31.3	70.5	101.9	101.9	96.7	31.3	13.1	0.0	26.1	26.1	5.2	26.1	47.0	26.1	26.1	26.1	101.9	0.0	39.5	
16-may	20.9	26.1	47.0	26.1	49.6	26.1	31.3	26.1	41.8	26.1	26.1	26.1	177.6	109.7	39.2	44.4	39.2	31.3	26.1	31.3	26.1	31.3	26.1	26.1	177.6	20.9	41.6	
17-may	26.1	47.0	26.1	39.2	31.3	36.6	31.3	39.2	31.3	34.0	31.3	26.1	26.1	44.4	44.4	44.4	31.3	26.1	28.7	26.1	26.1	31.3	26.1	26.1	49.6	26.1	32.7	
18-may	31.3	28.7	31.3	39.2	31.3	36.6	31.3	39.2	31.3	39.2	31.3	31.3	39.2	52.2	44.4	44.4	31.3	26.1	28.7	26.1	26.1	31.3	26.1	26.1	52.2	26.1	33.9	
19-may	31.3	44.4	26.1	31.3	31.3	26.1	26.1	31.3	31.3	39.2	62.7	101.9	109.7	52.2	31.3	31.3	26.1	31.3	31.3	52.2	31.3	39.2	47.0	39.2	109.7	26.1	42.2	
20-may	41.8	39.2	44.4	57.5	57.5	62.7	57.5	54.9	52.2	57.5	52.2	39.2	31.3	26.1	31.3	26.1	31.3	31.3	52.2	128.0	83.6	96.7	109.7	62.7	39.2	300.4	39.2	96.0
21-may	83.6	75.8	70.5	75.8	70.5	62.7	70.5	62.7	44.4	52.2	44.4	172.4	300.4	177.6	185.5	70.5	88.8	88.8	83.6	88.8	159.3	120.2	83.6	88.8	300.4	39.2	96.0	
22-may	62.7	70.5	44.4	49.6	44.4	52.2	44.4	44.4	44.4	52.2	52.2	57.5	75.8	83.6	62.7	39.2	31.3	36.6	31.3	47.0	31.3	57.5	31.3	31.3	83.6	31.3	49.6	
23-may	57.5	31.3	52.2	31.3	28.7	31.3	39.2	47.0	39.2	31.3	26.1	31.3	41.8	31.3	31.3	39.2	31.3	26.1	31.3	26.1	31.3	20.9	31.3	31.3	83.6	20.9	34.2	
24-may	31.3	31.3	31.3	31.3	31.3	31.3	31.3	31.3	31.3	39.2	31.3	26.1	26.1	26.1	39.2	39.2	31.3	31.3	26.1	26.1	26.1	26.1	26.1	26.1	39.2	26.1	30.7	
25-may	36.6	31.3	41.8	31.3	47.0	31.3	52.2	31.3	36.6	31.3	26.1	57.5	57.5	39.2	31.3	26.1	26.1	52.2	26.1	31.3	60.1	31.3	26.1	26.1	60.1	26.1	36.8	
27-may	31.3	26.1	41.8	26.1	73.1	26.1	65.3	26.1	151.5	26.1	52.2	26.1	26.1	31.3	26.1	47.0	26.1	28.7	26.1	39.2	26.1	49.6	26.1	26.1	52.2	26.1	35.4	
28-may	31.3	26.1	41.8	26.1	73.1	26.1	65.3	26.1	151.5	26.1	52.2	26.1	26.1	31.3	26.1	65.3	26.1	26.1	26.1	91.4	26.1	125.4	26.1	169.8	26.1	169.8	26.1	
29-may	31.3	26.1	31.3	36.6	31.3	31.3	31.3	39.2	44.4	39.2	31.3	164.6	96.7	44.4	31.3	39.2	39.2	31.3	26.1	31.3	39.2	31.3	26.1	26.1	164.6	26.1	41.7	
30-may	28.7	26.1	31.3	54.9	26.1	47.0	26.1	39.2	26.1	31.3	26.1	28.7	26.1	39.2	26.1	49.6	26.1	52.2	26.1	54.9	26.1	65.3	31.3	39.2	65.3	26.1	35.6	
31-may	31.3	31.3	26.1	28.7	26.1	65.3	26.1	73.1	26.1	83.6	26.1	62.7	26.1	128.0	26.1	62.7	26.1	31.3	28.7	26.1	47.0	26.1	39.2	28.7	128.0	26.1	41.8	
MAXIMA	83.6	75.8	70.5	75.8	73.1	70.5	65.3	73.1	151.5	83.6	172.4	300.4	177.6	128.0	185.5	70.5	88.8	88.8	128.0	88.8	159.3	120.2	169.8	88.8				
MINIMA	20.9	18.3	26.1	18.3	13.1	18.3	18.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	18.3	0.0	18.3	0.0	13.1			
MEDIA	33.4	32.3	35.2	32.4	36.9	34.0	36.0	34.6	39.6	38.8	41.6	51.0	52.8	44.9	35.0	33.6	31.7	33.5	34.6	33.3	41.9	36.8	35.6	29.9				

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Código ausencia de datos por falta de energía eléctrica temporalmente
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SEB-10229

MONITOREO DE CALIDAD DEL AIRE

VARIABLE : ANHIDRIDO SULFUROSO (SO₂)

LUGAR : CUERPO DE BOMBEROS

PERIODO : 1 AL 31 DE MARZO DE 1999

UNIDAD : µg/m³N

D/H	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA		
1-mar	+	+	+	+	+	+	+	+	+	117.8	189.9	94.1	103.2	+	0.0	37.9	31.4	113.7	47.1	115.0	103.2	84.9	47.1	+	188.9	94.1	128.7		
2-mar	+	+	+	+	+	+	+	+	+	74.5	15.7	216.8	115.0	28.1	94.1	0.0	37.9	31.4	113.7	47.1	115.0	103.2	84.9	47.1	+	216.8	0.0	70.5	
3-mar	416.7	418.3	433.7	448.0	487.8	491.2	499.0	266.5	116.3	74.5	128.0	101.9	96.7	113.7	56.8	87.5	158.1	116.3	87.5	61.4	17.0	10.5	5.2	7.9	+	401.0	1.3	80.0	
4-mar	11.8	14.4	32.7	31.4	9.2	17.0	36.6	53.6	48.4	61.4	81.0	88.2	57.5	73.2	84.9	100.8	116.3	96.7	73.2	41.8	31.4	15.7	13.1	15.7	+	498.0	5.2	195.1	
5-mar	32.7	44.4	32.7	47.0	58.8	62.7	67.9	109.7	62.7	78.4	152.8	48.4	45.7	27.5	101.9	+	158.4	130.7	169.8	108.8	54.9	18.3	23.6	169.8	18.3	+	168.8	18.3	74.5
6-mar	40.5	54.9	88.3	26.2	87.8	74.5	84.8	111.0	112.4	168.5	73.2	83.6	54.9	23.6	9.2	14.4	1.3	43.1	71.9	27.5	4.0	11.8	9.2	15.7	+	168.5	1.3	53.0	
7-mar	20.9	36.6	22.2	31.4	13.1	31.4	69.3	54.9	34.0	57.5	65.3	180.3	295.2	142.4	142.4	107.1	82.3	+	35.3	15.7	1.3	5.3	+	295.2	1.3	+	68.7		5.3
8-mar	14.4	17.0	28.8	40.5	32.7	37.9	30.1	60.1	28.7	22.2	5.3	39.2	35.3	21.0	17.0	139.8	115.0	150.2	128.0	111.0	83.6	15.7	18.3	9.2	+	150.2	5.3	50.0	
9-mar	28.8	44.5	40.5	18.3	+	+	39.2	47.0	34.0	16.3	81.0	139.8	53.6	49.6	39.2	54.8	17.0	28.1	30.1	11.8	5.2	15.7	6.6	10.5	+	139.8	5.2	36.9	
10-mar	15.7	30.1	70.6	80.1	7.8	20.9	24.8	35.3	43.1	18.3	44.4	53.6	32.7	57.5	24.8	37.9	28.7	103.2	65.3	44.4	53.6	59.8	48.3	27.5	18.3	+	103.2	13.1	42.3
11-mar	23.5	11.8	13.1	7.8	7.8	20.9	24.8	35.3	43.1	27.5	28.7	34.0	19.6	35.3	23.6	34.0	44.4	75.8	101.9	142.4	126.7	146.3	122.8	71.9	41.8	+	146.3	7.8	52.3
12-mar	31.4	15.7	47.0	44.4	61.4	41.8	53.6	75.8	148.9	155.4	154.2	88.2	91.0	37.9	13.1	0.0	17.0	11.8	1.3	5.2	17.0	19.6	5.2	15.7	+	155.4	0.0	53.0	
13-mar	18.6	27.5	44.4	75.8	24.8	47.0	61.4	77.1	49.7	32.7	54.9	43.1	117.8	169.8	142.4	151.5	141.1	98.0	78.4	51.0	86.2	58.2	18.3	19.6	+	169.8	18.3	70.3	
14-mar	48.4	57.5	40.5	52.3	143.7	103.2	111.0	116.3	81.0	64.0	80.1	41.8	31.4	91.5	60.1	79.7	30.1	20.9	20.9	32.7	48.3	17.0	22.2	13.1	+	143.7	13.1	59.0	
15-mar	5.2	17.0	31.4	35.3	45.7	39.2	51.0	62.7	113.7	134.5	120.2	128.3	100.8	47.0	54.9	43.1	27.5	23.5	45.7	80.1	28.7	13.1	18.3	22.2	13.1	+	134.5	5.2	52.8
16-mar	30.1	24.8	20.9	20.9	14.4	14.4	36.6	22.2	18.3	13.1	15.7	32.7	49.6	113.6	143.7	117.6	71.9	28.1	44.4	101.9	75.8	128.0	27.5	75.8	+	143.7	13.1	51.8	
17-mar	143.7	69.2	87.5	116.3	77.1	58.8	41.8	48.3	23.5	95.4	67.9	92.8	90.1	35.3	47.0	43.1	28.1	22.2	95.4	73.2	31.4	19.6	30.1	40.5	22.2	+	103.2	9.2	51.9
18-mar	66.8	61.4	95.4	58.8	103.2	30.1	47.0	78.4	101.9	26.1	48.4	69.3	78.4	34.0	19.6	20.9	9.2	31.4	98.0	40.5	49.6	36.8	18.3	22.2	103.2	+	103.2	9.2	51.9
19-mar	99.3	86.2	83.8	44.4	54.9	32.7	30.1	47.0	61.4	35.3	66.7	48.4	11.8	22.3	41.9	47.1	26.2	18.3	13.1	35.3	+	+	128.0	84.1	128.0	11.8	+	51.2	
20-mar	61.4	67.9	41.8	31.4	35.3	44.4	47.0	60.1	62.7	75.8	78.4	81.0	122.8	82.3	53.6	41.8	41.8	26.1	101.9	15.7	19.6	28.8	44.4	36.8	122.8	15.7	54.3	+	56.2
21-mar	68.6	133.2	117.8	152.8	130.6	101.9	60.1	41.8	64.0	27.5	34.0	19.6	54.9	61.4	85.3	41.8	15.7	7.9	9.2	18.3	40.5	48.4	22.2	15.7	152.8	7.9	56.2	+	56.2
22-mar	30.1	44.4	49.7	39.2	31.4	48.4	34.0	18.3	9.2	7.8	17.0	24.8	51.0	37.9	47.0	82.7	75.8	84.9	83.6	98.0	58.8	48.4	28.1	30.1	98.0	7.8	44.1	+	44.1
23-mar	41.8	44.5	54.9	44.5	28.8	34.0	3.9	3.9	3.9	2.7	60.1	95.4	108.4	88.9	78.4	87.5	56.8	74.5	60.1	45.8	92.8	115.0	56.2	51.0	115.0	2.7	55.8	+	55.8
24-mar	75.8	113.7	24.8	56.2	40.5	31.4	41.8	40.5	66.7	98.0	90.1	78.4	60.1	40.5	54.9	24.8	5.3	14.4	7.9	2.7	23.6	18.3	9.2	5.3	113.7	2.7	42.7	+	42.7
25-mar	1.3	10.5	14.4	37.9	40.5	54.9	44.5	32.7	44.4	85.3	92.8	126.7	101.9	109.8	118.9	94.1	56.2	54.9	45.8	28.2	11.8	4.0	1.3	11.8	126.7	1.3	50.1	+	50.1
26-mar	137.2	129.3	113.7	149.9	137.2	138.5	135.9	124.1	136.5	126.0	113.7	146.3	128.0	163.3	148.3	147.8	154.2	156.8	135.9	169.8	142.4	124.1	130.6	98.7	169.8	98.7	136.9	+	136.9
27-mar	7.8	11.8	13.1	7.8	11.8	14.4	2.6	2.6	2.6	7.8	11.8	10.5	7.8	130.7	82.3	78.7	23.5	10.5	11.8	7.8	7.8	7.8	7.8	7.9	130.7	2.6	20.4	+	20.4
28-mar	48.7	52.9	53.9	54.8	58.7	57.0	58.4	60.8	62.5	50.5	133.2	130.9	187.5	78.4	88.5	78.3	69.9	70.9	68.9	60.6	53.4	43.7	7.8	7.9	167.5	29.2	68.9	+	68.9
MAXIMA	416.7	418.3	433.7	448.0	487.8	491.2	499.0	266.5	116.3	74.5	128.0	101.9	96.7	113.7	56.8	87.5	158.4	130.7	169.8	108.8	54.9	18.3	23.6	169.8	18.3	+	401.0		401.0
MINIMA	1.3	10.5	13.1	7.8	9.2	14.4	2.6	2.6	1.3	2.7	5.3	10.5	7.8	21.0	0.0	0.0	1.3	7.9	1.3	2.7	4.0	1.3	1.3	1.3	5.3				
MEDIA	57.9	65.5	83.1	64.8	69.1	65.9	63.7	60.9	59.9	80.1	83.1	74.6	78.8	69.9	66.6	66.1	58.4	60.6	61.6	56.2	50.9	41.1	42.5	41.2					

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 Código ausencia de datos por calibración del equipo
 Código ausencia de datos por mantenimiento del equipo
 Código ausencia de datos por falta de energía eléctrica temporalmente
 N° de datos válidos
 Recuperación de datos
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Nota Importante al reverso

SEB-10220

MONITOREO DE CALIDAD DEL AIRE

TABLA 3.

LUGAR : CUERPO DE BOMBEROS VARIABLE : ANHIDRIDO SULFUROSO (SO₂)

PERIODO : 1 AL 28 DE FEBRERO DE 1999 UNIDAD : µg/m³N

ANO 1999	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA	
1-feb	154.1	141.1	229.9	190.7	172.4	284.7	248.2	180.2	201.1	101.9	156.7	182.9	232.5	321.3	287.3	282.1	148.9	136.4	135.8	193.3	141.1	104.5	128.0	108.7	321.3	101.9	186.1	
2-feb	216.8	117.5	78.4	120.2	117.5	175.0	203.8	256.0	175.0	31.3	C	C	C	214.2	26.1	96.7	88.8	253.4	120.2	256.0	232.5	195.9	120.2	13.1	256.0	13.1	148.0	
3-feb	88.8	88.8	60.1	52.2	52.2	78.4	13.1	15.7	23.5	65.3	78.4	117.5	188.1	195.9	227.3	230.8	266.4	321.3	227.3	245.5	146.3	36.6	13.1	23.5	321.3	13.1	119.8	
4-feb	54.9	60.1	88.8	117.5	156.7	203.8	219.4	169.8	232.5	130.6	117.5	146.3	175.0	227.3	117.5	175.0	316.1	232.5	175.0	122.8	34.0	20.9	10.4	15.7	316.1	10.4	138.3	
5-feb	23.5	28.7	85.3	62.7	18.3	34.0	73.1	88.8	78.4	91.4	148.9	172.4	114.9	146.3	169.8	201.1	232.5	193.3	146.3	83.6	62.7	31.3	26.1	31.3	232.5	18.3	96.9	
6-feb	65.3	88.8	65.3	94.0	117.5	125.4	135.8	219.4	120.2	151.5	177.6	78.4	91.4	54.9	229.9	284.7	292.6	313.5	269.1	347.4	227.3	117.5	44.4	54.9	347.4	44.4	156.9	
7-feb	88.8	117.5	146.3	60.1	182.9	156.7	177.6	222.0	206.4	235.1	146.3	175.0	117.5	54.9	26.1	36.6	10.4	94.0	151.5	62.7	15.7	31.3	26.1	39.2	235.1	10.4	107.5	
8-feb	49.6	81.0	52.2	70.5	34.0	70.5	146.3	117.5	75.8	122.8	130.6	164.6	222.0	271.7	292.6	222.0	172.4	193.3	125.4	70.5	31.3	10.4	18.3	10.4	292.6	10.4	114.8	
9-feb	28.7	34.0	65.3	88.8	73.1	83.6	67.9	120.2	31.3	39.2	10.4	15.7	39.2	54.9	60.1	266.4	256.0	308.2	263.8	222.0	167.2	39.2	44.4	26.1	308.2	10.4	100.2	
10-feb	55.3	96.7	88.8	44.4	18.3	54.9	78.4	88.8	62.7	31.3	148.9	274.3	101.9	94.0	78.4	109.7	34.0	52.2	60.1	18.3	10.4	31.3	13.1	20.9	274.3	10.4	69.9	
11-feb	31.3	60.1	141.1	120.2	96.7	54.9	67.9	20.9	31.3	52.2	75.8	52.2	88.8	31.3	57.5	31.3	180.2	125.4	83.6	101.9	112.3	91.4	54.9	31.3	180.2	20.9	74.8	
12-feb	41.8	18.3	20.9	10.4	36.6	44.4	70.5	81.0	54.9	52.2	62.7	20.9	26.1	34.0	62.7	83.6	146.3	198.5	279.5	248.2	292.6	240.3	143.7	83.6	292.6	10.4	98.1	
13-feb	62.7	31.3	88.8	83.6	60.1	73.1	36.6	47.0	65.3	109.7	203.8	62.7	26.1	75.8	91.4	44.4	70.5	52.2	62.7	28.7	39.2	13.1	10.4	47.0	203.8	10.4	61.9	
14-feb	96.7	141.1	196.8	83.6	117.5	78.4	107.1	146.3	284.7	222.0	206.4	109.7	130.6	88.8	52.2	26.1	34.0	23.5	18.3	10.4	28.7	39.2	10.4	31.3	284.7	10.4	95.2	
15-feb	60.1	54.9	88.8	146.3	44.4	88.8	117.5	148.9	99.3	60.1	104.5	81.0	198.5	308.2	279.5	303.0	276.9	195.9	156.7	96.7	172.4	112.3	31.3	39.2	308.2	31.3	136.1	
16-feb	96.7	109.7	75.8	104.5	282.1	206.4	222.0	253.4	162.0	128.0	175.0	78.4	57.5	44.4	26.1	20.9	10.4	28.7	36.6	60.1	91.4	28.7	44.4	20.9	282.1	10.4	98.5	
17-feb	10.4	34.0	62.7	70.5	91.4	78.4	96.7	120.2	227.3	263.8	235.1	245.5	188.1	88.8	104.5	81.0	54.9	47.0	91.4	120.2	52.2	20.9	31.3	39.2	263.8	10.4	102.3	
18-feb	60.1	44.4	36.6	41.8	28.7	23.5	67.9	39.2	31.3	20.9	26.1	60.1	94.0	222.0	282.1	235.1	143.7	52.2	88.8	198.5	146.3	256.0	54.9	146.3	282.1	20.9	100.0	
19-feb	282.1	133.2	175.0	232.5	148.9	112.3	78.4	91.4	28.7	88.8	52.2	122.8	154.1	57.5	88.8	81.0	52.2	44.4	190.7	141.1	62.7	39.2	60.1	81.0	282.1	28.7	108.3	
20-feb	133.2	122.8	185.5	117.5	206.4	60.1	88.8	151.5	198.5	52.2	83.6	120.2	143.7	54.9	26.1	36.6	13.1	62.7	190.7	75.8	94.0	67.9	31.3	39.2	206.4	13.1	98.2	
21-feb	193.3	167.2	162.0	83.6	104.5	60.1	54.9	88.8	117.5	44.4	57.5	20.9	10.4	13.1	34.0	62.7	39.2	31.3	20.9	65.3	75.8	151.5	256.0	188.1	256.0	10.4	87.6	
22-feb	122.8	135.8	83.6	62.7	70.5	88.8	94.0	120.2	125.4	151.5	156.7	162.0	232.5	146.3	88.8	78.4	83.6	52.2	203.8	31.3	39.2	57.5	88.8	73.1	232.5	31.3	106.2	
23-feb	133.2	266.4	235.1	305.6	261.2	203.8	120.2	83.6	128.0	54.9	67.9	31.3	73.1	96.7	117.5	70.5	31.3	15.7	18.3	36.6	81.0	96.7	44.4	31.3	305.6	15.7	108.5	
24-feb	60.1	88.8	99.3	78.4	62.7	96.7	67.9	36.6	18.3	10.4	15.7	31.3	88.8	62.7	94.0	125.4	151.5	169.8	167.2	195.9	117.5	96.7	52.2	60.1	195.9	10.4	85.3	
25-feb	154.1	193.3	65.3	177.6	232.5	245.5	279.5	198.5	122.8	60.1	31.3	96.7	70.5	81.0	148.9	135.8	128.0	94.0	65.3	39.2	91.4	70.5	109.7	70.5	279.5	31.3	123.4	
26-feb	91.4	96.7	117.5	96.7	65.3	75.8	0.0	0.0	0.0	13.1	128.0	198.5	242.9	203.8	156.7	175.0	117.5	156.7	128.0	99.3	193.3	237.7	120.2	109.7	242.9	0.0	117.7	
27-feb	159.3	235.1	57.5	120.2	88.8	70.5	91.4	88.8	141.1	203.8	180.2	151.5	114.9	94.0	91.4	44.4	18.3	36.6	23.5	13.1	54.9	44.4	26.1	18.3	235.1	13.1	90.3	
28-feb	10.4	28.7	36.6	83.6	88.8	117.5	96.7	65.3	88.8	94.0	122.8	146.3	177.6	208.4	245.5	195.9	120.2	117.5	99.3	60.1	31.3	15.7	10.4	31.3	245.5	10.4	95.4	
MAXIMA	282.1	266.4	235.1	305.6	282.1	284.7	279.5	256.0	284.7	263.8	235.1	274.3	242.9	321.3	292.6	303.0	316.1	321.3	279.5	347.4	292.6	256.0	256.0	188.1				
MINIMA	10.4	18.3	20.9	10.4	18.3	23.5	0.0	0.0	0.0	10.4	10.4	15.7	10.4	13.1	26.1	20.9	10.4	15.7	18.3	10.4	10.4	10.4	10.4	10.4				
MEDIA	94.1	100.6	102.5	104.3	108.2	108.8	111.5	116.4	111.9	95.8	114.8	115.5	126.0	126.6	127.3	134.2	124.6	128.7	128.6	115.9	101.6	82.1	58.0	53.1				

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 Código ausencia de datos por calibración del equipo
 Código ausencia de datos por falta de energía eléctrica temporalmente
 N° de datos validos
 Recuperación de datos

SEB-10207

MONITOREO DE CALIDAD DEL AIRE

TABLA 3.

VARIABLE : ANHIDRIDO SULFUROSO (SO₂)

LUGAR : CUERPO DE BOMBEROS

PERIODO : 1 AL 31 DE ENERO DE 1999

UNIDAD : µg/m³

ANO 1998	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA	
1-ene	6.3	17.0	11.8	14.1	35.0	80.1	114.9	144.7	146.8	64.3	60.1	32.9	12.8	20.4	15.7	11.8	11.8	7.8	11.8	15.7	23.2	6.3	10.4	44.1	146.8	6.3	37.5	
2-ene	35.0	8.4	20.4	20.9	20.4	17.5	20.4	11.8	17.5	25.6	32.1	37.9	31.9	61.4	84.0	40.8	23.2	25.6	17.0	17.0	20.4	15.7	12.3	84.0	84.0	8.4	25.4	
3-ene	28.6	35.5	38.4	25.6	17.5	23.2	18.3	36.6	68.7	57.7	84.8	159.6	84.8	38.9	26.6	23.2	25.1	17.5	25.6	31.6	6.3	50.9	70.3	9.9	159.6	6.3	41.8	
4-ene	6.3	31.3	38.4	28.1	34.0	52.2	20.9	18.3	23.0	17.5	17.8	19.1	15.7	18.3	23.2	31.3	179.2	216.8	133.0	189.4	148.4	52.5	251.3	204.8	251.3	6.3	73.7	
5-ene	186.5	329.1	374.9	308.1	780.3	95.6	320.8	389.2	32.4	38.1	25.3	17.5	14.8	117.5	92.7	95.9	316.9	306.1	70.3	88.8	20.4	6.3	10.4	6.3	780.3	6.3	168.5	
6-ene	25.6	89.3	353.6	191.5	216.8	148.9	175.0	299.9	408.3	421.1	84.0	88.8	91.4	60.1	41.8	85.4	518.5	71.1	216.8	175.0	32.4	25.6	25.6	51.7	518.5	25.6	162.0	
7-ene	83.3	72.8	90.1	117.5	112.3	44.7	70.3	263.6	146.3	61.1	235.6	25.3	17.0	12.0	124.3	288.1	427.4	460.0	480.9	348.2	108.4	90.1	27.2	44.7	480.9	12.0	156.3	
8-ene	48.3	301.7	485.1	488.0	491.1	35.0	90.1	55.6	44.7	48.8	43.6	48.6	35.0	23.2	17.5	35.0	299.1	252.3	79.9	137.7	236.8	140.0	71.1	454.8	454.8	17.5	108.2	
9-ene	45.7	184.6	105.5	99.5	112.6	223.3	60.1	84.8	86.9	14.6	11.8	40.5	158.3	97.2	216.8	115.5	70.3	223.9	430.5	85.2	127.5	63.0	42.8	39.4	430.5	11.8	113.8	
10-ene	22.7	25.8	44.7	89.3	147.1	34.7	13.3	89.7	236.1	185.2	88.8	20.4	6.3	11.0	167.2	209.8	233.3	39.2	117.8	106.3	255.2	74.7	37.6	185.2	255.2	6.3	100.9	
11-ene	255.2	31.3	23.5	25.8	14.1	8.9	32.4	229.9	102.4	36.6	75.2	34.5	22.7	31.6	26.1	81.8	76.8	51.7	75.2	32.9	17.5	11.2	18.3	35.0	255.2	8.9	56.3	
12-ene	52.5	55.8	28.5	32.7	172.1	102.4	197.7	51.7	180.2	152.0	46.8	23.5	11.8	11.8	60.1	47.8	17.5	35.8	26.6	36.8	39.4	22.7	10.4	0.0	197.7	0.0	59.0	
13-ene	17.0	44.7	72.4	89.3	115.5	88.8	108.4	99.3	34.0	20.1	44.7	63.7	20.4	17.5	6.3	12.0	8.6	23.2	31.3	8.9	16.2	13.1	26.1	44.7	115.5	6.3	42.8	
14-ene	20.9	18.3	14.1	15.7	14.6	197.7	89.3	57.5	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	115.5	6.3	42.8	
15-ene	20.4	20.4	12.0	31.9	86.2	88.8	82.7	37.9	36.8	40.5	23.2	22.7	16.7	13.1	12.8	6.3	12.8	32.4	141.1	117.5	52.2	19.1	14.6	22.5	141.1	6.3	39.3	
16-ene	13.1	17.5	15.7	12.0	18.3	14.6	85.0	78.4	71.3	83.6	224.9	224.6	156.7	242.4	117.5	92.2	223.6	191.5	92.5	82.7	39.2	17.5	17.0	10.4	242.4	10.4	87.8	
17-ene	19.1	20.4	44.4	65.3	35.3	91.4	90.1	69.7	37.6	140.5	255.2	233.8	204.8	90.1	118.1	54.9	85.3	59.3	199.3	144.7	75.0	32.4	40.2	38.4	255.2	19.1	92.7	
18-ene	48.8	45.2	20.9	36.6	62.7	87.2	16.7	12.8	32.4	32.1	62.7	64.3	186.0	141.8	64.0	60.1	62.7	108.4	153.9	53.8	29.0	19.1	22.2	17.0	186.0	12.8	103.6	
19-ene	49.9	11.8	19.1	14.4	11.0	31.3	89.3	51.7	53.3	13.8	14.6	34.0	34.5	63.0	148.9	182.1	120.7	58.8	95.8	39.7	13.1	19.1	15.4	41.5	182.1	11.0	48.9	
20-ene	44.1	32.1	98.2	42.6	56.9	98.2	34.0	44.7	18.3	27.4	180.2	32.4	25.3	17.0	27.4	10.4	6.8	41.0	14.1	38.1	37.4	17.8	8.1	20.4	180.2	6.8	40.5	
21-ene	23.8	19.6	26.4	8.4	11.0	31.9	11.2	16.7	18.6	20.4	32.1	60.1	66.1	80.1	81.4	95.8	35.0	23.2	18.9	36.6	18.0	22.5	8.1	17.0	95.8	8.1	36.7	
22-ene	13.1	16.2	36.0	17.5	23.0	48.8	47.8	36.0	19.8	32.7	64.0	53.6	45.7	60.1	81.4	95.8	35.0	23.2	18.9	36.6	18.0	22.5	8.1	17.0	95.8	8.1	36.7	
23-ene	30.8	7.3	15.7	28.2	72.9	65.8	80.5	148.8	210.5	121.2	274.3	148.3	87.5	59.8	34.0	36.0	29.8	95.9	74.7	82.8	39.7	42.8	17.0	274.3	274.3	7.3	81.1	
24-ene	20.4	38.4	43.1	17.5	22.7	65.3	36.6	55.4	48.1	57.5	44.9	26.1	23.2	17.5	14.8	17.5	34.5	43.1	15.7	8.6	13.8	23.0	12.3	16.7	274.3	7.3	81.1	
25-ene	31.3	14.8	42.3	53.8	128.5	32.7	87.5	38.4	64.0	43.9	17.8	23.2	15.7	19.6	23.0	14.8	37.1	20.8	31.9	38.7	81.6	25.1	17.8	18.0	128.5	14.8	37.6	
26-ene	27.2	40.5	32.7	20.4	42.3	21.9	19.1	25.6	11.8	45.2	48.8	56.2	27.4	25.6	15.7	20.4	12.0	20.6	30.3	44.7	96.4	27.4	13.1	20.4	96.4	11.8	31.0	
27-ene	28.2	35.3	14.1	21.9	24.6	14.6	20.4	38.4	31.3	64.0	66.9	43.9	35.0	40.8	54.9	56.7	20.9	23.5	31.3	30.3	13.8	17.2	20.6	12.8	66.9	12.8	31.7	
28-ene	11.2	25.6	6.3	30.8	64.0	58.5	62.7	39.2	33.2	17.5	17.0	26.1	34.2	32.9	41.5	17.8	10.4	17.5	17.0	31.3	36.8	30.6	18.3	15.4	64.0	6.3	28.0	
29-ene	14.9	15.4	6.3	28.5	42.8	35.0	33.4	23.2	39.7	28.7	34.2	15.4	23.8	28.7	43.1	23.2	20.4	17.5	28.8	29.0	15.4	25.3	6.8	5.7	43.1	5.7	24.5	
30-ene	255.2	329.1	485.1	486.0	780.3	382.7	358.4	482.9	408.3	421.1	274.3	274.3	204.8	242.4	236.7	344.5	518.5	460.0	480.9	348.2	275.3	140.0	251.3	454.8	454.8	454.8	454.8	
MAXIMA	8.3	7.3	6.3	8.4	11.0	8.9	11.2	11.8	11.8	11.5	11.8	14.6	6.3	11.0	6.3	6.3	6.8	7.8	11.8	8.6	6.3	6.3	6.8	0.0	6.3	6.3	6.8	
MINIMA	42.0	54.6	73.2	86.8	99.9	77.2	80.9	97.5	80.9	87.7	78.7	70.4	80.3	56.2	71.5	73.8	107.8	95.7	93.3	81.4	66.8	95.2	31.4	47.6	95.2	31.4	47.6	
MEDIA																												

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 Código ausencia de datos por calibración del equipo
 Código ausencia de datos por falta de energía eléctrica temporalmente
 N° de datos válidos
 Recuperación de datos

Nota importante al reverso

SEB-10200

MONITOREO DE CALIDAD DEL AIRE

TABLA 3.

VARIABLE : ANHIDRIDO SULFUROSO (SO₂)

LUGAR : CUERPO DE BOMBOS

PERIODO : 1 AL 31 DE DICIEMBRE DE 1998

UNIDAD : µg/m³N

ANO 1998	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA
1-dic	10.4	8.4	8.9	11.8	8.1	10.4	20.4	23.2	18.0	17.5	20.4	C	C	C	7.3	18.3	14.6	14.6	8.9	14.1	20.4	8.9	9.1	5.7	25.6	5.7	13.6
2-dic	9.4	13.1	8.9	12.8	6.3	8.9	14.4	10.4	12.8	22.7	25.9	19.1	6.3	16.5	17.8	20.6	25.6	20.4	6.3	11.8	7.8	10.4	6.0	6.0	25.9	6.0	13.3
3-dic	11.8	14.4	14.6	13.1	15.7	13.1	17.0	20.4	14.6	28.1	26.6	25.6	19.1	23.2	9.7	23.2	23.5	17.8	20.4	6.8	17.2	14.4	8.9	6.0	26.6	6.0	16.8
4-dic	0.0	0.0	8.9	6.3	6.3	14.6	20.4	23.2	7.8	44.7	19.1	11.8	6.3	12.8	7.6	6.3	8.1	6.3	15.7	13.1	32.4	52.2	26.6	11.2	52.2	0.0	15.1
5-dic	12.0	17.5	21.9	24.8	31.3	26.1	34.5	52.5	32.1	37.9	20.9	25.1	14.6	17.2	61.1	19.1	25.6	12.8	20.4	14.6	32.4	12.8	14.6	11.8	17.2	11.8	31.2
6-dic	14.6	20.4	8.9	26.6	34.5	20.4	23.2	23.5	61.1	90.1	32.1	14.6	55.6	6.3	17.5	12.8	23.2	11.8	10.4	13.1	10.4	10.4	10.4	11.8	90.1	6.3	23.5
7-dic	14.6	13.1	32.1	36.6	32.7	23.2	18.3	20.9	24.8	15.7	121.2	61.1	25.6	31.3	34.0	229.6	114.9	17.5	20.9	22.5	20.9	31.3	15.7	11.8	229.6	11.8	41.3
8-dic	14.6	15.7	18.3	18.3	10.4	10.4	10.4	17.5	20.9	22.7	15.7	31.3	26.9	60.1	242.4	64.5	32.9	23.2	15.7	19.9	14.6	18.3	20.9	19.6	242.4	10.4	31.9
9-dic	17.5	31.6	6.3	11.8	15.7	15.7	20.4	14.1	23.5	44.4	35.0	6.3	268.0	114.9	90.4	31.3	14.6	15.7	78.4	31.3	25.6	14.1	15.7	18.1	268.0	6.3	40.1
10-dic	12.8	17.2	14.6	18.3	22.5	20.4	6.3	32.1	27.7	64.0	69.7	46.5	32.1	25.6	17.0	19.9	11.8	17.0	72.1	89.3	108.4	38.4	31.9	6.3	108.4	6.3	34.2
11-dic	19.9	20.4	25.6	43.6	9.1	7.8	11.8	19.1	50.9	91.4	299.9	370.9	119.1	19.1	25.6	37.6	26.1	32.4	90.1	248.7	153.1	216.8	7.3	8.9	370.9	7.3	81.5
12-dic	10.4	13.1	8.9	10.4	14.6	11.2	6.3	12.8	19.1	19.1	6.3	14.1	12.8	31.3	35.3	31.3	20.4	25.1	12.8	8.9	11.8	17.0	10.4	7.8	35.3	6.3	15.5
13-dic	8.9	10.4	13.1	8.9	11.2	13.1	11.2	34.7	54.9	52.2	58.3	34.0	36.6	20.9	17.5	23.2	24.8	62.7	299.9	117.5	60.1	32.4	15.7	37.1	299.9	8.9	44.1
14-dic	23.2	50.9	70.3	32.4	18.9	22.5	6.3	31.9	70.3	32.4	70.3	25.6	19.9	35.8	33.4	20.4	14.6	17.2	20.4	12.8	0.0	0.0	11.8	8.9	70.3	0.0	27.1
15-dic	11.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	12.8	14.6	37.6	31.3	58.3	32.4	+	+	22.5	13.1	11.8	11.8	58.3	0.0	12.7
16-dic	17.5	13.1	14.6	14.6	13.8	8.9	22.7	+	+	31.9	19.1	20.6	35.5	31.9	134.0	96.1	61.4	28.7	23.2	14.6	10.4	10.4	11.8	134.0	8.9	29.8	
17-dic	8.9	11.5	12.8	6.3	31.3	32.4	89.9	114.9	60.1	41.8	57.5	76.5	19.1	6.3	17.5	14.4	15.7	10.4	13.1	14.4	17.0	10.4	6.3	12.5	114.9	6.3	29.2
18-dic	11.5	14.6	11.8	20.4	17.5	31.6	37.9	58.5	44.7	57.5	89.3	61.1	45.2	51.7	57.5	19.1	12.8	8.9	8.9	25.6	70.3	19.3	11.5	8.9	89.3	8.9	33.2
19-dic	14.6	20.4	23.2	20.4	40.8	31.3	60.1	83.6	88.8	44.7	38.9	20.9	24.6	31.1	31.3	49.4	93.0	504.7	453.0	153.1	117.5	31.3	23.2	11.8	504.7	11.8	83.8
20-dic	18.3	14.6	20.4	22.7	31.9	34.5	37.4	62.7	53.0	19.1	12.8	31.3	31.9	45.5	57.5	34.0	23.2	50.9	70.3	34.0	23.2	25.6	14.1	8.4	70.3	8.4	32.4
21-dic	14.1	20.4	14.6	25.3	23.5	38.6	28.7	34.0	17.5	14.6	11.8	20.4	38.4	68.3	60.1	35.0	22.7	17.0	6.3	11.8	8.9	16.7	6.3	20.9	66.3	6.3	23.8
22-dic	19.9	6.3	14.6	19.9	20.9	22.7	25.3	27.7	34.0	34.5	23.2	20.4	31.3	58.5	82.8	248.7	140.3	184.9	184.9	25.6	17.5	14.6	10.4	13.1	248.7	6.3	53.4
23-dic	15.7	17.5	35.0	13.1	8.9	11.5	10.4	13.8	25.9	33.4	19.1	32.4	61.1	63.7	31.9	64.0	32.9	13.1	8.9	13.1	18.6	22.2	14.6	14.1	64.0	8.9	24.8
24-dic	18.9	20.4	27.4	35.3	25.1	18.3	20.4	32.4	61.4	37.1	20.6	22.2	51.5	61.1	37.6	32.4	8.4	8.4	10.7	13.8	11.8	17.5	11.2	5.2	61.4	5.2	25.4
25-dic	8.8	0.0	0.0	10.4	0.0	8.4	8.9	6.3	12.8	44.7	60.1	31.9	38.9	45.2	24.3	12.8	19.1	19.1	11.2	0.0	11.0	10.4	7.8	60.1	0.0	16.3	
26-dic	17.0	24.8	23.5	17.5	25.3	22.7	31.3	60.1	35.0	31.9	60.1	63.7	127.5	12.8	32.1	36.6	31.3	32.4	17.2	19.9	20.4	17.0	11.2	14.6	127.5	11.2	32.8
27-dic	11.5	11.8	7.8	14.4	17.5	34.0	37.4	40.0	63.5	+	19.1	12.8	11.5	43.1	38.4	70.3	35.0	25.1	14.6	17.0	8.9	17.0	14.1	18.3	70.3	7.8	25.9
28-dic	13.1	19.6	20.4	18.3	34.0	37.6	36.6	28.7	14.1	12.8	25.6	44.7	38.4	84.6	94.0	37.9	11.2	14.1	22.7	17.5	20.4	20.4	17.5	19.9	94.0	11.2	29.3
29-dic	11.2	11.8	15.7	8.9	31.3	28.2	17.0	22.7	6.3	38.4	127.5	76.5	140.3	127.5	70.3	61.1	40.8	17.0	8.9	12.3	10.4	10.4	11.5	140.3	6.3	40.9	
30-dic	17.0	50.9	8.9	14.6	17.0	22.7	23.5	25.1	34.0	32.4	35.3	89.3	338.0	382.7	92.5	91.4	64.0	25.6	70.5	108.4	197.7	32.4	19.6	8.9	382.7	8.9	75.1
31-dic	11.8	17.0	17.2	19.6	22.7	19.9	25.6	38.9	60.1	32.1	60.9	89.9	61.1	88.9	70.3	383.5	112.3	90.4	112.3	51.5	45.5	15.7	70.3	14.1	383.5	11.8	66.0
MAXIMA	23.2	50.9	70.3	43.6	40.8	37.6	89.9	114.9	88.8	91.4	299.9	370.9	338.0	382.7	242.4	383.5	140.3	504.7	453.0	248.7	197.7	216.8	70.3	37.1	453.0	11.8	83.8
MINIMA	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	6.3	6.3	7.3	6.3	8.1	6.3	6.3	0.0	0.0	0.0	6.0	5.2	0.0	0.0	0.0
MEDIA	13.6	16.8	17.1	18.0	19.4	20.0	23.7	32.3	34.9	36.4	48.9	46.0	54.1	58.6	49.7	62.0	38.3	46.3	57.0	38.2	36.9	25.2	15.4	12.4	38.2	11.8	25.9

Código ausencia de datos por calibración del equipo : C
 Código ausencia de datos por falta de energía eléctrica temporalmente : +
 N° de datos válidos : 735
 Recuperación de datos : 100 %

SEB-10184

MONITOREO DE CALIDAD DEL AIRE

TABLA 3.

LUGAR : CUERPO DE BOMBEROS VARIABLE : ANHIDRIDO SULFUROSO (SO₂)

PERIODO : 1 AL 30 DE NOVIEMBRE DE 1998 UNIDAD : µg/m³N

ANO 1998	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA			
1-nov	12.8	6.3	6.3	12.8	14.9	6.3	16.7	19.3	6.3	184.9	50.9	31.9	44.7	12.8	15.7	18.3	20.9	25.9	11.8	9.7	6.3	19.1	184.9	6.3	24.1	184.9	6.3	19.1		
2-nov	19.1	6.3	8.9	6.3	12.8	19.1	12.8	6.3	14.4	6.3	70.3	76.5	19.1	12.8	0.0	17.0	16.5	11.8	14.9	6.0	11.2	8.4	7.1	5.7	76.5	0.0	16.2	76.5	0.0	11.7
3-nov	8.1	6.3	11.8	6.3	10.4	10.4	20.9	18.3	25.6	14.6	19.1	6.3	12.8	12.8	6.3	11.2	13.8	11.8	6.0	14.6	19.9	6.3	0.0	6.3	25.6	0.0	11.7	25.6	0.0	11.7
4-nov	6.3	10.4	18.8	17.8	25.1	6.0	10.7	6.3	19.1	44.7	146.8	89.3	89.3	19.1	18.1	57.5	70.3	31.9	6.3	25.6	17.8	8.9	6.3	8.9	146.8	6.0	31.7	146.8	6.0	31.7
5-nov	6.3	11.0	12.8	12.8	6.3	11.8	15.7	18.3	20.9	15.7	12.8	89.3	89.3	76.5	102.1	76.5	12.8	20.4	20.9	20.6	38.4	31.9	12.8	12.8	102.1	6.3	31.2	102.1	6.3	31.2
6-nov	57.5	25.6	19.1	6.3	14.4	6.3	57.5	57.5	12.8	12.8	127.5	31.9	44.7	19.1	8.9	11.8	17.5	11.8	0.0	0.0	7.8	6.0	6.0	6.0	127.5	0.0	23.4	127.5	0.0	23.4
7-nov	8.9	8.6	10.7	5.2	11.8	6.3	12.8	6.3	6.3	102.1	108.4	63.7	6.3	8.9	11.0	14.6	8.9	11.8	6.0	6.3	6.3	6.0	6.0	6.0	108.4	0.0	18.0	108.4	0.0	18.0
8-nov	0.0	0.0	10.4	11.5	11.8	17.5	17.5	8.9	13.1	14.6	13.1	25.6	25.6	17.5	17.8	15.7	15.7	13.1	17.2	11.8	8.9	6.0	5.7	11.8	25.6	0.0	12.9	25.6	0.0	12.9
9-nov	17.5	15.7	11.8	14.6	15.7	14.6	10.4	22.7	17.0	17.5	14.6	32.4	89.3	38.4	19.1	32.1	26.1	31.3	17.5	20.9	20.9	48.3	15.7	7.8	89.3	7.8	22.6	89.3	7.8	22.6
10-nov	10.4	13.1	15.7	13.1	13.1	0.0	15.7	14.6	14.1	12.8	25.6	31.9	12.8	6.0	11.8	14.6	23.2	25.6	11.8	10.4	7.8	6.3	6.0	6.0	31.9	0.0	13.7	31.9	0.0	13.7
11-nov	8.9	11.8	15.7	25.3	31.3	17.5	20.9	6.3	13.1	14.6	6.3	44.7	31.9	57.5	44.7	57.5	44.7	6.3	8.9	11.2	6.0	8.1	5.2	6.0	57.5	5.2	21.0	57.5	5.2	21.0
12-nov	11.8	14.6	20.6	11.8	8.1	8.9	15.2	20.6	26.9	44.7	63.7	38.4	19.1	19.1	25.6	6.3	17.5	20.4	25.6	8.9	14.6	11.0	8.9	9.1	63.7	6.3	19.6	63.7	6.3	19.6
13-nov	6.3	6.3	11.8	17.5	0.0	0.0	0.0	14.6	11.0	6.0	12.8	31.9	19.1	12.8	31.9	18.1	25.6	31.6	12.0	19.9	8.9	8.9	11.0	6.0	31.9	0.0	13.5	31.9	0.0	13.5
14-nov	5.2	5.2	8.9	14.6	8.4	6.3	6.3	14.6	15.7	17.5	25.6	19.1	6.3	25.9	17.5	18.3	14.6	11.8	26.4	20.4	20.1	15.7	8.4	8.4	26.4	5.2	14.2	26.4	5.2	14.2
15-nov	6.3	10.7	10.4	6.3	16.5	12.3	17.5	6.0	5.5	20.4	25.6	5.5	0.0	11.2	20.1	23.5	22.7	11.8	17.5	8.9	10.4	10.4	6.0	10.4	25.6	0.0	12.3	25.6	0.0	12.3
16-nov	13.1	17.0	14.4	11.5	14.1	5.2	6.3	6.3	50.9	57.5	31.9	12.8	6.3	25.6	50.9	31.9	70.3	38.4	12.8	38.4	6.3	7.8	7.8	5.2	70.3	5.2	22.6	70.3	5.2	22.6
17-nov	0.0	0.0	10.4	13.1	11.8	17.5	15.7	13.1	13.1	14.1	31.3	17.5	20.4	12.8	6.3	31.9	57.5	63.7	12.8	8.9	7.8	10.4	7.8	8.4	63.7	0.0	16.9	63.7	0.0	16.9
18-nov	11.8	13.1	13.1	6.3	6.3	11.5	6.3	15.7	18.3	20.4	23.5	6.3	19.1	6.3	8.9	0.0	12.8	6.0	11.8	10.4	15.7	7.8	6.0	5.7	23.5	0.0	10.9	23.5	0.0	10.9
19-nov	5.7	7.8	10.4	13.1	10.4	7.8	8.6	10.4	10.4	10.4	18.3	17.5	6.3	6.3	11.8	23.5	17.5	14.6	15.7	11.8	6.0	7.8	6.0	7.8	23.5	5.7	11.5	23.5	5.7	11.5
20-nov	6.0	20.9	20.1	14.6	6.0	12.0	17.0	19.6	7.8	10.4	8.9	6.3	8.9	14.4	17.5	20.9	17.5	14.6	10.4	7.8	19.1	11.8	6.0	13.2	20.9	6.0	13.2	20.9	6.0	13.2
21-nov	5.2	5.2	11.8	12.5	18.3	22.2	20.1	12.0	20.6	15.2	23.2	25.6	19.3	27.2	7.3	6.3	19.1	23.5	17.5	12.8	8.9	6.0	5.2	8.9	27.2	5.2	14.7	27.2	5.2	14.7
22-nov	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
23-nov	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
24-nov	8.1	6.0	8.9	8.9	6.0	12.0	15.2	6.3	20.4	25.6	114.9	44.7	23.2	25.1	12.8	12.8	6.3	0.0	14.6	0.0	10.4	7.8	5.2	8.9	114.9	0.0	16.8	114.9	0.0	16.8
25-nov	13.1	8.9	8.9	6.8	20.6	17.8	12.3	25.6	15.2	26.9	25.9	21.7	19.1	12.8	27.4	6.3	23.5	20.4	12.3	17.5	14.9	11.8	6.0	8.9	27.4	6.0	16.0	27.4	6.0	16.0
26-nov	11.8	7.8	6.0	17.8	14.6	23.2	20.4	11.8	25.6	17.5	17.2	82.8	76.5	7.3	14.6	27.2	11.8	25.1	20.4	9.7	14.6	11.8	8.9	8.4	82.8	6.0	20.5	82.8	6.0	20.5
27-nov	10.4	8.4	8.9	11.8	9.1	10.4	20.4	23.2	18.0	17.5	20.4	25.6	6.3	12.8	7.3	18.3	14.6	14.6	8.9	14.1	20.4	8.9	9.1	5.7	25.6	5.7	13.6	25.6	5.7	13.6
28-nov	9.4	13.1	8.9	12.8	6.3	8.9	14.4	10.4	12.8	22.7	25.9	19.1	6.3	16.5	17.8	20.6	25.6	20.4	6.3	11.8	7.8	10.4	6.0	6.0	25.9	6.0	13.3	25.9	6.0	13.3
29-nov	11.8	14.4	14.6	13.1	15.7	13.1	17.0	20.4	14.6	26.1	26.5	25.6	19.1	23.2	9.7	23.2	23.5	17.8	20.4	6.8	17.2	14.4	8.9	6.0	26.6	6.0	16.8	26.6	6.0	16.8
30-nov	0.0	0.0	8.9	6.3	6.3	14.6	20.4	23.2	18.3	20.6	17.5	24.8	25.6	23.2	23.2	17.5	31.6	9.1	25.6	23.2	14.6	14.4	8.9	8.9	31.6	0.0	16.4	31.6	0.0	16.4
MAXIMA	57.5	25.6	20.6	25.3	31.3	23.2	57.5	57.5	50.9	102.1	146.8	184.9	89.3	76.5	102.1	76.5	70.3	63.7	26.4	38.4	38.4	31.9	15.7	19.1	184.9	0.0	24.1	184.9	0.0	24.1
MINIMA	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
MEDIA	9.9	9.5	11.9	11.6	12.1	11.8	14.3	15.3	16.7	22.7	36.0	36.8	29.1	21.7	20.5	21.9	23.1	18.3	14.6	13.3	12.2	10.2	7.0	7.5	31.6	0.0	16.4	31.6	0.0	16.4

Código ausencia de datos por calibración del equipo : C
 Código ausencia de datos por falta de energía eléctrica temporalmente : +
 Nº de datos válidos : 720
 Recuperación de datos : 100 %



SEB-10170

MONITOREO DE CALIDAD DEL AIRE

VARIABLE : ANHIDRIDO SULFUROSO (SO₂)

LUGAR : CUERPO DE BOMBEROS

PERIODO : 1 AL 31 DE OCTUBRE DE 1998

UNIDAD : µg/m³N

DIA	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM.	
1	5.2	6.3	25.6	6.3	5.2	8.4	6.3	6.3	7.6	6.5	6.3	12.8	C	C	C	6.3	31.9	12.8	6.3	12.8	6.3	12.8	25.6	6.3	6.3	25.6	0.0	8.8
2	6.3	89.3	153.1	57.5	70.3	12.8	6.3	6.3	6.3	6.3	0.0	0.0	0.0	12.8	38.4	6.3	19.1	12.8	6.3	6.3	6.3	0.0	0.0	7.8	153.1	0.0	22.4	
3	0.0	6.3	19.1	6.3	12.8	8.9	6.3	7.8	13.1	10.4	7.8	6.3	6.3	12.8	31.9	6.3	31.3	9.1	10.4	7.8	13.1	10.4	7.8	5.2	31.9	0.0	10.7	
4	7.8	10.4	14.4	8.9	7.8	7.8	13.1	27.4	32.4	12.8	6.3	19.1	31.9	57.5	25.6	12.8	6.3	8.9	13.1	15.7	13.1	15.7	6.3	8.9	57.5	6.3	16.0	
5	11.5	14.1	6.3	16.7	6.3	8.9	16.7	14.1	23.2	14.6	27.2	14.1	16.7	12.8	14.1	8.9	7.8	6.3	12.8	6.3	16.5	11.8	11.5	12.8	27.2	6.3	13.0	
6	6.3	19.1	6.3	6.3	9.1	6.3	12.8	6.3	26.1	32.4	37.1	12.8	6.3	16.7	14.1	18.3	23.2	11.8	13.1	7.8	10.4	13.1	6.3	6.3	37.1	6.3	13.7	
7	11.8	6.5	11.5	14.1	16.7	14.1	11.5	8.9	32.4	19.1	31.9	12.8	19.1	31.9	12.8	6.3	20.4	20.9	14.6	6.3	12.5	9.9	15.4	5.2	32.4	5.2	15.3	
8	7.8	6.3	6.0	7.8	10.4	13.1	15.7	7.8	12.0	17.5	22.7	31.6	14.1	43.6	19.1	13.1	15.7	18.3	20.9	13.1	10.4	8.9	15.7	5.2	43.6	5.2	14.9	
9	7.8	8.9	11.8	16.7	8.6	5.2	10.2	12.8	13.3	25.6	20.4	19.1	12.8	23.2	28.5	18.0	19.9	23.0	14.6	11.8	5.2	7.8	10.4	7.8	28.5	5.2	14.3	
10	11.2	5.2	7.8	13.1	15.7	10.4	17.5	14.1	12.0	20.4	13.1	23.2	12.8	24.6	26.9	10.4	18.3	23.2	17.5	19.6	15.7	10.4	7.8	5.2	26.9	5.2	14.8	
11	8.6	11.8	14.6	20.4	25.6	14.9	25.6	20.4	23.5	31.6	25.9	25.3	19.1	31.9	19.1	12.8	8.9	6.5	25.1	16.2	12.0	23.2	7.8	8.1	31.9	6.5	18.3	
12	5.2	15.7	13.1	10.4	6.3	12.8	12.8	23.2	23.2	11.8	32.1	25.6	19.1	25.6	44.7	6.3	14.6	23.5	20.4	20.4	23.2	25.9	11.2	5.2	44.7	5.2	18.0	
13	8.9	8.9	11.8	17.5	18.3	20.9	11.8	32.4	31.9	70.3	57.5	25.6	6.3	14.6	23.2	25.6	11.8	8.9	17.5	23.2	8.9	8.9	5.2	6.3	70.3	5.2	19.8	
14	8.1	6.3	8.9	14.6	15.7	15.7	18.3	20.9	20.4	19.1	12.8	6.3	13.1	10.4	13.1	0.0	0.0	14.6	17.5	8.9	10.4	10.4	7.8	10.4	20.9	0.0	11.8	
15	13.1	10.4	7.8	14.1	7.8	11.8	17.0	20.9	18.3	50.9	63.7	16.7	31.9	31.9	19.3	21.9	11.8	10.4	7.8	13.1	15.7	10.4	14.6	8.4	63.7	7.8	18.7	
16	6.3	11.5	14.6	6.3	19.9	17.8	12.8	19.1	19.1	12.8	19.1	6.3	31.3	25.6	17.5	22.5	6.3	20.6	11.8	15.7	13.1	10.4	8.4	5.2	31.3	5.2	14.7	
17	7.8	10.4	7.8	14.4	12.8	11.5	14.6	18.3	17.5	20.9	20.4	32.4	17.0	20.4	15.7	14.6	6.3	11.5	12.8	13.1	10.4	14.6	5.2	8.9	32.4	5.2	14.1	
18	11.8	14.6	11.2	11.8	9.1	15.7	18.3	20.9	23.2	23.5	23.2	32.4	20.4	18.3	20.9	25.6	17.8	31.9	16.7	18.3	11.2	7.8	8.4	5.2	17.8	5.2	24.1	
19	5.2	7.8	8.4	8.9	11.8	22.7	17.5	16.7	13.1	6.3	11.5	14.1	11.8	8.9	12.8	11.8	11.2	7.8	10.4	11.8	14.6	19.9	8.4	7.8	22.7	5.2	11.7	
20	11.2	5.7	8.9	14.1	8.9	14.6	25.3	31.3	26.9	14.6	17.5	19.6	20.4	26.6	24.6	146.8	76.5	31.9	6.3	16.7	16.5	20.4	11.0	5.5	6.0	146.8	5.5	25.3
21	16.2	21.7	19.1	6.3	20.4	25.1	10.4	16.5	20.4	25.6	16.7	20.4	26.6	24.6	146.8	76.5	31.9	6.3	22.7	26.9	25.6	18.3	20.9	10.4	44.7	6.3	18.7	
22	11.5	11.8	14.6	20.4	23.2	19.1	19.3	17.5	6.3	23.2	17.5	17.5	14.1	25.6	12.8	44.7	19.1	6.3	22.7	26.9	25.6	18.3	20.9	10.4	44.7	6.3	18.7	
23	8.6	10.4	14.1	6.3	12.8	16.7	6.3	19.9	11.8	25.6	44.7	57.5	70.3	6.3	38.9	32.4	12.8	19.1	17.0	14.6	11.8	6.0	6.0	6.0	70.3	6.0	19.8	
24	5.7	0.0	6.3	6.3	9.1	14.1	8.9	0.0	12.0	6.3	9.1	20.4	25.6	44.7	6.3	20.6	11.8	6.3	12.8	6.3	8.9	7.8	6.5	8.9	44.7	0.0	11.0	
25	8.9	11.8	20.4	25.6	11.8	15.7	13.1	17.2	6.3	14.1	95.6	51.7	12.8	17.5	20.4	18.0	8.9	13.1	11.2	14.1	20.1	20.9	8.6	5.5	95.6	5.5	19.3	
26	6.0	11.2	11.2	14.6	19.6	17.5	11.8	14.6	23.2	22.7	6.3	38.4	25.6	6.3	19.3	15.7	6.0	19.3	20.4	25.1	8.6	10.7	6.0	6.0	38.4	6.0	15.3	
27	10.4	11.2	12.8	12.8	6.3	7.8	14.6	20.4	17.5	17.8	57.5	70.3	19.1	25.6	12.8	25.6	12.8	14.6	17.5	23.2	6.3	5.2	0.0	0.0	11.8	134.0	0.0	12.7
28	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	12.8	134.0	102.1	44.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	70.3	0.0	18.1	
29	11.8	20.4	20.4	25.6	6.3	14.1	11.5	8.9	44.7	25.6	38.4	12.8	6.3	20.4	32.1	+	20.4	17.0	11.8	14.6	17.0	6.5	6.3	44.7	6.3	17.5	0.0	13.7
30	6.3	14.1	14.8	13.1	20.4	17.5	17.0	14.6	25.3	14.6	17.5	31.6	8.6	12.8	25.6	19.1	12.8	0.0	7.8	7.8	11.8	5.5	5.7	5.2	31.6	0.0	13.7	
31	5.5	22.7	14.6	6.3	50.9	12.8	12.8	6.3	14.6	33.4	C	C	C	44.7	19.1	19.1	6.3	11.8	+	17.5	20.1	8.9	6.0	6.3	50.9	0.0	16.5	
MAX.	16.2	89.3	153.1	57.5	70.3	25.1	25.6	32.4	32.4	70.3	95.6	57.5	70.3	82.8	146.8	102.1	178.7	31.9	25.1	26.9	25.6	25.9	25.6	12.8				
MIN.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
PROM.	8.2	13.3	16.7	13.7	15.7	13.3	13.2	15.0	17.3	20.5	23.9	22.2	18.6	23.4	31.3	21.3	21.3	13.3	14.7	13.5	13.2	12.2	8.6	7.2				

* : Código ausencia de datos por instalación estación
 + : Código ausencia de datos por falta de energía eléctrica temporalmente
 : : N° de datos válidos
 : : Recuperación de datos
 D :
 H :
 C :

* :
 + :
 : : 737
 : : 100 %
 : : Día de medición, correspondiendo el día 1 al 01.10.98 y el día 31 al 31.10.98.
 : : Hora de medición a la cual corresponde el promedio horario.
 : : Calibración del equipo.

MONITOREO DE CALIDAD DEL AIRE

TABLA 3.

LUGAR : CUERPO DE BOMBEROS
 PERIODO : 1 AL 30 DE SEPTIEMBRE DE 1998

VARIABLE : ANHIDRIDO SULFUROSO (SO₂)
 UNIDAD : µg/m³N

D/H	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM.
1	7.8	6.3	6.3	6.3	6.3	6.3	10.4	7.8	13.1	13.1	10.4	23.5	6.3	8.4	13.1	6.3	6.3	6.3	18.3	15.7	20.9	24.6	7.8	6.3	24.6	6.3	10.7
2	6.3	6.3	0.0	0.0	5.2	7.8	13.1	16.7	14.1	25.6	76.5	44.7	19.1	6.3	6.3	7.8	7.8	0.0	0.0	5.2	5.2	5.2	6.3	6.3	76.5	0.0	12.2
3	6.3	0.0	6.3	20.4	14.1	6.3	22.7	6.3	17.0	6.3	19.1	63.7	19.1	6.3	34.5	26.6	25.6	17.5	14.1	14.4	13.1	5.2	5.2	0.0	63.7	0.0	15.4
4	5.2	6.3	6.3	14.1	19.9	25.6	6.3	6.3	6.3	25.6	50.9	50.9	76.5	12.8	6.3	0.0	0.0	11.8	14.1	6.0	6.5	9.4	6.3	10.4	76.5	0.0	16.0
5	10.4	13.1	10.4	0.0	0.0	5.2	5.2	6.3	15.4	20.4	27.2	6.3	19.1	44.7	50.9	25.6	6.3	0.0	8.9	11.8	12.8	12.8	5.2	7.8	50.9	0.0	13.6
6	11.0	5.2	0.0	0.0	0.0	0.0	11.0	16.2	8.1	21.9	22.7	25.1	26.6	6.3	6.3	12.8	6.3	0.0	0.0	8.4	10.4	8.4	5.2	8.4	26.6	0.0	9.2
7	11.0	5.2	5.2	0.0	0.0	12.3	16.2	22.7	12.8	44.7	6.3	12.8	19.1	31.6	35.0	25.6	22.7	6.3	9.4	22.7	17.8	8.9	6.8	6.3	44.7	0.0	15.1
8	9.4	6.3	0.0	6.3	8.9	17.8	11.5	6.3	12.8	44.7	19.1	76.5	6.3	22.7	32.1	23.5	23.2	26.6	19.1	12.8	6.3	11.2	6.3	12.8	76.5	0.0	17.6
9	6.3	12.3	6.3	8.4	6.3	12.8	12.8	44.7	108.4	38.4	63.7	82.8	25.6	89.3	50.9	44.7	6.3	6.3	19.1	6.3	19.9	5.2	5.2	5.2	108.4	5.2	28.6
10	5.2	8.9	19.1	6.0	12.8	22.7	17.5	12.0	5.2	12.8	12.8	8.9	16.5	0.0	23.2	12.8	108.4	6.3	11.2	7.6	22.7	17.8	10.4	6.3	127.5	5.2	20.4
11	5.2	17.5	23.2	16.2	12.8	22.7	6.3	5.2	12.8	12.8	12.8	127.5	6.3	25.6	6.3	17.5	6.3	6.3	11.2	7.6	22.7	17.8	10.4	6.3	127.5	5.2	20.4
12	6.3	0.0	0.0	16.7	25.6	76.5	63.7	38.4	19.1	19.1	44.7	31.9	6.3	12.0	22.7	25.6	32.1	45.5	25.6	19.1	12.8	6.3	6.3	6.3	76.5	0.0	23.4
13	6.3	16.7	15.7	12.8	25.6	31.9	12.8	19.1	25.6	12.8	6.3	8.4	6.3	16.7	26.6	95.6	31.9	19.1	95.6	280.6	95.6	44.7	25.6	12.8	280.6	6.3	39.4
14	6.3	12.8	38.4	114.9	70.3	63.7	31.9	38.4	19.1	14.6	24.8	26.9	18.0	18.8	12.8	19.1	6.3	12.8	12.8	8.9	6.3	12.8	6.3	6.3	114.9	6.3	25.1
15	12.8	12.8	31.9	38.4	82.8	82.8	31.9	6.3	6.3	12.0	14.6	25.1	19.6	27.4	24.8	23.0	11.2	6.3	9.4	12.0	6.3	6.3	8.1	9.1	82.8	6.3	21.7
16	13.6	5.2	6.5	0.0	0.0	12.8	31.9	25.6	9.1	6.3	11.8	12.8	6.3	6.3	9.1	6.3	9.1	6.3	19.6	17.2	9.1	12.0	14.9	9.1	9.7	8.4	11.0
17	8.9	0.0	5.2	5.2	6.0	11.8	19.9	6.3	21.9	11.5	24.8	27.4	21.7	6.3	6.3	11.5	11.8	17.5	24.8	15.2	20.1	45.2	6.5	0.0	27.4	0.0	12.7
18	0.0	7.8	11.0	13.8	6.5	6.0	12.0	6.3	19.1	6.3	95.6	25.6	26.9	24.8	14.1	19.9	25.6	14.9	14.6	10.4	7.8	6.5	11.8	5.2	95.6	0.0	16.4
19	6.3	9.1	14.6	11.8	22.7	11.8	14.1	11.8	7.8	7.8	8.4	6.3	6.3	14.4	23.2	12.3	9.1	6.3	14.1	9.1	5.2	0.0	0.0	7.8	23.2	0.0	10.0
20	9.1	6.5	5.2	5.2	5.2	0.0	0.0	5.2	14.1	17.5	22.2	25.6	6.3	50.9	31.9	14.4	19.6	12.0	11.2	19.6	25.6	7.8	10.4	7.8	50.9	0.0	13.9
21	11.8	11.5	14.6	17.5	23.2	26.6	14.9	22.2	24.8	23.2	31.6	6.3	12.8	6.3	9.1	13.6	13.3	13.3	25.6	20.6	11.8	17.5	9.1	5.2	31.6	5.2	15.9
22	11.8	14.6	19.6	8.4	25.6	26.6	20.4	14.6	9.1	19.1	25.6	6.3	12.8	14.1	6.3	25.6	19.1	6.0	14.6	9.1	11.8	7.8	7.8	5.2	26.6	5.2	14.2
23	7.8	11.0	9.1	14.1	13.6	17.5	14.6	5.2	5.2	8.1	11.8	23.2	12.8	14.6	14.9	11.8	10.4	10.4	0.0	8.4	5.2	5.2	7.3	5.2	23.2	0.0	10.3
24	5.2	5.2	11.8	8.9	14.6	14.4	23.2	20.4	32.7	22.2	22.2	6.3	6.3	14.6	14.4	8.9	8.9	0.0	0.0	10.4	10.4	9.4	7.8	32.7	0.0	11.6	
25	7.8	12.0	13.1	13.6	9.1	17.5	23.2	24.6	27.4	30.0	17.5	6.3	12.8	6.3	22.7	11.8	8.9	7.8	5.2	6.3	0.0	0.0	5.2	7.8	30.0	0.0	12.4
26	10.4	7.8	13.1	6.3	6.3	14.4	17.0	6.3	20.4	25.9	17.5	27.7	17.5	22.7	14.6	14.4	24.8	27.4	17.0	14.4	8.9	10.4	14.6	7.8	27.7	6.3	15.3
27	10.4	10.4	0.0	0.0	14.4	17.0	20.4	6.3	25.6	44.7	6.3	6.3	25.6	17.8	25.9	27.4	22.7	14.6	22.7	13.8	11.2	8.9	7.8	5.2	44.7	0.0	15.2
28	5.2	5.2	0.0	11.8	14.6	23.2	25.6	14.6	6.3	12.8	6.3	19.1	12.8	9.1	12.3	22.7	6.3	12.0	12.0	22.7	6.0	5.2	5.2	10.4	25.6	0.0	11.7
29	7.8	7.8	11.8	14.1	14.9	24.8	9.1	8.4	6.5	22.7	26.6	15.2	12.8	19.1	12.8	19.1	25.6	19.6	9.1	14.9	14.1	22.7	7.8	7.8	26.6	6.5	14.8
30	7.8	7.8	0.0	11.8	13.1	6.3	17.5	25.6	22.7	11.8	14.6	25.6	27.2	38.4	12.8	12.8	6.3	25.6	28.5	14.6	6.3	6.3	5.2	7.8	38.4	0.0	14.9
MAX.	13.6	17.5	38.4	114.9	82.8	82.8	63.7	44.7	108.4	44.7	127.5	82.8	76.5	89.3	50.9	95.6	108.4	45.5	95.6	280.6	95.6	44.7	25.6	12.8			
MIN.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.2	5.2	6.3	6.3	6.3	0.0	0.0	6.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
PROM	8.0	8.4	10.2	13.4	16.0	20.8	17.9	15.2	18.3	19.9	28.8	26.6	17.1	19.8	19.4	20.0	17.8	12.4	16.4	21.6	14.6	10.6	7.8	7.0			

* :
 + :
 720 :
 100 % :
 Día de medición, correspondiendo el día 1 al 01.09.98 y el día 30 al 30.09.98.
 Hora de medición a la cual corresponde el promedio horario.

MONITOREO DE CALIDAD DEL AIRE

TABLA 3.

LUGAR : CUERPO DE BOMBEROS
 PERIODO : 1 AL 31 DE AGOSTO DE 1998
 VARIABLE : ANHIDRIDO SULFUROSO (SO₂)
 UNIDAD : µg/m³N

D/H	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM.	
1	7.8	7.8	5.2	5.2	10.4	10.4	10.4	7.8	7.8	7.8	18.3	101.9	86.2	13.1	7.8	7.8	7.8	5.2	5.2	5.2	10.4	10.4	10.4	7.8	101.9	5.2	15.6	
2	5.2	5.2	18.3	5.2	5.2	20.9	7.8	5.2	13.1	31.3	5.2	5.2	5.2	13.1	5.2	7.8	10.4	7.8	5.2	7.8	5.2	0.0	0.0	5.2	31.3	0.0	8.6	
3	10.4	5.2	5.2	13.1	2.6	2.6	23.5	10.4	7.8	5.2	7.8	5.2	10.4	15.7	7.8	5.2	13.1	20.9	7.8	5.2	10.4	5.2	10.4	5.2	23.5	2.6	8.8	
4	2.6	2.6	10.4	13.1	2.6	7.8	5.2	7.8	10.4	13.1	15.7	13.1	13.1	5.2	10.4	13.1	7.8	13.1	10.4	10.4	13.1	5.2	5.2	5.2	15.7	2.6	9.0	
5	5.2	23.5	5.2	13.1	5.2	5.2	7.8	20.9	7.8	15.7	7.8	5.2	18.3	26.1	39.2	10.4	5.2	20.9	18.3	18.3	5.2	7.8	7.8	10.4	39.2	5.2	13.0	
6	13.1	10.4	7.8	10.4	15.7	10.4	18.3	10.4	7.8	10.4	10.4	23.5	20.9	13.1	10.4	7.8	23.5	7.8	20.9	7.8	10.4	10.4	7.8	7.8	23.5	7.8	12.4	
7	5.2	5.2	7.8	7.8	15.7	15.7	7.8	5.2	5.2	18.3	10.4	36.6	20.9	10.4	13.1	10.4	7.8	7.8	18.3	20.9	34.0	7.8	7.8	5.2	36.6	5.2	14.1	
8	7.8	13.1	15.7	7.8	7.8	20.9	23.5	34.0	7.8	23.5	10.4	7.8	10.4	34.0	7.8	10.4	7.8	31.3	23.5	7.8	13.1	10.4	7.8	5.2	36.6	5.2	12.5	
9	7.8	13.1	15.7	7.8	7.8	20.9	23.5	34.0	7.8	23.5	10.4	7.8	10.4	34.0	20.9	10.4	7.8	31.3	23.5	7.8	7.8	10.4	7.8	5.2	36.6	5.2	12.5	
10	13.1	15.7	15.7	20.9	34.0	28.7	26.1	7.8	13.1	10.4	10.4	10.4	20.9	44.4	13.1	10.4	7.8	7.8	7.8	31.3	28.7	18.3	7.8	5.2	44.4	5.2	17.1	
11	5.2	28.7	7.8	26.1	7.8	20.9	23.5	7.8	7.8	10.4	26.1	28.7	26.1	15.7	36.6	39.2	36.6	13.1	23.5	20.9	20.9	23.5	13.1	10.4	39.2	5.2	20.0	
12	7.8	15.7	10.4	10.4	18.3	10.4	7.8	10.4	10.4	10.4	15.7	C	C	28.7	7.8	7.8	10.4	7.8	5.2	10.4	7.8	5.2	7.8	5.2	34.0	5.2	12.5	
13	5.2	13.1	31.3	5.2	7.8	5.2	20.9	18.3	7.8	20.9	54.9	36.6	39.2	60.1	75.8	26.1	31.3	10.4	7.8	10.4	28.7	10.4	7.8	5.2	75.8	5.2	22.5	
14	0.0	18.3	23.5	15.7	31.3	41.8	60.1	28.7	36.6	15.7	20.9	10.4	23.5	13.1	7.8	20.9	7.8	28.7	13.1	49.6	18.3	5.2	5.2	5.2	60.1	0.0	20.9	
15	13.1	15.7	20.9	23.5	10.4	5.2	10.4	28.7	15.7	23.5	15.7	60.1	62.7	31.3	7.8	7.8	23.5	31.3	18.3	13.1	10.4	10.4	5.2	5.2	62.7	5.2	19.4	
16	18.3	13.1	34.0	7.8	31.3	34.0	26.1	20.9	23.5	31.3	5.2	18.3	26.1	36.6	34.0	28.7	20.9	23.5	15.7	31.3	28.7	5.2	10.4	7.8	36.6	5.2	22.2	
17	7.8	5.2	5.2	7.8	7.8	7.8	5.2	5.2	5.2	7.8	10.4	15.7	13.1	7.8	10.4	54.9	31.3	10.4	7.8	7.8	5.2	5.2	7.8	7.8	54.9	5.2	11.0	
18	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	10.4	10.4	18.3	15.7	10.4	47.0	18.3	7.8	7.8	7.8	7.8	5.2	5.2	5.2	7.8	47.0	5.2	11.2	
19	7.8	7.8	7.8	18.3	5.2	23.5	20.9	7.8	7.8	10.4	10.4	10.4	7.8	10.4	7.8	5.2	7.8	5.2	5.2	5.2	5.2	5.2	5.2	7.8	10.4	5.2	7.6	
20	7.8	7.8	7.8	7.8	18.3	5.2	23.5	20.9	13.1	7.8	15.7	7.8	10.4	18.3	13.1	36.6	78.4	31.3	13.1	23.5	15.7	10.4	10.4	7.8	78.4	5.2	17.0	
21	7.8	5.2	5.2	5.2	0.0	10.4	5.2	13.1	7.8	7.8	15.7	7.8	10.4	18.3	5.2	5.2	15.7	18.3	5.2	5.2	13.1	5.2	5.2	5.2	20.9	5.2	10.8	
22	13.1	13.1	7.8	20.9	20.9	18.3	7.8	13.1	13.1	7.8	7.8	15.7	10.4	5.2	5.2	31.3	28.7	7.8	13.1	5.2	18.3	20.9	7.8	5.2	44.4	5.2	18.2	
23	28.7	5.2	31.3	13.1	5.2	10.4	15.7	18.3	20.9	18.3	18.3	34.0	44.4	15.7	31.3	28.7	7.8	13.1	5.2	18.3	18.3	20.9	7.8	5.2	44.4	5.2	18.2	
24	10.4	10.4	13.1	7.8	31.3	34.0	28.7	20.9	13.1	18.3	10.4	31.3	23.5	20.9	36.6	36.6	7.8	31.3	7.8	28.7	20.9	18.3	5.2	5.2	36.6	5.2	19.7	
25	20.9	2.6	13.1	20.9	18.3	34.0	31.3	7.8	28.7	10.4	36.6	31.3	23.5	20.9	36.6	10.4	10.4	7.8	7.8	20.9	5.2	15.7	13.1	5.2	36.6	2.6	17.5	
26	5.2	7.8	15.7	18.3	18.3	31.3	28.7	26.1	7.8	18.3	20.9	7.8	10.4	34.0	23.5	10.4	31.3	28.7	5.2	10.4	13.1	10.4	15.7	13.1	5.2	36.6	2.6	17.5
27	23.5	13.1	23.5	7.8	13.1	15.7	7.8	7.8	20.9	10.4	36.6	10.4	20.9	44.4	13.1	10.4	7.8	7.8	7.8	23.5	23.5	7.8	7.8	5.2	34.0	5.2	17.0	
28	5.2	10.4	7.8	28.7	28.7	20.9	18.3	20.9	20.9	10.4	10.4	10.4	10.4	5.2	10.4	10.4	28.7	26.1	7.8	15.7	13.1	7.8	7.8	5.2	44.4	5.2	15.5	
29	7.8	10.4	7.8	10.4	31.3	7.8	23.5	20.9	13.1	10.4	10.4	10.4	10.4	7.8	7.8	10.4	28.7	15.7	15.7	7.8	5.2	13.1	7.8	5.2	31.3	5.2	12.7	
30	13.1	10.4	7.8	7.8	7.8	7.8	20.9	18.3	23.5	7.8	10.4	7.8	10.4	34.0	20.9	36.6	31.3	28.7	34.0	34.0	7.8	10.4	7.8	7.8	36.6	7.8	17.0	
31	13.1	13.1	5.2	26.1	23.5	20.9	28.7	28.7	28.7	28.7	36.6	47.0	44.4	39.2	C	C	C	C	C	C	C	7.8	15.7	5.2	47.0	5.2	25.9	
MAX.	28.7	28.7	34.0	28.7	34.0	41.8	60.1	34.0	36.6	31.3	54.9	101.9	86.2	60.1	75.8	78.4	36.6	34.0	34.0	49.6	34.0	23.5	15.7	10.4	101.9	5.2	25.9	
MIN.	0.0	2.6	5.2	0.0	0.0	2.6	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	0.0	0.0	5.2	5.2	0.0	0.0	
PROM.	9.9	10.7	12.7	13.2	14.6	15.7	17.9	14.9	13.6	14.0	17.4	22.5	22.1	22.0	20.5	19.3	16.3	16.1	13.7	16.0	13.6	9.8	8.1	6.8	10.4	5.2	15.6	

* : Código ausencia de datos por instalación estación
 + : Código ausencia de datos por falta de energía eléctrica temporairmente
 738 : N° de datos validos
 100 % : Recuperación de datos
 D :
 H :
 C :
 * : Día de medición, correspondiendo el día 1 al 01.08.98 y el día 31 al 31.08.98.
 + : Hora de medición a la cual corresponde el promedio horario.
 : : Calibración del equipo

Nota Importante al reverso



SEB-10133

MONITOREO DE CALIDAD DEL AIRE

VARIABLE : ANHIDRIDO SULFUROSO (SO₂)

UNIDAD : µg/m³N

LUGAR : CUERPO DE BOMBOS

PERIODO : 1 AL 31 DE JULIO DE 1998

D/H	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM.	
1	7.8	13.1	13.1	26.1	18.3	16.7	26.1	16.7	13.1	26.1	28.7	6.2	31.3	7.8	6.2	47.0	7.8	6.2	7.8	28.7	16.7	7.8	7.8	6.2	70.5	6.2	18.7	
2	6.2	6.2	16.7	16.7	6.2	2.6	2.6	20.9	31.3	6.2	13.1	31.3	7.8	6.2	23.6	16.7	6.2	28.7	7.8	6.2	20.9	6.2	10.4	6.2	31.3	2.6	12.3	
3	6.2	28.7	28.7	16.7	13.1	10.4	13.1	18.3	18.3	16.7	16.7	16.7	13.1	10.4	16.7	20.9	7.8	6.2	6.2	6.2	7.8	44.4	16.7	16.7	44.4	6.2	16.0	
4	13.1	13.1	10.4	7.8	10.4	10.4	7.8	10.4	7.8	6.2	20.9	31.3	6.2	13.1	6.2	6.2	2.6	16.7	2.6	6.2	23.6	2.6	6.2	2.6	31.3	2.6	9.9	
6	6.2	6.2	6.2	13.1	18.3	28.7	28.7	2.6	31.3	6.2	6.2	6.2	13.1	49.6	162.0	60.1	7.8	6.2	6.2	6.2	31.3	28.7	6.2	2.6	162.0	2.6	20.6	
7	7.8	7.8	7.8	7.8	7.8	10.4	13.1	10.4	10.4	10.4	7.8	13.1	20.9	28.7	23.6	6.2	6.2	6.2	6.2	2.6	6.2	7.8	13.1	10.4	7.8	73.1	2.6	20.6
8	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	28.7	2.6	10.1
9	2.6	20.9	2.6	2.6	6.2	6.2	7.8	13.1	16.7	18.3	7.8	36.6	62.2	36.6	26.1	13.1	7.8	6.2	39.2	39.2	6.2	6.2	6.2	6.2	39.2	2.6	11.0	
10	13.1	13.1	13.1	10.4	10.4	10.4	10.4	18.7	18.3	36.6	16.7	16.7	28.7	23.6	20.9	13.1	10.4	10.4	6.2	6.2	6.2	6.2	13.1	13.1	64.9	2.6	16.3	
11	10.4	10.4	10.4	10.4	10.4	10.4	39.2	16.7	13.1	13.1	13.1	13.1	16.7	26.1	26.1	6.2	23.6	10.4	10.4	10.4	10.4	10.4	7.8	7.8	36.6	7.8	14.6	
12	10.4	23.6	10.4	13.1	10.4	10.4	10.4	20.9	10.4	23.6	10.4	13.1	34.0	41.8	31.3	10.4	7.8	23.6	7.8	16.7	34.0	6.2	7.8	10.4	62.2	7.8	16.8	
13	10.4	18.3	23.6	10.4	13.1	20.9	10.4	10.4	13.1	13.1	16.7	16.7	13.1	23.6	20.9	18.3	10.4	7.8	15.7	7.8	16.7	34.0	6.2	7.8	41.8	6.2	16.6	
14	7.8	10.4	16.7	10.4	36.6	20.9	10.4	13.1	10.4	10.4	16.7	10.4	16.7	23.6	16.7	10.4	7.8	7.8	15.7	7.8	34.0	7.8	6.2	7.8	34.0	6.2	14.5	
15	7.8	16.7	13.1	7.8	34.0	7.8	20.9	13.1	10.4	18.3	10.4	23.6	23.6	10.4	7.8	7.8	10.4	10.4	20.9	28.7	16.7	6.2	10.4	7.8	34.0	6.2	13.7	
16	7.8	10.4	20.9	10.4	13.1	10.4	28.7	7.8	36.6	31.3	10.4	13.1	7.8	23.6	18.3	7.8	7.8	16.7	6.2	7.8	23.6	10.4	7.8	7.8	36.6	6.2	14.4	
17	7.8	20.9	6.2	23.6	18.3	6.2	7.8	7.8	7.8	34.0	10.4	13.1	18.3	10.4	7.8	7.8	6.2	7.8	7.8	13.1	13.1	20.9	6.2	7.8	34.0	6.2	11.8	
18	7.8	10.4	20.9	6.2	7.8	10.4	20.9	23.6	13.1	13.1	10.4	7.8	7.8	7.8	26.1	60.1	44.4	23.6	10.4	16.7	16.7	16.7	10.4	10.4	60.1	6.2	16.3	
19	10.4	10.4	13.1	18.3	18.3	7.8	7.8	7.8	36.6	31.3	10.4	13.1	13.1	18.3	31.3	6.2	7.8	16.7	7.8	7.8	23.6	10.4	6.2	10.4	36.6	6.2	14.7	
20	0.0	0.0	0.0	15.7	7.8	31.3	18.3	7.8	20.9	6.2	6.2	36.6	6.2	16.7	129.0	130.6	31.3	10.4	7.8	10.4	28.7	10.4	7.8	7.8	16.7	6.2	10.3	
22	7.8	7.8	7.8	7.8	31.3	6.2	7.8	16.7	7.8	16.3	7.8	10.4	7.8	7.8	7.8	7.8	7.8	7.8	6.2	6.2	6.2	6.2	6.2	6.2	16.7	6.2	10.4	
23	7.8	7.8	20.9	20.9	10.4	13.1	10.4	7.8	7.8	7.8	34.0	34.0	20.9	20.9	7.8	7.8	7.8	7.8	6.2	23.6	7.8	16.7	10.4	7.8	36.6	6.2	15.0	
24	6.2	13.1	13.1	31.3	31.3	7.8	7.8	13.1	20.9	36.6	28.7	20.9	18.3	10.4	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	36.6	6.2	13.2	
26	7.8	7.8	7.8	7.8	34.0	7.8	7.8	7.8	10.4	36.6	10.4	10.4	13.1	18.3	16.7	10.4	47.0	18.3	7.8	7.8	6.2	6.2	6.2	7.8	47.0	6.2	11.2	
28	7.8	7.8	7.8	6.2	6.2	6.2	7.8	7.8	10.4	36.6	10.4	10.4	7.8	10.4	7.8	6.2	7.8	6.2	31.3	31.3	6.2	6.2	6.2	7.8	36.6	6.2	12.0	
29	7.8	6.2	6.2	7.8	7.8	7.8	6.2	6.2	7.8	7.8	7.8	7.8	13.1	10.4	36.6	78.4	31.3	13.1	23.6	15.7	10.4	10.4	10.4	7.8	78.4	6.2	16.3	
30	13.1	13.1	7.8	7.8	7.8	34.0	34.0	7.8	23.6	20.9	7.8	7.8	10.4	18.3	7.8	7.8	16.7	13.1	7.8	13.1	13.1	13.1	10.4	10.4	18.3	6.2	9.4	
31	2.6	6.2	6.2	6.2	20.9	10.4	6.2	20.9	6.2	7.8	7.8	7.8	7.8	7.8	44.4	23.6	10.4	6.2	6.2	6.2	31.3	23.6	6.2	2.6	34.0	2.6	12.6	
MAX.	13.1	28.7	28.7	36.6	34.0	39.2	23.6	36.6	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	
MIN.	0.0	0.0	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	
PROM.	7.5	10.8	11.0	13.2	16.9	13.5	14.5	12.2	14.2	20.1	16.4	16.3	17.9	25.1	28.5	22.5	13.0	11.4	12.0	12.5	16.0	8.8	7.7	7.6				

* : Código ausencia de datos por instalación estación
 + : Código ausencia de datos por falta de energía eléctrica temporalmente
 744 : N° de datos válidos
 100 % : Recuperación de datos
 D : Día de medición, correspondiendo el día 1 al 01.07.98 y el día 31 al 31.07.98.
 H : Hora de medición a la cual corresponde el promedio horario.

Nota Importante al reverso



MONITOREO DE CALIDAD DEL AIRE

TABLA 3.

VARIABLE : ANHIDRIDO SULFUROSO (SO2)

LUGAR : CUERPO DE BOMBEROS

PERIODO : 1 AL 30 DE JUNIO DE 1998

UNIDAD : µg/m3N

D/H	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM.	
1	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	11.5
2	10.4	10.4	10.4	31.3	73.1	60.1	44.4	54.9	57.5	41.8	28.7	15.7	10.4	7.8	5.2	7.8	26.1	54.9	114.9	86.2	86.2	86.2	86.2	86.2	86.2	86.2	86.2	38.1
3	5.2	7.8	7.8	7.8	7.8	5.2	5.2	10.4	13.1	7.8	7.8	5.2	5.2	5.2	5.2	13.1	7.8	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	6.9
4	5.2	5.2	5.2	5.2	5.2	5.2	5.2	7.8	10.4	10.4	15.7	13.1	7.8	5.2	5.2	5.2	5.2	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	6.0
5	5.2	2.6	2.6	2.6	5.2	5.2	5.2	2.6	5.2	5.2	2.6	2.6	5.2	2.6	5.2	5.2	5.2	2.6	0.0	2.6	5.2	5.2	5.2	5.2	5.2	5.2	5.2	3.8
6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	15.7	34.0	7.8	7.8	52.2	13.1	5.2	2.6	2.6	5.2	5.2	5.2	5.2	5.2	5.2	5.2	8.2
7	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	44.4	122.8	20.9	13.1	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	11.6
8	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	5.2	5.2	5.2	2.6	5.2	2.6	2.6	2.6	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.8
9	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	5.2	5.2	5.2	7.8	13.1	7.8	5.2	5.2	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.8
10	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	3.2
11	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	9.7
12	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	18.3	54.9	10.4	7.8	10.4	10.4	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	8.4
13	10.4	10.4	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	5.2	5.2	5.2	5.2	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	5.9
14	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	6.4
15	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	5.2
16	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	8.1
17	7.8	10.4	10.4	10.4	15.7	10.4	10.4	10.4	10.4	10.4	10.4	15.7	18.3	13.1	13.1	15.7	13.1	10.4	10.4	10.4	10.4	15.7	13.1	10.4	13.1	18.3	7.8	12.5
18	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	10.4	12.4
19	10.4	10.4	10.4	10.4	7.8	7.8	7.8	7.8	7.8	7.8	10.4	15.7	318.7	0.0	5.2	20.9	36.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	20.1
20	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.6
21	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	2.7
22	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
23	0.0	0.0	15.7	23.5	7.8	15.7	23.5	5.2	2.6	0.0	0.0	0.0	0.0	10.4	18.3	44.4	20.9	5.2	0.0	0.0	5.2	18.3	13.1	5.2	44.4	0.0	9.8	
24	2.6	0.0	2.6	5.2	5.2	0.0	2.6	13.1	13.1	39.2	18.3	2.6	0.0	0.0	0.0	0.0	0.0	0.0	167.2	112.3	138.4	60.1	2.6	0.0	167.2	0.0	24.4	
25	0.0	0.0	2.6	5.2	2.6	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	10.4	0.0	1.4	
26	7.8	26.1	7.8	7.8	7.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.2
27	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.2	2.6	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.4
28	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
29	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
30	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
MAX.	10.4	26.1	15.7	31.3	73.1	60.1	44.4	54.9	57.5	41.8	318.7	122.8	54.9	20.9	52.2	44.4	26.1	54.9	167.2	112.3	138.4	60.1	18.3	13.1	167.2	0.0	13.1	
MIN.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
PROM.	4.4	5.0	5.1	6.4	6.8	5.9	5.7	6.3	6.8	7.4	18.5	10.4	8.4	5.8	8.6	10.3	6.6	5.8	13.8	9.8	11.1	7.8	4.7	4.4	10.4	0.0	4.4	

: : : : : *
 : : : : : +
 : : : : : 720
 : : : : : 100 %
 : : : : : Día de medición, correspondiendo el día 1 al 01.06.98 y el día 30 al 30.06.98.
 : : : : : Hora de medición a la cual corresponde el promedio horario.

Código ausencia de datos por instalación estación
 Código ausencia de datos por falta de energía eléctrica temporalmente
 N° de datos válidos
 Recuperación de datos
 D
 H



MONITOREO DE CALIDAD DEL AIRE

TABLA 3.

VARIABLE : ANHIDRIDO SULFUROSO (SO2)

LUGAR : CUERPO DE BOMBEROS

UNIDAD : µg/m3N

PERIODO : 1 AL 31 DE MAYO DE 1998

D/H	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM.
1	2.6	5.2	2.6	0.0	0.0	0.0	0.0	0.0	2.6	5.2	10.4	7.8	26.1	7.8	5.2	2.6	2.6	0.0	0.0	10.4	15.7	7.8	2.6	2.6	26.1	0.0	5.3
2	2.6	2.6	0.0	2.6	2.6	2.6	2.6	0.0	0.0	2.6	2.6	0.0	0.0	0.0	26.1	141.1	34.0	5.2	0.0	0.0	0.0	0.0	0.0	0.0	141.1	0.0	9.5
3	2.6	5.2	2.6	0.0	2.6	2.6	5.2	7.8	7.8	0.0	20.9	34.0	39.2	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	39.2	0.0	5.6
4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.6	23.5	7.8	15.7	7.8	5.2	0.0	0.0	2.6	2.6	5.2	7.8	5.2	2.6	23.5	0.0	3.7
5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.2	7.8	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	7.8	0.0	0.7
6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.6	154.1	96.7	13.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	154.1	0.0	11.1
8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	18.3	7.8	7.8	7.8	7.8	7.8	7.8	7.8	18.3	0.0	3.0
9	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	0.0	0.0	0.0	0.0	0.0	0.0	28.7	5.2	7.8	5.2	5.2	5.2	5.2	5.2	5.2	28.7	0.0	6.1
10	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2
11	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	109.7	18.3	10.4	13.1	15.7	7.8	5.2	5.2	5.2	5.2	5.2	5.2	109.7	5.2	13.9
12	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	7.8	7.8	10.4	10.4	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	10.4	5.2	6.2
13	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	7.8	7.8	28.7	39.2	7.8	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	39.2	5.2	8.3
14	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	7.8	7.8	10.4	10.4	10.4	20.9	13.1	10.4	10.4	10.4	10.4	10.4	10.4	10.4	20.9	5.2	11.9
15	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	15.7	18.3	7.8	7.8	20.9	23.5	13.1	10.4	20.9	10.4	5.2	5.2	5.2	5.2	23.5	5.2	10.4
16	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	4.9
17	5.2	2.6	5.2	5.2	18.3	31.3	13.1	5.2	7.8	47.0	54.9	36.6	23.5	23.5	15.7	10.4	7.8	7.8	7.8	7.8	54.9	112.3	20.9	10.4	112.3	2.6	24.9
18	5.2	5.2	5.2	5.2	7.8	10.4	10.4	15.7	7.8	7.8	34.0	49.6	34.0	67.9	20.9	7.8	10.4	5.2	2.6	2.6	2.6	2.6	2.6	2.6	67.9	2.6	15.9
19	26.1	34.0	34.0	26.1	23.5	20.9	13.1	7.8	7.8	7.8	7.8	5.2	5.2	5.2	2.6	2.6	70.5	20.9	7.8	5.2	5.2	5.2	5.2	5.2	70.5	2.6	14.6
20	2.6	5.2	5.2	5.2	7.8	7.8	7.8	7.8	7.8	10.4	10.4	10.4	28.7	10.4	10.4	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	28.7	2.6	7.1
21	5.2	5.2	5.2	5.2	2.6	2.6	2.6	2.6	2.6	5.2	5.2	7.8	15.7	36.6	15.7	5.2	5.2	5.2	5.2	5.2	2.6	2.6	2.6	2.6	28.7	2.6	7.3
22	7.8	7.8	13.1	7.8	7.8	7.8	7.8	7.8	7.8	5.2	5.2	5.2	5.2	31.3	7.8	5.2	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	36.6	2.6	7.3
23	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	5.2	10.4	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	31.3	2.6	7.3
24	7.8	5.2	2.6	2.6	2.6	2.6	2.6	2.6	2.6	5.2	5.2	7.8	10.4	5.2	2.6	2.6	5.2	7.8	10.4	7.8	10.4	13.1	7.8	10.4	13.1	2.6	6.0
25	10.4	10.4	7.8	5.2	5.2	5.2	5.2	2.6	2.6	2.6	2.6	13.1	23.5	13.1	7.8	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	23.5	2.6	6.2
26	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	7.8	15.7	26.1	23.5	13.1	13.1	13.1	13.1	13.1	13.1	13.1	62.7	154.1	154.1	2.6	21.8
27	39.2	15.7	15.7	18.3	13.1	10.4	10.4	10.4	10.4	10.4	15.7	67.9	57.5	10.4	10.4	10.4	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	67.9	7.8	16.2
28	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	10.4	10.4	10.4	10.4	7.8	7.8	7.8	13.1	13.1	13.1	7.8	7.8	7.8	7.8	13.1	7.8	8.7
29	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	7.8	18.3	52.2	36.6	28.7	20.9	15.7	10.4	10.4	23.5	13.1	52.2	7.8	14.1
30	10.4	10.4	10.4	10.4	7.8	7.8	7.8	15.7	18.3	83.6	39.2	34.0	54.9	125.4	26.1	67.9	49.6	44.4	10.4	7.8	7.8	7.8	7.8	7.8	125.4	7.8	28.1
31	7.8	7.8	7.8	7.8	10.4	10.4	7.8	10.4	10.4	10.4	10.4	10.4	13.1	15.7	13.1	10.4	10.4	7.8	7.8	7.8	7.8	7.8	7.8	7.8	15.7	7.8	9.5
MAX.	39.2	34.0	34.0	26.1	31.3	20.9	15.7	15.7	67.9	83.6	54.9	67.9	125.4	39.2	141.1	70.5	44.4	20.9	54.9	112.3	62.7	154.1	117.5	117.5			
MIN.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
PROM	6.7	6.2	6.1	6.2	6.4	5.6	5.3	5.1	7.8	9.3	9.4	13.9	21.7	22.5	11.8	17.0	11.5	8.3	5.7	6.8	8.9	7.8	11.5	9.6			

* :
 + :
 743 :
 100 % :
 : : Día de medición, correspondiendo el día 1 al 01.05.98 y el día 31 al 31.05.98.
 : : Hora de medición a la cual corresponde el promedio horario.

Código ausencia de datos por instalación estación
 Código ausencia de datos por falta de energía eléctrica temporalmente
 N° de datos válidos
 Recuperación de datos

D :
 H :

Nota importante al reverso



SEB-10093

MONITOREO DE CALIDAD DEL AIRE

TABLA 3.

LUGAR : CUERPO DE BOMBEROS
 PERIODO : 1 AL 30 DE ABRIL DE 1998

VARIABLE : ANHIDRIDO SULFUROSO (SO2)
 UNIDAD : µg/m3N

D/H	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM.
1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
10	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
11	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
12	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
13	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
14	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
15	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
16	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
17	13.1	7.8	5.2	5.2	5.2	7.8	7.8	7.8	10.4	26.1	26.1	7.8	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6
18	2.6	7.8	15.7	23.5	15.7	28.7	122.8	83.6	39.2	26.1	7.8	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6
19	60.1	47.0	20.9	20.9	44.4	54.9	34.0	20.9	26.1	57.5	78.4	44.4	28.7	44.4	62.7	28.7	7.8	13.1	5.2	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6
20	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6
21	5.2	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6
22	5.2	2.6	2.6	13.1	10.4	7.8	7.8	5.2	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6
23	5.2	7.8	5.2	7.8	7.8	5.2	5.2	5.2	5.2	5.2	5.2	44.4	54.9	34.0	23.5	5.2	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6
24	5.2	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6
25	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6
26	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
27	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
28	2.6	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
29	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
30	0.0	2.6	2.6	5.2	5.2	5.2	2.6	2.6	2.6	2.6	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
MAX.	60.1	47.0	20.9	23.5	44.4	54.9	34.0	122.8	83.6	57.5	78.4	44.4	67.9	73.1	67.9	49.6	185.5	13.1	20.9	57.5	13.1	26.1	18.3	26.1	18.3	28.7	
MIN.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
PROM.	3.7	3.0	2.4	2.9	3.2	3.5	3.3	6.0	5.6	6.4	9.4	6.7	12.5	12.0	12.5	6.4	10.4	2.1	2.0	4.0	2.3	2.2	2.1	3.0			

* : Código ausencia de datos por instalación estación
 + : Código ausencia de datos por falta de energía eléctrica temporalmente
 : N° de datos validos : 720
 : Recuperación de datos : 100 %
 D : Día de medición, correspondiendo el día 1 al 01.04.98 y el día 30 al 30.04.98.
 H : Hora de medición a la cual corresponde el promedio horario.



SEB-10081

MONITOREO DE CALIDAD DEL AIRE

TABLA 3.

LUGAR : Cuerpo de Bomberos
 PERIODO : 2 al 31 de Marzo de 1998
 VARIABLE : ANHIDRIDO SULFUROSO (SO2)
 UNIDAD : µg/m3N

D/H	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM.	
1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	240.3	305.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	305.6	0.0	22.7
3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	49.6	15.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	49.6	0.0	2.7
5	0.0	0.0	0.0	0.0	20.9	5.2	0.0	0.0	0.0	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	20.9	5.2	0.0	20.9	0.0	2.3
6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.2	13.1	0.0	0.0	13.1	0.0	0.8
7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	44.4	96.7	94.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	62.7	0.0	96.7	0.0	12.4
8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	86.2	47.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	86.2	0.0	5.6
9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
10	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
11	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
12	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
13	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
14	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
15	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
16	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
17	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
18	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
19	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
20	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
21	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
22	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
23	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
24	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
25	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
26	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
27	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
28	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
29	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
30	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
MAX.	0.0	0.0	0.0	0.0	20.9	54.9	0.0	15.7	0.0	2.6	337.0	138.4	96.7	143.7	39.2	240.3	305.6	0.0	0.0	31.3	13.1	135.8	23.5	0.0	0.0	0.0	0.0	0.0
MIN.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
PROM	0.0	0.0	0.0	0.0	1.1	2.0	0.0	0.5	0.0	0.1	13.1	11.5	10.8	9.6	2.4	13.3	13.5	0.0	0.0	1.2	0.5	9.5	1.6	0.0	0.0	0.0	0.0	0.0

* : Código ausencia de datos por instalación estación
 + : Código ausencia de datos por falta de energía eléctrica temporalmente
 704 : N° de datos validos
 100 % : Recuperación de datos
 D : Día de medición, correspondiendo el día 1 al 02.03.98 y el día 30 al 31.03.98.
 H : Hora de medición a la cual corresponde el promedio horario.

TABLA N°2
 ESTACION : BOMBEROS
 PARAMETRO : SO2
 UNIDAD : ug/m3N
 PERIODO : Febrero 1998

DIA	HORAS																								PROMI	MAX	MIN		
	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23					
1	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	23	238	3		
2	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	10	68	3		
3	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	10	50	3		
4	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	9	37	3		
5	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	9	50	3		
6	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	9	26	3		
7	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	11	78	3		
8	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	10	31	3		
9	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	13	55	3		
10	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	21	65	3		
11	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	13	55	3		
12	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	13	110	3		
13	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	7	42	0		
14	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	8	58	3		
15	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	5	71	0		
16	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	5	26	0		
17	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	5	63	0		
18	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	10	86	0		
19	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	20	207	5		
20	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	34	40	3		
21	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	73	68	3		
22	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	5	15	52	3	
23	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	8	10	92	3	
24	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	5	10	11	71	3
25	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	8	8	37	3	3
26	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	5	13	110	3	3
27	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	5	18	34	0	0
28	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	5	8	34	0	0

(*) = Sin Dato

TABLA N°2
 ESTACION : BOMBEROS
 PARAMETRO : SO2
 UNIDAD : ug/m3N
 PERIODO : Enero 1998

DIA	HORAS																															PROMI	MAX	MIN
	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23										
1	5	3	3	5	3	3	3	3	3	3	3	3	10	71	37	3	3	3	3	3	3	3	3	3	10	8	71	3						
2	10	5	3	3	0	3	3	3	3	3	10	8	5	3	5	3	3	3	3	3	3	5	8	5	5	5	21	0						
3	5	3	3	3	3	3	3	0	3	3	3	21	8	8	5	5	5	5	5	5	5	3	5	13	5	5	21	0						
4	8	10	10	8	5	5	5	3	3	5	16	10	8	3	3	3	3	3	3	3	3	3	5	5	5	7	16	3						
5	16	8	3	3	3	3	3	3	3	3	10	34	5	5	3	3	3	3	3	3	3	5	5	5	5	6	34	3						
6	8	8	10	8	8	5	5	5	5	5	5	13	31	58	60	21	10	10	10	5	5	5	5	5	5	13	60	3						
7	3	3	3	3	0	0	0	0	0	0	3	3	30	21	8	3	3	3	3	3	3	3	3	3	3	5	50	0						
8	3	0	3	0	0	0	0	0	0	0	0	3	0	13	16	5	5	5	5	5	5	5	5	5	5	3	16	3						
9	5	3	3	3	3	3	3	3	3	3	3	10	16	10	8	13	13	8	10	8	8	3	3	3	5	6	16	3						
10	5	8	5	3	3	3	3	3	3	3	3	3	37	18	5	8	16	16	3	3	3	3	5	5	5	4	10	3						
11	5	3	3	3	3	3	3	3	3	3	3	5	5	8	81	50	8	13	8	18	8	5	5	5	5	6	37	0						
12	5	5	3	3	3	3	3	3	3	3	3	3	3	8	8	50	13	13	8	18	8	5	5	5	5	11	81	3						
13	5	5	10	5	3	3	3	3	3	3	3	3	10	18	42	24	3	3	5	13	3	3	5	5	5	7	42	3						
14	5	5	5	5	3	3	3	3	3	3	5	16	10	21	10	5	5	5	5	5	5	5	5	5	5	5	21	3						
15	10	13	5	5	5	3	3	3	3	3	3	29	13	16	8	5	5	5	5	5	5	5	5	5	5	8	29	3						
16	8	5	3	3	3	3	3	3	3	3	3	8	13	21	5	5	5	5	5	5	5	5	5	5	5	7	29	3						
17	5	5	3	3	3	3	3	3	3	3	5	5	10	68	81	73	37	21	21	21	21	21	10	10	10	12	47	3						
18	5	5	5	5	5	3	3	3	3	3	5	5	5	24	10	16	42	21	21	21	21	47	10	10	10	12	47	3						
19	8	5	5	3	3	5	8	16	21	18	8	10	47	26	39	16	8	8	8	5	5	5	5	5	5	12	47	3						
20	5	5	5	3	3	3	3	3	3	3	3	5	26	26	13	3	3	3	3	3	3	3	5	5	5	6	26	3						
21	5	5	3	3	3	3	3	3	3	3	10	34	13	5	8	8	8	8	5	5	5	8	16	16	8	34	5							
22	13	10	10	8	5	5	5	5	5	5	8	29	73	84	24	5	26	5	5	5	5	5	5	5	5	16	84	5						
23	13	13	5	3	3	0	0	0	0	0	0	0	0	24	58	8	3	3	3	3	3	3	3	3	3	6	58	0						
24	0	5	8	8	5	8	8	8	8	8	8	16	42	31	31	24	3	3	3	3	3	8	16	16	12	42	0							
25	8	5	5	3	3	3	3	3	3	3	10	16	31	58	47	18	10	3	3	3	3	3	3	3	3	9	55	3						
26	13	13	10	10	8	8	8	8	8	8	16	16	31	58	47	18	10	3	3	3	3	3	3	3	3	11	58	3						
27	5	8	10	8	8	5	5	5	5	5	5	5	47	37	42	10	5	5	5	5	5	5	5	5	5	11	47	5						
28	10	5	3	3	3	0	0	3	3	3	8	44	50	37	21	5	5	5	5	5	5	5	5	5	5	10	50	0						
29	31	16	10	8	8	8	8	8	8	8	13	13	8	71	26	8	8	8	8	8	8	8	8	8	8	13	71	3						
30	5	5	5	5	5	5	5	5	5	5	39	63	71	71	55	50	37	52	13	13	13	13	13	13	13	24	71	3						
31	5	3	3	0	0	0	3	5	8	8	3	3	39	42	42	24	34	42	42	42	42	42	42	42	42	13	42	0						

(*) = Sin Dato

TABLA N°2
 ESTACION : BOMBEROS
 PARAMETRO : SO2
 UNIDAD : ug/m3N
 PERIODO : Diciembre 1997

DIA	HORAS																								PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24			
1	5	5	5	3	3	3	3	3	5	5	5	21	26	21	13	13	16	16	18	10	29	13	5	5	11	31	3
2	3	3	3	3	3	3	3	5	13	18	16	5	8	10	16	21	16	18	10	5	3	5	10	5	9	21	3
3	5	3	3	3	3	3	3	3	3	3	3	3	3	5	39	39	13	18	24	26	29	8	5	31	39	3	
4	8	5	10	18	13	13	8	8	5	5	5	5	5	44	63	65	50	39	42	42	10	26	3	3	65	3	
5	5	16	8	3	3	3	3	5	5	8	5	21	55	47	21	39	21	5	5	3	3	3	3	12	55	3	
6	5	5	3	3	3	3	3	0	3	3	3	3	3	3	47	21	24	16	16	3	5	3	3	8	47	0	
7	21	8	5	5	5	3	3	3	5	5	5	3	5	5	5	5	5	29	18	21	10	13	26	13	9	29	3
8	5	5	5	5	3	3	3	3	3	3	3	3	3	3	13	366	8	21	10	5	5	5	5	20	366	3	
9	5	5	26	47	94	196	94	10	5	3	3	3	3	0	0	3	16	152	*	*	*	24	13	8	32	196	0
10	16	10	5	5	5	3	5	26	42	29	18	5	3	3	3	202	21	21	18	5	5	5	3	20	202	3	
11	5	5	5	3	3	5	5	5	18	21	16	13	37	144	26	21	97	89	10	21	8	5	5	24	144	3	
12	5	3	3	3	3	3	3	3	8	3	10	21	18	10	18	16	18	8	3	5	5	5	5	3	8	21	3
13	5	21	31	18	10	8	8	8	8	10	29	65	55	81	16	5	8	5	5	3	3	3	3	31	18	81	3
14	5	5	3	3	3	3	3	0	3	5	10	42	5	3	5	10	3	16	13	5	5	5	5	7	42	0	
15	5	5	3	3	3	3	3	3	3	3	0	0	0	0	3	3	3	8	8	5	5	5	3	3	8	0	
16	3	8	3	5	3	3	3	3	3	3	5	26	10	3	5	10	10	13	5	5	5	5	5	5	6	26	3
17	8	8	5	5	5	5	5	5	5	5	31	42	34	13	21	13	16	13	13	5	3	5	3	11	42	3	
18	3	5	5	8	5	5	3	3	3	5	5	26	44	13	8	16	13	5	13	5	5	8	5	5	9	44	3
19	5	5	5	5	5	5	5	5	5	8	10	5	5	34	18	29	16	5	5	5	5	5	5	9	34	5	
20	5	5	3	3	3	3	3	3	3	5	5	3	3	3	39	5	16	8	5	3	3	3	5	6	39	3	
21	5	3	3	3	3	3	3	5	3	3	5	29	24	37	31	10	5	5	10	5	3	5	5	9	37	3	
22	5	5	3	3	3	3	3	3	3	5	5	16	24	5	5	5	5	5	5	5	5	5	5	6	24	3	
23	5	8	5	3	3	0	3	3	3	3	3	3	3	10	37	21	3	5	3	3	3	5	5	6	37	0	
24	5	5	5	3	5	5	3	3	3	3	3	3	3	3	5	10	21	21	3	3	3	3	5	6	21	3	
25	8	8	10	10	5	3	3	3	3	3	5	3	3	8	16	13	10	16	8	5	5	8	5	8	31	3	
26	5	3	3	3	0	3	3	3	3	10	55	76	79	29	18	10	3	3	3	5	3	3	5	14	79	0	
27	5	8	5	5	5	3	3	3	3	3	3	3	3	5	5	5	0	0	3	3	3	3	5	4	8	0	
28	8	8	3	3	3	3	3	0	3	3	0	0	21	37	29	26	18	5	5	5	5	8	5	9	37	0	
29	5	8	8	5	5	3	3	3	5	5	5	5	39	34	29	13	3	3	3	3	3	3	5	9	39	3	
30	5	5	8	3	3	3	3	3	3	3	3	3	3	3	3	10	39	37	5	5	5	5	5	7	39	3	
31	8	5	5	5	5	3	3	3	5	3	16	37	10	5	5	5	5	5	3	3	3	3	5	7	37	3	

(*) = Sin Dato

TABLA N°2
 ESTACION : BOMBEROS
 PARAMETRO : SO2
 UNIDAD : ug/m3N
 PERIODO : Noviembre 1997

DIA	HORAS																								PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24			
1	3	3	3	3	3	0	0	0	0	3	3	3	3	3	5	5	16	21	24	21	5	8	8	5	6		
2	5	3	3	3	3	3	3	3	3	3	8	8	13	16	3	3	3	3	3	3	3	5	5	5	24		
3	3	3	3	0	0	0	0	0	0	0	3	3	0	0	0	21	3	5	3	3	3	5	3	3	16		
4	3	3	0	0	0	0	0	0	0	3	18	10	76	34	5	5	5	5	5	5	5	5	5	3	21		
5	3	3	3	3	3	3	3	3	3	3	3	18	26	86	84	39	8	8	3	3	3	5	3	8	76		
6	3	3	3	3	3	3	3	3	3	3	3	3	3	3	0	3	10	10	3	16	3	5	5	3	86		
7	5	3	3	3	3	3	3	3	3	3	3	5	5	5	5	44	29	21	8	5	5	5	3	3	16		
8	3	3	3	3	3	3	3	3	3	3	3	8	5	3	3	5	8	8	18	8	5	5	5	7	44		
9	5	5	3	3	3	3	3	3	3	3	3	10	10	8	13	16	8	3	3	3	3	3	5	4	18		
10	3	3	3	3	3	3	3	3	3	3	0	0	0	0	0	0	0	0	3	3	0	0	3	5	16		
11	3	0	0	0	0	0	0	0	0	0	0	3	10	3	5	3	3	3	0	0	3	3	3	2	10		
12	0	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	2	5	0		
13	3	3	3	3	3	3	3	3	3	3	5	5	5	5	5	5	5	3	5	5	3	5	5	2	5	0	
14	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	4	8	3		
15	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	5	3	
16	5	5	5	5	5	5	5	5	5	5	3	5	5	5	5	5	5	5	5	5	5	5	5	5	8	3	
17	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	
18	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	2	3	0	
19	3	0	0	0	0	0	0	0	0	0	3	3	0	0	3	3	3	3	3	3	3	3	3	2	5	0	
20	5	5	3	3	3	3	3	3	3	3	3	3	5	10	5	3	3	3	3	5	5	3	3	2	10	3	
21	3	3	3	3	3	3	3	3	3	3	0	3	0	5	3	3	3	3	3	3	3	3	3	2	5	0	
22	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	5	3	
23	5	5	5	5	5	5	5	5	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	5	8	3	
24	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	5	0	
25	5	5	3	3	3	3	3	3	3	5	21	55	47	26	8	5	8	5	5	3	3	3	3	10	55	0	
26	3	3	3	3	3	3	3	3	3	3	3	31	89	89	3	5	3	5	5	3	3	5	16	12	89	3	
27	5	5	3	5	8	5	3	3	3	*	*	*	*	*	39	5	5	5	5	5	5	8	8	8	8	3	
28	8	5	5	5	3	3	3	3	3	5	5	42	34	10	8	5	5	5	5	5	5	5	8	42	3		
29	5	5	3	3	3	3	3	3	3	3	3	8	8	16	8	5	5	5	5	3	3	3	4	16	3		
30	8	5	3	3	3	3	3	3	3	5	5	5	10	21	16	10	8	13	8	10	10	10	8	21	3		

(*) = Sin Dato

TABLA N°2
 ESTACION : BOMBOS
 PARAMETRO : SO2
 UNIDAD : ug/m3N
 PERIODO : Octubre 1997

DIA	HORAS																								PROM	MAX	MIN		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24					
1	5	3	3	3	3	3	3	3	3	3	5	29	13	10	5	8	39	18	21	5	5	5	5	5	9	39	3		
2	5	3	3	3	3	3	3	3	3	3	5	78	18	8	16	29	5	3	3	3	3	3	3	3	3	5	29	0	
3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	78	0	
4	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	8	0	
5	3	3	3	3	3	3	3	3	3	3	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	8	0	
6	3	0	0	0	0	0	0	0	0	0	3	21	24	39	76	21	5	3	3	3	3	3	3	3	3	3	76	0	
7	3	3	0	0	0	0	0	0	0	0	3	0	3	8	8	8	13	5	3	3	3	3	3	3	3	3	13	0	
8	5	5	3	3	3	3	3	3	3	3	3	3	5	24	21	29	24	5	5	5	5	5	5	5	5	5	29	3	
9	3	3	3	0	0	0	0	0	0	0	5	21	29	89	21	5	3	3	3	3	3	3	3	3	3	3	89	0	
10	3	3	0	0	0	0	0	0	0	0	0	3	10	42	26	10	16	24	8	5	5	5	5	5	5	5	42	0	
11	5	3	3	3	3	3	3	3	3	3	5	5	5	5	8	10	10	13	10	5	5	5	5	5	5	5	13	0	
12	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	0	0	3	3	3	3	3	3	3	5	0	
13	3	3	3	3	3	3	3	3	3	3	3	3	3	37	0	0	0	3	3	3	3	3	3	3	3	3	37	0	
14	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	5	10	5	3	3	3	3	3	3	3	3	10	3	
15	5	3	3	3	3	3	3	3	3	3	5	13	16	10	10	10	10	8	3	3	3	3	3	3	3	3	16	0	
16	3	3	3	3	3	3	3	3	3	3	3	3	3	13	5	3	3	3	3	3	3	3	3	3	3	3	13	0	
17	5	5	5	5	3	3	3	3	3	3	3	3	5	5	13	16	26	13	5	3	3	3	3	3	3	3	26	3	
18	3	3	3	3	3	3	3	3	3	3	3	0	3	3	3	10	34	5	8	5	3	3	3	3	3	3	34	0	
19	3	3	3	3	3	3	3	3	3	3	0	5	5	29	21	5	3	3	3	3	3	3	3	3	3	3	29	0	
20	5	5	5	5	3	3	3	3	3	3	31	5	5	13	13	8	5	5	5	5	3	3	3	3	3	5	31	3	
21	3	3	3	3	3	3	3	3	3	3	3	3	3	3	16	21	10	5	3	3	3	3	3	3	3	3	21	3	
22	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	0
23	5	5	3	3	3	3	3	3	3	3	*	*	*	*	16	5	5	3	3	3	3	3	3	3	3	3	16	3	
24	3	3	3	3	3	3	3	3	3	3	3	3	3	31	5	5	5	5	3	3	3	3	3	3	3	3	31	0	
25	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	0
26	3	3	5	5	5	3	3	3	3	3	3	3	3	3	3	8	10	8	5	5	5	5	5	5	5	5	10	3	
27	5	3	3	3	3	3	3	3	3	3	3	3	18	16	16	3	3	3	3	3	3	3	3	3	3	3	16	3	
28	3	3	0	0	0	0	0	0	0	0	0	3	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29	3	3	3	3	3	3	3	3	3	3	5	13	21	8	5	5	5	5	3	3	3	3	3	3	3	3	5	3	0
30	3	0	0	0	0	0	0	0	0	0	3	21	47	8	3	3	3	3	3	3	3	3	3	3	3	3	3	21	0
31	5	5	5	3	3	3	3	3	3	5	5	5	5	5	5	5	5	44	97	26	5	5	5	5	5	5	47	3	

(*) = Sin Dato

TABLA N°3
 ESTACION : BOMBEROS
 PARAMETRO : SO2
 UNIDAD : ug/m3N
 PERIODO : Agosto 1997

DIA	HORAS																															PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24										
1	3	3	3	3	0	0	0	3	3	3	5	5	21	13	3	3	3	3	3	3	3	3	3	5	3	4	21	0						
2	3	3	3	0	3	0	0	0	0	3	3	5	8	8	3	3	3	3	3	3	3	3	3	3	3	3	3	8	0					
3	3	3	3	3	3	3	3	3	0	3	3	10	26	26	16	16	5	5	5	8	10	8	5	5	5	7	26	3						
4	3	3	0	0	0	0	0	0	0	3	5	21	29	39	110	123	39	8	16	16	16	8	5	5	19	123	0							
5	3	3	3	3	3	3	3	3	3	3	10	21	29	55	55	13	8	21	13	13	8	8	8	5	11	55	0							
6	5	3	3	3	3	3	3	3	3	3	10	5	5	5	5	5	5	5	5	13	10	5	5	5	5	13	0							
7	3	3	3	3	0	0	0	0	0	3	*	*	*	*	29	5	5	8	8	5	5	5	5	5	5	5	29	0						
8	3	3	0	0	0	0	0	0	0	3	3	3	3	3	8	34	13	8	8	8	8	8	8	8	5	34	0							
9	5	5	3	5	8	8	5	5	3	3	5	5	5	3	3	3	3	3	3	5	5	5	5	4	4	8	3							
10	3	5	5	5	5	3	3	3	3	3	13	18	34	34	29	24	24	21	13	37	26	31	10	15	37	3								
11	5	3	3	5	3	5	3	3	3	8	10	10	58	99	199	99	94	94	8	8	8	8	8	32	199	3								
12	26	8	5	5	3	3	3	3	3	21	16	31	50	42	39	52	10	10	10	10	8	8	5	18	52	3								
13	13	13	10	8	10	16	5	5	8	29	29	5	5	8	5	13	10	10	5	5	8	8	5	10	29	5								
14	5	8	3	5	5	3	3	3	3	10	8	5	5	5	3	3	3	3	5	5	5	5	5	4	10	5								
15	5	8	3	3	0	0	0	0	0	3	3	3	3	3	3	3	3	3	5	5	3	3	3	6	10	5								
16	3	3	3	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
17	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3							
18	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
19	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
20	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
21	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
22	3	3	0	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	2	3	3	0							
23	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
24	3	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
25	0	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	0							
26	3	3	3	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
27	5	3	3	3	3	3	3	3	3	3	13	29	24	24	5	5	*	*	31	5	8	8	5	8	31	8	0							
28	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3							
29	3	3	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
30	5	3	3	3	0	0	0	0	0	0	10	5	13	5	5	13	5	5	5	5	5	5	5	5	5	5	5	0						
31	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	5	3	3	5	5	5	5	5	5	5	5	5	3						

(*) = Sin Dato

TABLA N°2
 ESTACION : BOMBEROS
 PARAMETRO : SO2
 UNIDAD : ug/m3N
 PERIODO : Julio 1997

DIA	HORAS																								PROMI	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24			
1	0	0	0	0	0	0	0	0	0	3	3	3	3	0	0	5	3	3	3	3	5	3	3	3	2	5	0
2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	16	3	3	3	3	0	0	3	1	16	0
3	0	0	0	0	0	0	0	0	0	0	3	5	5	10	8	13	18	63	24	10	8	5	3	7	63	0	
4	3	0	0	0	0	0	0	0	3	3	3	3	3	3	3	3	3	3	3	3	0	0	3	1	3	0	
5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	3	3	1	3	0	
6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	5	3	3	1	5	0	
7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	3	3	3	3	3	3	1	3	0	
8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	3	3	0	3	0	
9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	3	3	1	5	0	
10	3	3	3	3	3	3	3	5	3	3	5	5	5	5	5	5	8	5	8	8	3	3	3	4	8	3	
11	3	3	3	3	3	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	3	3	1	3	0	
12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	3	3	1	3	0	
13	3	3	3	3	3	3	3	3	3	3	3	3	3	3	13	5	5	3	3	5	5	3	3	3	13	0	
14	0	0	0	0	0	0	0	0	0	0	3	3	3	3	0	0	0	0	0	3	3	3	3	1	3	0	
15	3	3	3	3	3	3	0	5	3	3	5	5	5	5	8	3	8	5	8	8	5	5	3	5	16	0	
16	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	8	8	8	8	5	8	8	5	13	0	
17	10	8	5	10	8	3	3	10	3	3	3	3	3	3	16	8	5	13	24	47	29	18	16	11	47	3	
18	16	16	16	10	8	3	3	0	0	3	5	5	13	47	8	24	34	8	3	3	3	5	5	6	16	0	
19	3	3	3	3	3	3	3	3	3	10	18	8	18	8	31	16	58	26	8	5	5	3	3	9	47	0	
20	3	3	3	3	3	3	3	3	3	3	5	5	5	5	5	8	8	5	5	5	5	5	3	10	58	0	
21	3	3	3	3	3	3	3	3	3	3	8	5	5	5	5	10	10	5	10	8	5	5	5	7	18	3	
22	16	18	13	5	3	3	3	3	3	3	3	3	3	3	3	10	24	37	58	149	102	65	42	18	149	0	
23	5	3	3	3	3	3	3	3	8	13	13	73	97	8	8	8	5	5	21	29	16	13	10	8	55	5	
24	26	26	16	13	16	47	26	13	8	5	21	16	13	10	8	5	5	5	21	29	16	13	10	8	55	5	
25	18	16	10	10	10	8	5	5	5	10	21	18	10	8	5	5	5	5	5	5	31	84	81	68	84	5	
26	52	34	13	8	5	3	3	3	3	42	8	8	5	3	3	3	3	3	24	34	21	29	31	29	52	3	
27	24	24	47	34	18	13	16	13	10	8	5	3	3	3	10	26	55	21	39	16	16	10	16	19	55	3	
28	16	8	5	5	3	3	3	5	5	8	5	5	16	5	3	8	5	3	3	5	5	5	5	6	18	3	
29	5	3	3	3	3	3	3	3	3	3	16	10	5	3	3	3	3	5	5	5	5	5	5	5	16	3	
30	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	5	3	5	8	5	5	5	5	5	8	3	
31	5	3	3	3	3	3	3	3	3	3	5	5	5	5	18	5	3	5	5	5	5	5	5	5	18	3	

(*) = Sin Dato

TABLA N°2
 ESTACION : BOMBEROS
 PARAMETRO : SO2
 UNIDAD : ug/m3N
 PERIODO : Junio 1997

DIA	HORAS																								PROM	MAX	MIN	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24				
1	13	10	10	10	10	10	10	10	10	10	10	10	24	21	16	13	13	13	13	16	16	16	16	13	14	24	10	
2	13	13	10	10	10	10	10	10	10	10	10	16	29	47	10	26	10	10	10	13	13	16	13	15	47	10		
3	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	
4	13	13	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	
5	10	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	
6	13	13	13	13	10	10	10	10	10	13	13	13	13	13	13	84	68	34	18	18	16	16	16	18	84	8	8	
7	13	13	10	10	10	10	10	10	10	10	10	10	10	10	10	26	26	24	16	16	13	13	13	14	26	10	10	
8	13	13	10	10	10	8	8	8	8	8	8	8	8	8	8	10	10	10	10	10	10	10	10	10	10	10	10	
9	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	
10	13	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	
11	10	10	10	8	8	8	8	8	8	8	8	8	8	8	8	0	0	0	0	0	0	0	0	9	13	0	0	
12	13	10	10	16	16	16	16	16	16	13	13	13	13	13	13	13	10	10	10	10	10	10	10	10	16	10	10	
13	10	10	16	16	16	16	16	16	16	13	13	13	13	13	13	13	10	10	10	10	10	10	10	10	16	10	10	
14	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	10	10	10	10	10	10	10	10	10	13	10	10	
15	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	10	10	10	10	10	10	10	10	10	10	13	10	10
16	10	10	13	13	13	13	13	13	13	13	13	13	13	13	13	10	10	10	10	10	10	10	10	10	10	13	10	10
17	10	10	13	13	13	13	13	13	13	13	13	13	13	13	13	10	10	10	10	10	10	10	10	10	10	13	10	10
18	10	10	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
19	13	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	13	10	10
20	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
21	13	47	5	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
22	13	13	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10
23	10	10	10	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
24	10	10	8	5	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
25	10	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
26	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
27	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28	0	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(*) = Sin Dato

TABLA N°2
 ESTACION : BOMBEROS
 PARAMETRO : SO2
 UNIDAD : ug/m3N
 PERIODO : Mayo 1997

DIA	HORAS																								PROM	MAX	MIN		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24					
1	8	8	8	8	8	31	8	5	8	8	8	10	10	10	8	8	8	8	8	8	10	13	10	10	10	10	31	5	
2	47	10	8	8	8	8	8	8	8	8	8	10	10	10	10	10	10	10	10	10	16	13	13	13	13	12	47	8	
3	10	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	13	13	13	13	10	10	13	8	
4	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	21	16	13	10	10	10	13	8	
5	13	10	10	8	8	8	8	10	8	8	13	16	18	18	13	13	13	10	10	10	13	13	13	13	11	11	39	8	
6	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	18	21	26	18	16	18	18	8	
7	16	13	10	10	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	21	21	18	16	14	68	8	8	
8	13	10	10	10	10	8	8	8	8	8	8	8	8	21	13	13	13	13	13	13	13	13	13	10	16	50	8	8	
9	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	16	16	16	16	16	16	16	8	8
10	10	8	8	8	8	8	8	8	8	8	13	16	13	16	18	13	13	13	13	13	3	16	16	16	10	16	16	8	8
11	13	13	10	10	10	8	8	8	8	10	10	10	13	10	10	10	10	10	10	10	13	13	13	10	10	10	11	18	3
12	10	8	8	8	8	8	8	8	8	10	10	24	47	168	34	13	13	13	13	13	10	13	13	10	8	168	8	8	
13	8	8	8	8	8	5	5	8	8	8	21	29	37	13	13	13	10	10	10	10	10	10	10	8	10	12	37	5	
14	10	10	8	8	8	8	8	10	10	10	10	10	10	13	34	63	24	24	16	13	13	13	13	10	10	12	37	8	
15	13	10	8	8	8	8	8	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	14	63	8	
16	10	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	16	16	16	16	16	16	16	8	8
17	13	10	10	10	10	10	10	10	10	10	16	34	47	65	24	18	16	13	13	13	3	16	16	16	10	17	65	10	10
18	10	10	8	8	8	8	8	8	8	8	10	13	10	10	10	102	21	13	13	13	13	13	13	10	10	17	65	10	10
19	10	10	8	8	8	8	8	8	8	8	13	31	259	105	16	13	13	13	13	13	10	10	10	10	10	15	102	8	8
20	13	10	10	10	10	10	10	10	10	13	16	16	24	21	26	24	24	13	13	13	10	10	10	10	10	26	259	8	8
21	10	10	8	8	8	8	8	8	8	10	13	31	44	39	13	10	10	10	10	10	16	16	13	13	10	14	26	10	10
22	10	8	8	8	8	8	8	13	13	21	76	37	21	26	58	42	39	52	42	26	13	13	13	10	14	44	8	8	
23	10	10	10	10	10	10	10	8	8	10	10	10	10	10	10	10	10	10	10	10	16	16	16	16	24	76	8	8	
24	13	13	10	10	10	10	10	10	10	10	21	44	21	16	13	10	10	10	10	10	13	13	13	13	11	16	16	8	8
25	10	10	10	10	10	8	8	8	8	8	10	10	10	10	10	21	21	16	10	10	13	13	13	13	14	44	10	10	
26	10	10	10	10	10	10	10	10	10	10	37	13	13	13	13	10	10	10	10	10	13	13	13	13	11	21	8	8	
27	13	13	10	10	10	10	10	10	10	10	16	29	37	31	21	16	13	13	13	13	16	16	16	16	15	37	10	10	
28	13	10	10	8	8	8	8	8	8	10	10	10	10	10	10	10	10	10	10	10	13	13	13	13	11	16	8	8	
29	13	13	13	13	10	10	10	10	10	10	13	13	13	13	13	10	10	10	10	10	13	13	13	13	12	13	10	10	
30	13	13	13	13	10	10	10	10	10	10	18	21	21	18	18	16	16	13	13	13	13	13	13	13	14	21	10	10	
31	13	10	10	10	10	8	8	8	8	10	10	13	13	13	13	10	10	10	10	10	16	16	13	13	12	16	8	8	

(*) = Sin Dato

TABLA Nº2
 ESTACION : BOMBEROS
 PARAMETRO : SO2
 UNIDAD : ug/m3N
 PERIODO : Abril 1997

DIA	HORAS																														PROM	MAX	MIN				
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24													
1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	8	0					
2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	8	0					
3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	16	128	0					
4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	10	0	0					
5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	10	128	0	0					
6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	26	0	0					
7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	10	0	0					
8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	10	0	0					
9	8	8	5	5	5	5	5	5	5	5	8	8	24	34	10	8	8	8	8	10	10	13	10	10	8	8	8	10	34	5	5						
10	8	5	5	5	5	5	5	8	8	8	8	8	8	5	5	8	8	8	8	10	10	10	10	8	8	8	8	10	10	5	5						
11	5	5	5	5	5	5	5	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	10	5	5					
12	5	5	5	5	5	5	5	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	13	84	5	5				
13	5	5	5	5	5	5	5	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	5	3	3				
14	5	5	5	5	5	5	5	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	3	3				
15	5	5	5	5	5	5	5	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	5	5				
16	5	5	5	5	5	5	5	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	5	5				
17	8	8	3	3	3	3	3	5	5	5	5	16	16	10	10	13	10	10	8	8	8	8	8	8	8	8	8	8	8	8	8	5	5				
18	5	5	5	5	5	5	5	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	5	5				
19	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	5	5				
20	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	5	5				
21	8	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	5	5				
22	5	5	5	5	5	5	5	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	8	5	5			
23	8	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	8	5	5			
24	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	8	5	5			
25	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	8	8	5	5		
26	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	8	8	5	5		
27	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	8	8	8	5	5	
28	13	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	8	8	8	5	5	
29	37	31	13	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	8	8	8	8	8	8	8	8	8	8	8	8	8	5	5
30	8	5	5	5	5	5	5	5	5	5	44	63	24	60	73	50	16	21	18	13	10	10	10	10	10	10	10	10	10	20	73	5	5				

(*) = Sin Dato

TABLA N°2
 ESTACION : BOMBEROS
 PARAMETRO : SO2
 UNIDAD : ug/m3N
 PERIODO : Marzo 1997

DIA	HORAS																								PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24			
1	13	10	10	10	8	8	8	8	8	8	8	18	24	21	13	76	13	10	10	10	10	10	13	13	14	76	8
2	10	10	8	8	8	8	8	8	8	8	8	10	13	21	16	16	10	8	8	8	8	10	13	13	10	21	8
3	10	10	8	8	8	8	8	8	8	8	8	13	29	113	34	13	13	10	10	10	10	13	16	13	22	136	5
4	13	10	10	8	8	8	8	10	8	8	8	13	13	16	16	13	13	8	8	8	8	10	13	13	13	50	8
5	10	10	8	8	8	8	8	8	8	8	8	10	26	29	16	10	8	8	8	8	8	10	13	13	11	29	8
6	13	10	8	8	8	8	8	10	10	10	10	13	84	21	13	10	10	10	10	10	10	13	13	10	14	84	8
7	10	8	8	5	5	5	5	8	8	8	8	13	10	18	24	8	8	8	8	8	8	10	10	9	24	5	
8	10	8	8	5	5	5	5	8	8	8	8	8	16	16	13	8	8	8	8	8	8	13	13	9	29	5	
9	13	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	10	10	10	9	13	8	
10	10	8	8	8	8	8	8	8	8	8	8	8	10	18	16	10	13	10	8	8	8	10	10	9	18	5	
11	8	8	8	5	5	5	5	8	8	8	8	8	5	5	16	13	10	8	10	10	10	13	13	9	16	5	
12	10	10	8	8	8	8	8	8	8	8	8	10	10	10	10	10	10	18	10	10	10	10	10	11	44	8	
13	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	10	10	9	31	5	
14	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	10	10	10	10	10	10	10	10	11	44	8	
15	10	10	10	8	8	8	8	5	5	5	5	8	24	21	34	16	13	18	18	10	10	10	10	12	34	5	
16	10	8	8	8	8	8	8	5	5	5	5	8	8	13	31	13	8	8	8	8	8	13	13	10	31	5	
17	10	8	8	8	8	8	8	5	5	5	5	8	8	13	31	13	13	18	13	13	13	13	10	12	34	5	
18	10	10	8	8	8	8	8	8	8	10	10	18	31	16	16	18	13	13	13	13	13	13	10	12	31	8	
19	8	8	8	8	8	8	8	5	5	5	5	52	47	73	47	86	29	39	13	10	10	13	10	22	86	5	
20	10	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	16	13	47	13	10	13	13	11	47	5	
21	13	10	10	8	8	8	8	10	8	8	8	47	13	0	5	0	3	3	29	0	0	3	3	9	47	0	
22	3	5	5	5	5	5	5	5	5	5	3	0	0	0	13	3	3	3	3	3	3	0	0	3	13	0	
23	0	3	3	3	3	3	3	3	3	3	3	3	3	3	47	5	0	0	0	0	0	0	0	3	47	0	
24	0	0	0	0	0	3	3	0	0	0	0	0	0	3	5	29	68	21	0	0	0	0	0	5	68	0	
25	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	34	24	0	0	0	0	0	0	3	34	0	
26	0	0	0	0	0	0	0	0	0	0	0	13	47	29	68	39	10	0	0	0	0	0	0	9	68	0	
27	0	0	0	0	0	0	0	0	0	0	0	0	0	0	86	44	71	181	58	3	0	0	18	181	0		
28	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3	0	3	0	0	0	0	0	0	3	0	0
29	0	0	0	0	0	0	0	0	0	0	0	16	29	10	3	5	0	0	0	0	0	0	0	3	29	0	
30	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0	0	0	0	0	0	0	0	3	0	0
31	0	0	0	0	0	0	0	0	0	0	0	0	3	26	5	5	5	0	0	0	0	0	0	2	26	0	

(*) = Sin Dato

TABLA N°2
 ESTACION : BOMBEROS
 PARAMETRO : SO2
 UNIDAD : ug/m3N
 PERIODO : Febrero 1997

DIA	HORAS																								PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24			
1	0	0	0	0	0	0	0	0	0	0	0	0	3	21	10	26	24	21	39	21	0	0	0	0	7	39	0
2	0	0	0	0	0	0	0	0	0	0	0	0	8	128	34	55	71	84	42	21	0	0	0	0	11	84	0
3	0	0	0	0	0	0	0	0	0	0	0	209	47	29	26	39	31	18	10	0	0	3	0	0	13	128	0
4	0	0	0	0	0	0	0	0	0	8	86	136	65	65	113	55	13	3	5	0	0	3	0	0	26	209	0
5	0	0	0	0	0	0	0	0	0	3	24	24	63	37	0	0	0	16	42	3	0	0	0	0	24	152	0
6	0	0	0	0	0	0	0	0	0	0	0	5	5	0	0	0	0	0	0	0	0	0	0	0	8	63	0
7	0	0	0	0	0	0	0	0	0	0	5	52	3	5	10	0	0	0	0	0	0	0	0	0	1	10	0
8	0	0	0	0	0	0	0	0	0	0	0	0	84	42	0	0	0	0	0	0	0	3	10	7	84	0	
9	0	0	0	0	0	0	0	0	0	0	0	0	58	141	47	13	16	24	13	5	3	5	3	14	141	0	
10	3	0	0	0	0	0	0	0	0	3	3	3	50	126	94	107	128	8	5	5	5	8	3	23	128	0	
11	3	3	0	0	0	0	0	3	3	3	5	5	65	42	26	8	8	13	18	8	8	8	5	10	65	0	
12	3	3	3	3	0	0	0	3	3	0	8	18	13	18	37	78	55	29	10	3	3	5	3	12	78	0	
13	3	3	0	0	0	0	0	0	0	0	3	3	94	235	97	60	44	5	3	3	8	10	8	13	97	0	
14	3	3	0	0	0	0	0	0	0	0	3	3	42	97	42	34	13	8	8	8	3	5	5	6	37	0	
15	3	3	3	3	3	3	3	0	0	5	37	16	10	5	5	10	10	3	3	3	3	5	3	20	220	0	
16	5	3	3	0	0	0	0	3	3	3	3	3	50	26	13	8	8	5	5	8	8	10	8	32	327	0	
17	3	3	3	3	0	0	0	3	3	5	13	220	102	37	34	8	24	24	18	3	3	5	5	3	3	21	0
18	3	3	3	0	0	0	0	0	0	0	3	60	327	123	147	10	10	8	3	3	3	5	5	3	3	10	0
19	3	3	0	0	0	0	0	0	0	0	0	3	3	3	5	10	21	3	5	5	8	10	8	4	10	0	
20	3	0	0	0	0	0	0	3	3	3	3	3	31	133	58	39	29	5	3	3	3	5	3	14	133	0	
21	5	3	0	0	0	0	0	0	0	3	3	3	5	26	21	5	5	5	3	3	5	5	5	5	26	0	
22	5	3	3	3	3	3	3	3	3	3	3	3	13	10	5	3	3	3	3	3	5	8	3	4	16	0	
23	5	3	3	3	3	3	3	3	3	3	3	16	13	183	8	5	5	5	5	5	5	8	5	14	183	0	
24	5	3	3	3	3	3	3	0	0	0	0	18	92	183	8	489	65	16	5	5	3	5	3	26	489	0	
25	3	3	0	0	0	0	0	0	0	0	0	3	3	3	34	5	5	5	5	5	5	5	5	5	47	0	
26	3	0	0	0	0	0	0	0	0	0	3	3	3	47	3	165	5	5	5	5	5	5	5	5	5	0	
27	3	0	0	0	0	0	0	0	0	3	3	3	3	3	3	26	5	5	5	5	5	5	5	5	5	0	
28	3	0	0	0	0	0	0	3	3	3	3	3	3	3	3	11	8	8	8	8	8	8	8	11	165	0	

(*) = Sin Dato

TABLA N°3
 ESTACION : BOMBEROS
 PARAMETRO : SO2
 UNIDAD : ug/m3N
 PERIODO : Enero 1997

DIA	HORAS																															PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24										
1	3	3	3	3	0	0	0	0	0	16	73	52	73	58	39	21	8	42	8	8	10	5	5	5	5	5	18	73	0					
2	3	3	3	0	0	0	0	0	0	0	21	16	16	5	10	3	3	3	0	0	0	0	3	3	3	3	4	21	0					
3	0	0	0	0	0	0	0	0	0	0	13	34	16	16	16	5	3	3	3	3	3	3	5	5	5	5	5	34	0					
4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	84	76	81	21	5	8	5	5	12	84	0						
5	3	3	3	0	0	0	0	0	0	3	8	50	120	68	31	16	16	13	3	3	0	3	5	3	3	14	120	0						
6	0	0	0	0	0	0	0	0	0	0	0	0	10	21	50	16	42	39	58	31	5	3	3	3	12	58	0							
7	0	0	0	0	0	0	0	0	0	0	16	29	29	8	63	34	10	5	16	10	10	5	3	3	9	63	0							
8	3	0	0	0	0	0	0	0	0	0	18	18	18	18	31	31	34	29	21	10	3	3	3	3	11	34	0							
9	0	0	0	0	0	0	0	0	0	0	13	18	13	37	8	13	24	5	5	0	3	3	3	3	8	37	0							
10	3	0	0	0	0	0	0	0	0	0	8	29	8	5	5	3	3	3	3	3	3	5	5	5	5	8	37	0						
11	3	3	3	0	0	0	0	0	0	0	3	3	3	13	60	37	26	34	8	3	3	3	5	3	3	4	29	0						
12	3	3	3	0	0	0	0	0	0	0	3	3	3	5	44	76	29	8	10	26	10	8	5	5	10	76	0							
13	5	3	0	0	0	0	0	0	0	0	26	60	21	10	34	26	3	3	31	24	5	5	5	3	11	60	0							
14	3	3	0	0	0	0	0	0	0	3	26	29	55	31	68	50	50	73	42	31	5	5	5	3	24	94	0							
15	0	0	0	0	0	0	0	0	0	10	68	44	29	16	21	44	24	5	3	3	3	5	5	5	5	13	68	0						
16	3	0	0	0	0	0	0	0	0	0	3	55	79	65	18	26	10	8	10	5	5	8	8	5	5	13	79	0						
17	3	3	0	0	0	0	0	0	0	3	26	34	10	18	31	24	18	29	8	5	3	8	5	5	10	34	0							
18	3	3	0	0	0	0	0	0	0	0	3	3	42	136	79	47	31	42	31	8	5	8	5	5	19	136	0							
19	5	5	3	3	3	3	3	3	3	3	10	37	31	34	21	26	31	26	24	5	5	8	5	5	13	37	3							
20	3	3	0	0	0	0	0	0	0	0	3	5	63	24	42	13	5	5	5	3	3	8	8	5	8	63	0							
21	5	3	3	3	3	3	3	3	3	3	8	97	42	39	42	39	16	3	5	8	5	8	5	5	15	97	3							
22	3	3	3	3	3	0	0	0	0	0	3	3	47	52	**	**	**	26	10	3	3	5	8	5	9	52	0							
23	0	0	0	0	13	13	13	13	5	8	5	0	136	65	29	5	0	0	0	0	0	0	0	0	0	13	136	0						
24	3	3	3	3	3	3	3	3	3	3	0	0	0	3	131	55	29	5	21	0	0	0	0	0	11	131	0							
25	0	0	0	0	0	0	0	0	0	0	0	0	0	47	178	26	0	0	5	18	0	0	0	0	11	178	0							
26	0	0	0	0	0	0	0	0	0	0	0	0	0	21	128	26	58	5	18	0	0	3	0	0	10	128	0							
27	0	0	0	0	0	0	0	0	0	0	0	0	0	21	31	24	55	8	31	34	3	0	0	0	9	55	0							
28	0	0	0	0	0	0	0	0	0	0	5	89	94	21	0	0	0	0	0	0	0	0	0	0	11	94	0							
29	0	0	0	0	0	0	0	0	0	0	26	34	37	107	34	8	0	0	0	0	0	0	0	0	10	107	0							
30	0	0	0	0	0	0	0	0	0	0	65	71	47	5	21	37	16	0	0	0	0	0	0	0	11	71	0							
31	0	0	0	0	0	0	0	0	0	0	0	0	0	0	113	81	8	8	8	0	0	0	0	0	9	113	0							

(**) = Calibración

CIMM-Ambiental

000148

MONITOREO DE DIOXIDO DE NITROGENO

MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

VARIABLE : DIOXIDO DE NITROGENO (NO₂)

LUGAR : CUERPO DE BOMBEROS

PERIODO : 1 AL 30 DE SEPTIEMBRE DE 1999

UNIDAD : µg/m³ N

D/H	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA	
1-Sep	13.1	9.4	9.4	16.9	16.9	13.1	18.8	31.9	28.2	22.5	18.8	18.8	13.1	9.4	9.4	3.8	7.5	9.4	13.1	28.2	16.9	22.5	22.5	22.5	31.9	3.8	16.5	
2-Sep	13.1	13.1	9.4	13.1	16.9	13.1	18.8	18.8	5.6	13.1	9.4	9.4	13.1	13.1	13.1	13.1	3.8	7.5	3.8	7.5	3.8	3.8	7.5	9.4	18.8	3.8	10.1	
3-Sep	9.4	7.5	9.4	13.1	7.5	9.4	7.5	28.2	13.1	13.1	31.9	31.9	13.1	13.1	16.9	18.8	13.1	13.1	7.5	7.5	28.2	16.9	18.8	16.9	31.9	7.5	15.2	
4-Sep	13.1	7.5	9.4	5.6	0.0	0.0	7.5	31.9	7.5	7.5	5.6	7.5	1.9	7.5	3.8	7.5	5.6	7.5	13.1	13.1	22.5	18.8	7.5	13.1	31.9	0.0	8.9	
5-Sep	7.5	7.5	16.9	13.1	13.1	13.1	16.9	22.5	22.5	22.5	22.5	22.5	7.5	13.1	22.5	9.4	9.4	9.4	13.1	13.1	7.5	9.4	11.3	11.3	22.5	7.5	14.1	
6-Sep	3.8	9.4	9.4	13.1	13.1	18.8	18.8	28.2	18.8	13.1	45.1	18.8	13.1	33.8	184.0	28.2	18.8	13.1	9.4	3.8	9.4	3.8	5.6	3.8	184.0	3.8	22.4	
7-Sep	3.8	0.0	3.8	7.5	3.8	13.1	13.1	5.6	9.4	18.8	18.8	9.4	3.8	9.4	11.3	9.4	15.0	15.0	5.6	9.4	22.5	18.8	13.1	9.4	22.5	0.0	10.4	
8-Sep	9.4	7.5	3.8	3.8	3.8	9.4	18.8	22.5	18.8	18.8	13.1	9.4	3.8	3.8	9.4	9.4	#	C	C	C	C	C	C	9.4	22.5	3.8	10.0	
9-Sep	13.1	16.9	9.4	3.8	3.8	9.4	28.2	9.4	7.5	5.6	3.8	56.3	15.0	9.4	5.6	22.5	9.4	5.6	13.1	16.9	22.5	22.5	18.8	5.6	56.3	3.8	13.9	
10-Sep	9.4	9.4	13.1	13.1	13.1	9.4	18.8	31.9	13.1	9.4	16.9	22.5	18.8	9.4	13.1	18.8	13.1	18.8	18.8	22.5	15.0	18.8	16.9	22.5	31.9	9.4	16.1	
11-Sep	16.9	16.9	18.8	13.1	11.3	13.1	13.1	22.5	16.9	9.4	13.1	37.6	54.5	54.5	18.8	13.1	13.1	18.8	9.4	13.1	0.0	5.6	5.6	9.4	54.5	0.0	14.3	
12-Sep	3.8	0.0	0.0	9.4	9.4	5.6	13.1	16.9	9.4	13.1	37.6	54.5	54.5	18.8	13.1	13.1	18.8	9.4	13.1	0.0	5.6	5.6	9.4	54.5	0.0	14.3		
13-Sep	7.5	9.4	16.9	9.4	9.4	5.6	3.8	13.1	26.3	22.5	9.4	5.6	9.4	7.5	9.4	3.8	9.4	3.8	13.1	35.7	26.3	18.8	22.5	22.5	35.7	3.8	13.4	
14-Sep	18.8	13.1	18.8	13.1	13.1	24.4	28.2	18.8	18.8	13.1	13.1	16.9	18.8	9.4	3.8	9.4	22.5	35.7	22.5	13.1	9.4	41.3	41.3	26.3	28.2	133.3	5.6	24.6
15-Sep	13.1	18.8	13.1	5.6	9.4	13.1	28.2	35.7	28.2	16.9	13.1	13.1	16.9	18.8	9.4	3.8	9.4	46.9	82.6	238.5	50.7	45.1	31.9	238.5	1.9	27.4		
16-Sep	5.6	5.6	3.8	5.6	1.9	5.6	7.5	9.4	7.5	9.4	3.8	3.8	15.0	13.1	18.8	22.5	13.1	9.4	9.4	13.1	18.8	13.1	9.4	22.5	3.8	10.9		
17-Sep	9.4	9.4	3.8	5.6	9.4	3.8	9.4	9.4	82.6	73.2	63.8	26.3	16.9	15.0	15.0	16.9	5.6	18.8	3.8	5.6	3.8	5.6	3.8	82.6	0.0	18.2		
18-Sep	13.1	13.1	18.8	9.4	9.4	0.0	3.8	9.4	82.6	73.2	63.8	26.3	16.9	15.0	15.0	16.9	5.6	18.8	3.8	5.6	3.8	5.6	3.8	82.6	0.0	18.2		
19-Sep	5.6	9.4	3.8	3.8	5.6	3.8	5.6	3.8	7.5	9.4	5.6	9.4	5.6	9.4	3.8	9.4	3.8	9.4	3.8	5.6	3.8	7.5	3.8	3.8	9.4	3.8	6.1	
20-Sep	5.6	0.0	3.8	0.0	1.9	0.0	5.6	3.8	1.9	9.4	13.1	9.4	13.1	9.4	7.5	5.6	3.8	9.4	24.4	13.1	5.6	9.4	5.6	9.4	24.4	3.8	8.1	
21-Sep	9.4	3.8	5.6	3.8	7.5	3.8	9.4	3.8	9.4	3.8	9.4	13.1	9.4	7.5	3.8	7.5	13.1	7.5	9.4	7.5	9.4	5.6	5.6	9.4	15.0	3.8	8.5	
22-Sep	3.8	9.4	11.3	3.8	9.4	7.5	13.1	15.0	13.1	9.4	9.4	9.4	13.1	13.1	13.1	5.6	7.5	5.6	9.4	5.6	3.8	18.8	13.1	18.8	28.2	3.8	12.4	
23-Sep	5.6	7.5	5.6	11.3	0.0	9.4	11.3	9.4	7.5	22.5	28.2	22.5	13.1	13.1	13.1	5.6	5.6	3.8	13.1	13.1	22.5	18.8	11.3	13.1	22.5	3.8	9.9	
24-Sep	5.6	7.5	5.6	3.8	5.6	3.8	5.6	9.4	7.5	3.8	7.5	22.5	13.1	9.4	5.6	9.4	5.6	3.8	5.6	13.1	22.5	18.8	11.3	13.1	22.5	3.8	9.9	
25-Sep	9.4	5.6	3.8	5.6	3.8	5.6	9.4	9.4	7.5	3.8	7.5	22.5	13.1	9.4	3.8	5.6	3.8	5.6	3.8	9.4	28.2	13.1	13.1	28.2	3.8	12.4		
26-Sep	13.1	13.1	11.3	3.8	5.6	5.6	18.8	33.8	16.9	13.1	31.9	22.5	13.1	5.6	7.5	5.6	3.8	13.1	13.1	22.5	37.6	22.5	18.8	9.4	37.6	3.8	14.9	
27-Sep	18.8	9.4	5.6	3.8	5.6	5.6	18.8	33.8	16.9	13.1	31.9	22.5	13.1	5.6	7.5	5.6	3.8	13.1	13.1	22.5	37.6	22.5	18.8	9.4	37.6	3.8	14.9	
28-Sep	9.4	13.1	9.4	7.5	9.4	9.4	16.9	22.5	16.9	13.1	9.4	28.2	13.1	5.6	5.6	9.4	11.3	5.6	9.4	31.9	41.3	31.9	18.8	13.1	41.3	5.6	15.1	
29-Sep	9.4	13.1	9.4	3.8	5.6	5.6	13.1	9.4	28.2	7.5	7.5	9.4	9.4	33.8	18.8	9.4	5.6	7.5	3.8	9.4	7.5	9.4	15.0	5.6	33.8	3.8	10.7	
30-Sep	5.6	5.6	0.0	0.0	0.0	0.0	5.6	9.4	3.8	11.3	5.6	9.4	13.1	13.1	5.6	7.5	3.8	7.5	7.5	13.1	108.9	50.7	31.9	31.9	108.9	0.0	14.6	
MAXIMA	18.8	18.8	18.8	16.9	16.9	18.8	28.2	35.7	82.6	73.2	63.8	56.3	54.5	33.8	184.0	28.2	18.8	22.5	133.3	82.6	238.5	50.7	45.1	31.9	31.9	3.8	3.8	
MINIMA	3.8	0.0	0.0	0.0	0.0	0.0	3.8	3.8	1.9	3.8	3.8	3.8	1.9	3.8	3.8	3.8	3.8	3.8	1.9	0.0	3.8	3.8	3.8	3.8	3.8	3.8	3.8	
MEDIA	9.5	9.1	8.9	7.9	7.8	8.3	13.3	18.8	16.3	14.8	16.0	17.0	12.8	12.9	16.9	10.9	9.3	9.8	15.9	16.8	27.3	17.0	14.6	13.3	13.3	3.8	3.8	

:
 C :
 + :
 745 :
 99.3 % :
 Día de Medición :
 Hora de Medición :
 # :
 C :
 + :
 745 :
 99.3 % :
 Día de Medición :
 Hora de Medición :

Nota importante al reverso

MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

LUGAR : CUERPO DE BOMBEROS
 PERIODO : 01 DE JULIO AL 31 DE JULIO DE 1999
 VARIABLE : DIOXIDO DE NITROGENO (NO₂)
 UNIDAD : µg/m³N

D/H	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	
1-Jul	18.8	16.9	13.1	13.1	13.1	13.1	16.9	16.9	22.5	22.5	18.8	9.4	13.1	13.1	18.8	9.4	9.4	13.1	24.4	41.3	28.2	45.1	28.2	22.5	28.2
2-Jul	13.1	18.8	13.1	7.5	13.1	7.5	22.5	31.9	33.8	28.2	18.8	31.9	26.3	9.4	9.4	3.8	5.6	13.1	24.4	41.3	9.4	13.1	105.1	41.3	
3-Jul	31.9	31.9	13.1	3.8	9.4	9.4	24.4	123.9	60.1	31.9	18.8	22.5	18.8	48.9	37.6	9.4	9.4	13.1	28.2	22.5	22.5	37.6	50.7	31.9	
4-Jul	28.2	9.4	18.8	9.4	9.4	9.4	22.5	18.8	22.5	18.8	22.5	18.8	18.8	24.4	13.1	15.0	15.0	18.8	48.8	50.7	28.2	45.1	50.7	41.3	
5-Jul	28.2	28.2	22.5	22.5	28.2	18.8	37.6	31.9	26.3	58.2	54.5	65.7	31.9	18.8	28.2	41.3	45.1	35.7	31.9	24.4	15.0	18.8	13.1	32.4	
6-Jul	13.1	18.8	13.1	9.4	9.4	3.8	9.4	9.4	9.4	9.4	18.8	18.8	13.1	9.4	9.4	22.5	28.2	28.2	18.8	22.5	37.6	31.9	31.9	18.8	
7-Jul	9.4	9.4	13.1	9.4	9.4	5.6	9.4	18.8	9.4	18.8	37.6	18.8	24.4	18.8	18.8	15.0	13.1	24.4	26.3	60.1	41.3	28.2	24.4	24.4	
8-Jul	15.0	5.6	5.6	9.4	9.4	9.4	22.5	13.1	31.9	46.9	31.9	18.8	28.2	18.8	16.9	9.4	13.1	9.4	3.8	13.1	37.6	16.9	13.1	13.1	
9-Jul	22.5	18.8	13.1	22.5	18.8	18.8	22.5	33.8	22.5	16.9	16.9	18.8	13.1	9.4	13.1	13.1	22.5	28.2	13.1	28.2	41.3	28.2	16.9	13.1	
10-Jul	7.5	7.5	7.5	7.5	13.1	22.5	26.3	18.8	22.5	16.9	13.1	26.3	41.3	37.6	13.1	13.1	22.5	28.2	13.1	28.2	41.3	28.2	16.9	13.1	
11-Jul	7.5	3.8	9.4	3.8	13.1	3.8	7.5	9.4	13.1	16.9	31.9	28.2	50.7	16.9	7.5	9.4	7.5	13.1	31.9	41.3	31.9	28.2	31.9	26.3	
12-Jul	22.5	16.9	13.1	7.5	13.1	13.1	22.5	41.3	41.3	31.9	28.2	50.7	16.9	7.5	9.4	9.4	7.5	13.1	31.9	41.3	31.9	28.2	31.9	26.3	
13-Jul	16.9	16.9	13.1	13.1	13.1	22.5	22.5	41.3	33.8	18.8	15.0	13.1	18.8	9.4	9.4	9.4	9.4	13.1	28.2	69.5	50.7	46.9	41.3	69.5	
14-Jul	28.2	28.2	28.2	22.5	13.1	26.3	31.9	45.1	18.8	31.9	50.7	31.9	24.4	18.8	18.8	28.2	18.8	9.4	9.4	26.3	41.3	45.1	56.3	50.7	
15-Jul	41.3	48.8	41.3	28.2	31.9	48.8	35.7	60.1	41.3	31.9	24.4	18.8	18.8	28.2	18.8	9.4	3.8	26.3	46.9	69.5	45.1	56.3	50.7	54.5	
16-Jul	28.2	28.2	26.3	41.3	63.8	54.5	45.1	41.3	37.6	31.9	18.8	13.1	31.9	31.9	28.2	35.7	18.8	58.2	50.7	50.7	58.2	46.9	50.7	54.5	
17-Jul	31.9	13.1	9.4	9.4	5.6	5.6	18.8	18.8	15.0	9.4	22.5	18.8	13.1	13.1	28.2	18.8	18.8	18.8	37.6	28.2	35.7	28.2	31.9	18.8	
18-Jul	15.0	9.4	15.0	9.4	9.4	9.4	15.0	9.4	35.7	92.0	18.8	13.1	13.1	22.5	3.8	3.8	3.8	5.6	13.1	22.5	28.2	28.2	18.8	28.2	
19-Jul	22.5	18.8	15.0	15.0	18.8	31.9	26.3	31.9	41.3	31.9	31.9	37.6	24.4	18.8	13.1	3.8	9.4	9.4	5.6	26.3	26.3	22.5	22.5	41.3	
20-Jul	39.4	18.8	15.0	15.0	28.2	35.7	31.9	35.7	28.2	28.2	24.4	31.9	35.7	18.8	18.8	18.8	28.2	18.8	37.6	45.1	37.6	31.9	45.1	45.1	
21-Jul	31.9	26.3	45.1	41.3	22.5	35.7	45.1	45.1	41.3	22.5	18.8	18.8	46.9	73.2	18.8	18.8	18.8	18.8	31.9	46.9	86.4	28.2	35.7	45.1	
22-Jul	24.4	18.8	18.8	9.4	22.5	18.8	28.2	+	+	+	+	+	+	+	54.5	31.9	13.1	26.3	13.1	13.1	16.9	35.7	95.8	35.7	
23-Jul	37.6	37.6	13.1	13.1	13.1	16.9	28.2	50.7	26.3	37.6	16.9	18.8	13.1	13.1	13.1	50.7	28.2	37.6	41.3	54.5	31.9	31.9	35.7	35.7	
24-Jul	31.9	16.9	28.2	35.7	31.9	31.9	41.3	37.6	46.9	31.9	16.9	58.2	22.5	140.8	22.5	54.5	73.2	77.0	41.3	60.1	54.5	41.3	22.5	140.8	
25-Jul	22.5	22.5	22.5	16.9	18.8	7.5	13.1	28.2	13.1	13.1	28.2	18.8	13.1	56.3	45.1	18.8	22.5	28.2	37.6	54.5	73.2	48.8	31.9	16.9	
26-Jul	16.9	13.1	13.1	7.5	13.1	13.1	22.5	31.9	24.4	16.9	31.9	26.3	22.5	22.5	22.5	22.5	22.5	31.9	26.3	16.9	13.1	13.1	16.9	16.9	
27-Jul	22.5	13.1	22.5	22.5	26.3	26.3	31.9	46.9	31.9	26.3	22.5	22.5	22.5	28.2	37.6	22.5	22.5	45.1	31.9	13.1	13.1	13.1	9.4	3.8	
28-Jul	3.8	3.8	3.8	3.8	9.4	3.8	9.4	16.9	13.1	13.1	7.5	13.1	7.5	13.1	9.4	9.4	13.1	16.9	28.2	41.3	46.9	45.1	31.9	28.2	
29-Jul	13.1	13.1	9.4	13.1	9.4	9.4	13.1	24.4	18.8	28.2	22.5	22.5	22.5	22.5	7.5	9.4	3.8	41.3	48.8	45.1	37.6	22.5	56.3	35.7	
30-Jul	22.5	22.5	13.1	13.1	18.8	16.9	35.7	33.8	16.9	33.8	16.9	33.8	45.1	56.3	63.8	48.8	22.5	18.8	13.1	9.4	13.1	13.1	9.4	13.1	
31-Jul	3.8	3.8	3.8	9.4	9.4	3.8	7.5	16.9	31.9	7.5	13.1	13.1	16.9	22.5	7.5	13.1	138.9	63.8	35.7	22.5	13.1	16.9	16.9	18.8	
MAXIMA	41.3	48.8	45.1	41.3	63.8	54.5	45.1	60.1	123.9	60.1	92.0	54.5	65.7	56.3	140.8	50.7	225.3	73.2	77.0	86.4	73.2	228.1	105.1	54.5	
MINIMA	3.8	3.8	3.8	3.8	5.6	3.8	7.5	9.4	9.4	7.5	7.5	9.4	7.5	3.8	3.8	3.8	3.8	3.8	3.8	7.5	7.5	9.4	9.4	3.8	
MEDIA	21.7	18.1	16.5	15.0	17.4	17.9	22.7	30.0	29.3	26.4	27.2	22.3	24.6	22.6	26.1	18.5	27.9	26.4	28.2	34.6	34.4	37.1	35.6	27.8	

Código ausencia de datos por mantenimiento del equipo : #
 Código ausencia de datos por calibración del equipo : C
 Código ausencia de datos por falta de energía eléctrica temporalmente : +
 N° de datos válidos : 735
 Recuperación de datos : 98.8 %
 Dia de Medición :
 Hora de Medición :

Nota Importante al reverso

SEB-10273

MONITOREO DE CALIDAD DEL AIRE

VARIABLE : DIOXIDO DE NITROGENO (NO₂)

LUGAR : CUERPO DE BOMBOS

PERIODO : 1 AL 30 DE JUNIO DE 1999

UNIDAD : µg/m³N

D/H	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA	
1-Jun	15.0	9.4	9.4	9.4	5.6	5.6	9.4	9.4	9.4	16.9	9.4	3.8	9.4	9.4	3.8	5.6	9.4	5.6	5.6	13.1	31.9	26.3	13.1	9.4	22.5	3.8	10.8	
2-Jun	3.8	5.6	3.8	5.6	5.6	3.8	15.0	18.8	9.4	9.4	13.1	13.1	9.4	9.4	9.4	3.8	5.6	9.4	5.6	13.1	31.9	26.3	13.1	9.4	31.9	3.8	10.2	
3-Jun	13.1	15.0	3.8	9.4	15.0	5.6	18.8	15.0	15.0	15.0	15.0	5.6	9.4	15.0	22.5	18.8	22.5	16.9	13.1	22.5	13.1	22.5	28.2	18.8	28.2	3.8	15.4	
4-Jun	13.1	9.4	18.8	18.8	35.7	22.5	9.4	9.4	9.4	15.0	9.4	9.4	9.4	9.4	9.4	18.8	15.0	16.9	18.8	35.7	39.4	31.9	9.4	3.8	39.4	3.8	16.4	
5-Jun	5.6	3.8	5.6	9.4	3.8	0.0	9.4	31.9	16.9	22.5	31.9	31.9	9.4	9.4	13.1	15.0	9.4	9.4	15.0	31.9	28.2	13.1	18.8	31.9	0.0	14.8		
6-Jun	9.4	9.4	9.4	9.4	3.8	5.6	22.5	16.9	15.0	13.1	13.1	28.2	9.4	7.5	3.8	3.8	3.8	3.8	3.8	3.8	31.9	16.9	5.6	9.4	31.9	3.8	11.0	
7-Jun	3.8	0.0	9.4	5.6	9.4	15.0	18.8	16.9	22.5	18.8	18.8	24.4	22.5	26.3	18.8	18.8	18.8	5.6	9.4	3.8	16.9	22.5	13.1	9.4	26.3	0.0	14.6	
8-Jun	9.4	0.0	3.8	3.8	3.8	15.0	24.4	18.8	9.4	18.8	9.4	9.4	9.4	9.4	9.4	9.4	9.4	5.6	5.6	9.4	16.9	22.5	18.8	18.8	24.4	0.0	11.3	
9-Jun	9.4	9.4	15.0	9.4	9.4	3.8	37.6	41.3	28.2	16.9	22.5	26.3	16.9	9.4	9.4	5.6	9.4	18.8	50.7	41.3	56.3	37.6	31.9	35.7	56.3	3.8	23.0	
10-Jun	41.3	60.1	54.5	45.1	13.1	13.1	31.9	24.4	+	+	16.9	22.5	35.7	35.7	60.1	45.1	45.1	69.5	26.3	26.3	26.3	22.5	13.1	9.4	69.5	9.4	33.5	
11-Jun	9.4	9.4	3.8	7.5	13.1	9.4	22.5	41.3	22.5	22.5	50.7	279.8	63.8	41.3	41.3	41.3	37.6	18.8	9.4	37.6	31.9	37.6	31.9	13.1	279.8	3.8	36.6	
12-Jun	13.1	18.8	16.9	22.5	31.9	28.2	22.5	31.9	48.8	41.3	18.8	9.4	9.4	24.4	45.1	24.4	18.8	73.2	63.8	37.6	28.2	18.8	15.0	31.9	73.2	9.4	28.9	
13-Jun	16.9	18.8	13.1	13.1	16.9	13.1	22.5	31.9	22.5	26.3	108.9	28.2	16.9	41.3	13.1	18.8	18.8	31.9	58.2	50.7	35.7	41.3	22.5	13.1	108.9	13.1	28.9	
14-Jun	9.4	16.9	3.8	9.4	15.0	18.8	28.2	31.9	28.2	26.3	13.1	15.0	28.2	22.5	18.8	24.4	22.5	26.3	13.1	46.9	54.5	26.3	41.3	37.6	54.5	3.8	24.1	
15-Jun	35.7	37.6	35.7	31.9	22.5	22.5	28.2	37.6	31.9	28.2	15.0	13.1	35.7	31.9	18.8	13.1	22.5	35.7	15.0	13.1	41.3	41.3	22.5	22.5	37.6	13.1	25.2	
16-Jun	5.6	3.8	7.5	3.8	13.1	18.8	22.5	22.5	28.2	37.6	37.6	18.8	15.0	18.8	41.3	24.4	28.2	31.9	50.7	41.3	41.3	41.3	37.6	13.1	50.7	3.8	25.2	
17-Jun	13.1	16.9	16.9	13.1	9.4	9.4	15.0	13.1	13.1	26.3	18.8	28.2	28.2	18.8	31.9	13.1	9.4	9.4	13.1	24.4	45.1	13.1	37.6	31.9	35.7	45.1	9.4	22.1
18-Jun	18.8	18.8	15.0	15.0	9.4	16.9	18.8	22.5	26.3	28.2	28.2	28.2	18.8	31.9	13.1	9.4	9.4	13.1	24.4	45.1	13.1	37.6	31.9	35.7	45.1	9.4	22.1	
19-Jun	31.9	28.2	37.6	28.2	28.2	28.2	26.3	31.9	26.3	31.9	45.1	56.3	54.5	28.2	24.4	24.4	24.4	24.4	37.6	28.2	35.7	28.2	22.5	13.1	37.6	9.4	21.8	
20-Jun	31.9	45.1	41.3	35.7	31.9	35.7	41.3	37.6	46.9	50.7	133.3	200.9	16.9	48.8	22.5	18.8	9.4	9.4	3.8	13.1	33.8	45.1	16.9	18.8	200.9	3.8	41.2	
21-Jun	9.4	22.5	9.4	9.4	15.0	26.3	13.1	28.2	31.9	26.3	22.5	13.1	9.4	9.4	9.4	9.4	9.4	3.8	3.8	3.8	24.4	24.4	13.1	13.1	31.9	3.8	15.6	
22-Jun	9.4	9.4	13.1	9.4	9.4	9.4	9.4	35.7	13.1	16.9	7.5	13.1	7.5	31.9	54.5	37.6	22.5	13.1	45.1	13.1	13.1	60.1	22.5	18.8	60.1	7.5	21.4	
23-Jun	22.5	13.1	13.1	13.1	22.5	16.9	31.9	22.5	18.8	13.1	9.4	9.4	13.1	15.0	24.4	24.4	22.5	31.9	24.4	28.2	33.8	26.3	22.5	22.5	33.8	9.4	20.3	
24-Jun	18.8	16.9	16.9	13.1	9.4	9.4	16.9	18.8	22.5	31.9	33.8	28.2	13.1	13.1	18.8	13.1	31.9	54.5	37.6	22.5	31.9	37.6	31.9	35.7	54.5	9.4	24.1	
25-Jun	31.9	37.6	35.7	41.3	31.9	37.6	45.1	41.3	41.3	46.9	13.1	7.5	7.5	13.1	9.4	13.1	15.0	31.9	54.5	58.2	48.8	46.9	31.9	45.1	58.2	7.5	32.8	
26-Jun	28.2	22.5	13.1	3.8	7.5	9.4	9.4	18.8	13.1	18.8	18.8	170.9	60.1	18.8	9.4	9.4	13.1	26.3	50.7	33.8	31.9	37.6	18.8	15.0	170.9	3.8	27.5	
27-Jun	9.4	7.5	7.5	5.6	7.5	3.8	5.6	9.4	7.5	7.5	28.2	13.1	13.1	35.7	18.8	9.4	13.1	7.5	13.1	28.2	16.9	22.5	13.1	9.4	35.7	3.8	13.1	
28-Jun	9.4	9.4	15.0	9.4	3.8	3.8	5.6	18.8	24.4	9.4	22.5	18.8	18.8	15.0	13.1	3.8	9.4	16.9	18.8	28.2	31.9	31.9	28.2	31.9	3.8	16.6		
29-Jun	18.8	13.1	15.0	15.0	19.8	13.1	13.1	22.5	22.5	22.5	41.3	26.3	31.9	63.8	15.0	9.4	9.4	3.8	9.4	9.4	16.9	45.1	26.3	13.1	63.8	3.8	20.6	
30-Jun	9.4	9.4	9.4	22.5	28.2	22.5	28.2	35.7	22.5	28.2	18.8	16.9	41.3	26.3	15.0	15.0	9.4	9.4	18.8	24.4	22.5	22.5	28.2	28.2	41.3	9.4	21.4	
MAXIMA	41.3	60.1	54.5	45.1	35.7	37.6	45.1	41.3	48.8	50.7	133.3	200.9	60.1	279.8	63.8	45.1	45.1	73.2	63.8	58.2	56.3	60.1	41.3	45.1	41.3	45.1	45.1	
MINIMA	3.8	0.0	3.8	3.8	3.8	0.0	3.8	9.4	7.5	7.5	5.6	3.8	9.4	7.5	3.8	3.8	3.8	3.8	3.8	3.8	3.8	13.1	9.4	3.8	3.8	3.8	3.8	
MEDIA	15.9	16.6	15.8	14.9	15.3	14.8	19.2	25.6	22.8	23.7	27.8	30.2	20.7	31.7	22.5	17.7	17.1	23.6	26.9	25.4	29.7	30.9	22.3	20.1	22.3	20.1	20.1	

Código ausencia de datos por mantenimiento del equipo : : #
 Código ausencia de datos por calibración del equipo : : C
 Código ausencia de datos por falta de energía eléctrica temporalmente : : +
 N° de datos válidos : : 712
 Recuperación de datos : : 98.9 %
 D : : Día de Medición
 H : : Hora de Medición

MONITOREO DE CALIDAD DEL AIRE

VARIABLE : DIOXIDO DE NITROGENO (NO₂)

LUGAR : CUERPO DE BOMBEROS

UNIDAD : µg/m³N

PERIODO : 1 AL 31 DE MAYO DE 1999

D/H	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA					
1-may	18.8	9.4	13.1	15.0	41.3	22.5	13.1	22.5	20.7	18.8	3.8	5.6	5.6	22.5	15.0	9.4	22.5	15.0	9.4	9.4	9.4	9.4	9.4	9.4	18.8	41.3	3.8	16.1				
2-may	9.4	5.6	9.4	1.9	3.8	1.9	3.8	5.6	5.6	5.6	5.6	15.0	9.4	13.1	22.5	16.9	5.6	5.6	9.4	3.8	5.6	3.8	1.9	9.4	22.5	22.5	1.9	8.2				
3-may	13.1	13.1	9.4	3.8	9.4	9.4	9.4	28.2	9.4	+	+	31.9	22.5	13.1	9.4	5.6	9.4	5.6	16.9	22.5	31.9	28.2	16.9	9.4	31.9	3.8	14.9	18.3				
4-may	16.9	18.8	13.1	22.5	16.9	26.3	31.9	46.9	22.5	9.4	9.4	0.0	15.0	18.8	13.1	13.1	5.6	5.6	18.8	22.5	22.5	37.6	16.9	15.0	46.9	0.0	18.3	12.1				
5-may	15.0	9.4	9.4	13.1	11.3	18.8	16.9	15.0	31.9	15.0	15.0	18.8	9.4	13.1	5.6	+	0.0	1.9	5.6	7.5	5.6	15.0	9.4	9.4	31.9	0.0	12.1	10.9				
6-may	5.6	11.3	5.6	13.1	5.6	1.9	5.6	9.4	3.8	9.4	18.8	18.8	9.4	9.4	5.6	3.8	5.6	13.1	9.4	18.8	28.2	22.5	16.9	9.4	28.2	1.9	10.9	8.2				
7-may	5.6	9.4	1.9	3.8	5.6	9.4	31.9	3.8	9.4	9.4	3.8	5.6	9.4	9.4	9.4	9.4	9.4	+	+	5.6	9.4	3.8	5.6	9.4	31.9	1.9	8.2	14.2				
8-may	3.8	9.4	1.9	9.4	18.8	9.4	22.5	28.2	15.0	13.1	15.0	9.4	3.8	9.4	3.8	9.4	3.8	18.8	13.1	18.8	31.9	22.5	24.4	26.3	31.9	1.9	14.2	13.1				
9-may	15.0	9.4	5.6	5.6	9.4	3.8	13.1	13.1	13.1	13.1	9.4	3.8	15.0	9.4	9.4	9.4	3.8	13.1	18.8	26.3	28.2	26.3	22.5	18.8	28.2	3.8	13.1	16.4				
10-may	22.5	15.0	18.8	18.8	22.5	18.8	31.9	28.2	+	+	+	22.5	9.4	5.6	18.8	26.3	35.7	5.6	5.6	3.8	9.4	5.6	9.4	9.4	35.7	3.8	16.4	10.2				
11-may	18.8	3.8	3.8	9.4	9.4	13.1	22.5	15.0	18.8	9.4	13.1	5.6	5.6	5.6	7.5	5.6	3.8	11.3	15.0	3.8	15.0	3.8	15.0	9.4	22.5	3.8	10.2	29.4				
12-may	3.8	22.5	9.4	5.6	11.3	9.4	18.8	33.8	C	C	C	C	18.8	73.2	+	+	28.2	200.9	22.5	9.4	13.1	5.6	13.1	200.9	3.8	29.4	0.0	9.8				
13-may	9.4	13.1	7.5	5.6	1.9	11.3	9.4	7.5	5.6	7.5	5.6	7.5	9.4	7.5	9.4	7.5	3.8	7.5	15.0	11.3	7.5	7.5	9.4	11.3	24.4	0.0	8.1	8.3				
14-may	9.4	13.1	7.5	5.6	1.9	11.3	9.4	7.5	5.6	7.5	5.6	7.5	9.4	7.5	9.4	7.5	3.8	7.5	15.0	11.3	7.5	7.5	9.4	11.3	24.4	0.0	8.1	7.8				
15-may	3.8	13.1	1.9	7.5	3.8	7.5	5.6	9.4	13.1	9.4	15.0	9.4	13.1	9.4	1.9	9.4	1.9	15.0	3.8	9.4	15.0	9.4	3.8	7.5	15.0	1.9	8.3	9.7				
16-may	7.5	5.6	7.5	9.4	1.9	9.4	1.9	9.4	11.3	9.4	9.4	9.4	9.4	9.4	9.4	9.4	9.4	13.1	9.4	5.6	9.4	13.1	22.5	15.0	22.5	1.9	9.7	3.8	9.9			
17-may	9.4	1.9	9.4	3.8	9.4	7.5	9.4	5.6	9.4	13.1	9.4	9.4	9.4	9.4	9.4	9.4	9.4	13.1	9.4	5.6	9.4	13.1	22.5	15.0	22.5	1.9	9.7	3.8	9.9			
18-may	31.9	26.3	22.5	31.9	31.9	26.3	22.5	22.5	28.2	22.5	18.8	31.9	28.2	22.5	15.0	11.3	9.4	15.0	41.3	41.3	45.1	82.6	46.9	31.9	82.6	22.5	36.1	19.2	3.8	13.3		
19-may	7.5	9.4	13.1	3.8	13.1	9.4	18.8	35.7	9.4	9.4	9.4	9.4	9.4	9.4	9.4	9.4	9.4	13.1	9.4	7.5	3.8	3.8	3.8	5.6	3.8	35.7	3.8	9.9	13.3			
20-may	3.8	9.4	5.6	7.5	5.6	9.4	31.9	15.0	22.5	26.3	28.2	28.2	18.8	5.6	15.0	7.5	15.0	41.3	41.3	45.1	82.6	46.9	31.9	82.6	22.5	36.1	19.2	3.8	13.3			
21-may	31.9	26.3	22.5	31.9	31.9	26.3	22.5	22.5	28.2	22.5	18.8	31.9	28.2	22.5	15.0	11.3	9.4	15.0	41.3	41.3	45.1	82.6	46.9	31.9	82.6	22.5	36.1	19.2	3.8	13.3		
22-may	28.2	22.5	22.5	22.5	22.5	22.5	18.8	22.5	22.5	37.6	18.8	9.4	7.5	9.4	9.4	9.4	3.8	7.5	22.5	54.5	28.2	41.3	45.1	24.4	9.4	54.5	3.8	22.2	13.3			
23-may	18.8	31.9	18.8	9.4	9.4	9.4	18.8	31.9	15.0	15.0	18.8	18.8	18.8	18.8	22.5	9.4	9.4	9.4	0.0	3.8	15.0	9.4	13.1	13.1	31.9	0.0	14.8	10.2	3.8	13.3		
24-may	5.6	3.8	5.6	1.9	15.0	13.1	9.4	-	9.4	18.8	9.4	9.4	9.4	9.4	9.4	9.4	15.0	3.8	5.6	13.1	9.4	13.1	13.1	18.8	18.8	1.9	10.2	3.8	13.3			
25-may	5.6	5.6	5.6	9.4	5.6	13.1	18.8	18.8	16.9	9.4	9.4	5.6	9.4	9.4	18.8	18.8	9.4	15.0	9.4	3.8	13.1	13.1	18.8	5.6	18.8	3.8	11.2	3.8	14.6			
26-may	3.8	5.6	9.4	9.4	5.6	9.4	28.2	18.8	18.8	15.0	16.9	26.3	13.1	9.4	5.6	9.4	3.8	26.3	31.9	22.5	18.8	18.8	15.0	31.9	3.8	14.6	3.8	11.2	3.8	14.6		
27-may	22.5	18.8	18.8	15.0	18.8	18.8	22.5	18.8	24.4	41.3	16.9	9.4	5.6	9.4	5.6	9.4	9.4	13.1	9.4	5.6	0.0	3.8	3.8	3.8	41.3	0.0	14.2	3.8	14.6	3.8	14.6	
28-may	3.8	0.0	5.6	9.4	3.8	13.1	13.1	9.4	13.1	18.8	16.9	9.4	15.0	9.4	9.4	5.6	5.6	22.5	9.4	16.9	18.8	26.3	18.8	22.5	26.3	0.0	14.2	3.8	14.6	3.8	14.6	
29-may	37.6	15.0	22.5	37.6	22.5	26.3	31.9	41.3	22.5	13.1	13.1	31.9	28.2	13.1	16.9	16.9	28.2	35.7	31.9	37.6	26.3	31.9	22.5	9.4	41.3	9.4	25.6	3.8	14.6	3.8	14.6	
30-may	11.3	22.5	18.8	13.1	9.4	3.8	9.4	13.1	9.4	5.6	9.4	22.5	9.4	9.4	9.4	9.4	9.4	7.5	11.3	7.5	7.5	11.3	11.3	22.5	31.9	3.8	12.4	3.8	14.6	3.8	14.6	
31-may	13.1	9.4	0.0	3.8	7.5	3.8	5.6	9.4	9.4	15.0	13.1	9.4	9.4	9.4	9.4	9.4	3.8	11.3	16.9	18.8	22.5	15.0	13.1	41.3	0.0	12.0	3.8	14.6	3.8	14.6		
MAXIMA	37.6	31.9	22.5	37.6	41.3	26.3	31.9	46.9	31.9	37.6	46.9	50.7	46.9	22.5	73.2	28.2	35.7	41.3	200.9	45.1	82.6	46.9	31.9	33.8	33.8	3.8	12.4	3.8	14.6	3.8	14.6	
MINIMA	3.8	0.0	0.0	0.0	0.0	1.9	1.9	5.6	3.8	3.8	3.8	0.0	3.8	5.6	1.9	0.0	1.9	0.0	1.9	0.0	1.9	0.0	1.9	3.8	3.8	3.8	0.0	12.0	3.8	14.6	3.8	14.6
MEDIA	12.7	12.2	10.1	10.6	12.0	11.8	14.7	21.1	14.8	13.7	15.2	14.7	14.3	12.8	14.3	10.1	9.9	13.7	21.6	15.0	18.3	17.7	15.1	14.4	14.4	14.4	3.8	12.4	3.8	14.6	3.8	14.6

Código ausencia de datos por calibración del equipo : : C
 Código ausencia de datos por falta de energía eléctrica temporalmente : : +
 N° de datos válidos : : 728
 Recuperación de datos : : 97.8 %
 D Día de Medición : :
 H Hora de Medición : :

MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

LUGAR : CUERPO DE BOMBEROS VARIABLE : DIOXIDO DE NITROGENO (NO₂)

PERIODO : 1 AL 30 DE ABRIL DE 1999 UNIDAD : µg/m³N

D/H	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA	
1-abr	7.5	3.8	2.8	4.7	6.6	0.0	0.0	1.9	27.2	26.3	18.8	4.7	4.7	0.9	12.2	27.2	28.2	26.3	10.3	33.8	56.3	13.2	3.8	2.8	56.3	0.0	13.5	
2-abr	1.9	2.8	11.3	14.1	0.0	1.0	13.1	1.9	7.5	15.0	24.4	4.7	5.7	9.4	9.4	4.7	8.5	+	+	+	+	7.5	10.3	2.8	24.4	0.0	7.8	
3-abr	1.0	0.0	1.9	2.8	2.8	8.5	1.9	2.9	1.0	6.6	6.6	0.0	1.9	2.8	1.0	1.0	0.0	0.0	0.0	4.7	1.9	5.7	1.9	4.7	8.5	0.0	2.6	
4-abr	5.6	1.9	1.0	1.9	2.8	4.7	3.7	4.7	2.8	2.9	0.0	3.8	0.0	1.9	3.8	5.7	6.6	6.6	5.7	11.3	0.0	2.8	2.8	0.0	11.3	0.0	3.4	
5-abr	4.7	0.9	0.9	3.8	6.6	1.9	0.0	+	+	+	+	+	+	0.9	8.5	1.9	2.8	1.9	0.0	0.0	4.7	1.9	2.9	4.7	8.5	0.0	2.8	
6-abr	10.4	16.9	8.5	1.9	1.0	1.9	4.7	6.6	7.5	6.2	5.7	0.0	6.6	3.8	1.9	1.0	C	C	C	C	5.6	5.7	2.9	0.0	16.9	0.0	4.9	
7-abr	2.8	0.0	4.7	1.9	2.8	3.8	1.0	2.8	0.0	1.9	8.4	6.6	12.2	8.5	13.1	+	+	+	2.8	4.7	0.0	1.9	8.5	3.8	13.1	0.0	4.4	
8-abr	2.8	0.9	0.0	3.8	4.7	16.0	25.4	24.4	18.8	12.2	6.6	7.5	13.1	4.7	2.9	1.9	3.8	2.9	1.9	1.9	13.1	10.3	10.4	6.6	25.4	0.0	8.2	
9-abr	2.8	1.9	2.8	5.6	16.0	6.6	1.9	6.6	4.7	2.9	3.7	3.8	6.6	1.9	0.9	3.8	2.8	+	+	+	+	9.4	10.4	12.2	16.0	0.9	5.3	
10-abr	1.9	1.0	3.7	0.9	3.7	2.9	0.9	15.0	0.9	22.5	6.6	12.2	0.0	6.6	3.8	2.9	2.9	10.3	4.7	6.6	2.8	9.4	3.8	9.4	22.5	0.0	5.5	
11-abr	1.9	0.0	0.9	9.4	18.8	9.4	1.9	0.9	4.7	4.7	7.5	0.0	2.9	8.5	9.4	4.7	0.0	0.9	0.9	2.8	7.5	7.5	9.4	9.4	18.8	0.0	5.2	
12-abr	7.5	1.0	2.8	6.6	5.6	4.7	2.8	0.9	5.6	+	+	+	4.7	5.7	0.9	1.9	0.9	2.8	0.0	7.5	6.6	2.8	8.5	7.5	8.5	0.0	4.1	
13-abr	4.7	6.6	2.8	6.6	1.9	1.9	1.9	3.8	3.7	0.9	0.0	4.7	6.6	5.6	6.6	3.8	7.5	2.8	0.9	2.8	1.9	0.0	5.7	4.7	7.5	0.0	3.7	
14-abr	0.0	5.6	1.0	2.8	1.9	2.8	7.5	5.6	2.8	4.7	1.9	1.9	6.6	4.7	7.5	+	+	+	0.9	9.4	0.9	6.6	4.7	11.3	11.3	0.0	4.3	
15-abr	7.5	1.9	4.7	2.8	8.4	1.9	9.4	1.0	0.0	3.8	4.7	1.0	4.7	12.2	17.8	7.5	7.5	4.7	1.9	7.5	8.5	14.1	16.9	13.2	17.8	0.0	6.8	
16-abr	14.1	6.6	2.8	2.9	1.9	3.8	8.5	4.7	1.9	5.6	7.5	4.7	4.7	4.7	0.9	16.9	+	+	+	+	+	0.9	0.0	0.9	16.9	0.0	4.7	
17-abr	6.6	3.8	5.6	0.0	0.9	0.0	6.6	3.8	8.5	9.4	4.7	3.8	2.8	5.6	1.9	0.0	0.9	1.9	12.2	5.7	6.6	2.8	1.0	0.0	4.7	13.2	0.0	3.5
18-abr	0.9	1.9	1.0	0.0	3.7	1.9	1.9	1.9	6.6	+	+	+	9.4	1.9	5.7	3.8	2.9	3.8	3.8	3.8	4.7	4.7	7.5	7.5	9.4	0.0	3.4	
19-abr	9.4	6.6	2.8	2.8	5.7	3.8	0.0	3.8	3.8	3.8	3.8	3.8	2.8	6.6	4.7	3.8	1.9	3.8	13.1	1.9	0.0	5.7	4.7	3.7	13.1	0.0	4.2	
20-abr	1.9	3.8	2.8	3.8	11.3	13.1	12.2	10.3	4.7	1.0	2.9	4.7	0.0	0.9	0.9	+	+	+	5.6	16.0	16.0	17.8	18.8	6.6	18.8	0.0	7.4	
21-abr	7.5	4.7	3.7	4.7	2.8	0.0	8.5	16.9	5.7	2.8	7.5	9.4	6.6	2.8	4.7	0.9	2.8	8.4	+	+	+	13.1	4.7	0.9	16.9	0.0	6.2	
22-abr	2.9	1.9	2.9	1.9	3.8	4.7	1.9	11.3	3.7	1.9	6.6	6.6	2.8	4.7	0.9	2.8	8.4	+	+	+	+	3.8	1.9	1.9	11.3	0.9	3.8	
23-abr	2.9	1.0	4.7	0.9	3.8	0.9	8.5	11.3	4.7	1.9	6.6	8.5	12.2	1.9	3.8	6.6	9.4	2.8	5.7	4.7	0.0	0.9	6.6	12.2	0.0	4.6		
24-abr	2.9	1.0	4.7	0.9	3.8	0.9	8.5	11.3	4.7	1.9	6.6	8.5	12.2	1.9	3.8	6.6	9.4	2.8	5.7	4.7	0.0	0.9	6.6	12.2	0.0	4.6		
25-abr	4.7	6.6	2.8	6.6	6.6	2.8	2.8	27.3	4.7	9.4	3.8	2.9	0.9	1.9	2.9	9.4	3.8	0.9	1.9	1.9	0.9	5.7	1.9	3.8	27.3	0.9	4.9	
26-abr	5.7	13.1	4.7	4.7	0.9	6.6	5.6	9.4	3.8	+	+	+	3.8	9.4	10.4	15.0	13.1	3.8	1.9	10.3	4.7	13.1	8.5	8.4	15.0	0.9	7.5	
27-abr	4.7	0.0	4.7	13.2	16.9	9.4	15.1	21.6	0.0	2.8	3.8	0.9	8.5	6.6	8.5	1.9	7.5	6.6	3.8	0.9	4.7	4.7	4.7	4.7	21.6	0.0	6.5	
28-abr	15.1	0.0	3.8	0.0	4.7	1.9	1.9	12.2	13.2	3.8	0.0	11.3	1.0	2.8	1.0	+	+	+	5.6	2.9	0.0	1.9	0.9	5.6	15.1	0.0	4.2	
29-abr	9.4	9.4	16.9	4.7	3.8	16.0	15.0	17.9	22.5	35.7	25.4	9.4	14.1	8.5	8.5	11.3	14.1	16.9	10.3	38.5	70.4	20.7	19.8	9.4	70.4	3.8	17.8	
30-abr	2.8	2.9	4.7	4.7	2.9	1.9	0.0	1.9	1.9	4.7	4.7	7.5	4.7	2.9	2.9	0.0	6.6	+	+	+	+	5.7	4.7	4.7	7.5	0.0	3.6	
MAXIMA	15.1	16.9	16.9	14.1	18.8	16.0	25.4	27.3	27.2	35.7	25.4	12.2	14.1	12.2	17.8	27.2	28.2	28.2	13.1	38.5	70.4	20.7	19.8	13.2				
MINIMA	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.9	0.0	0.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0				
MEDIA	5.0	3.8	3.8	4.0	5.1	4.8	5.8	8.0	6.2	7.5	6.6	4.8	5.1	5.1	5.0	5.2	6.6	5.3	4.1	8.1	9.3	6.4	6.3	5.2				

* Código ausencia de datos por instalación y/o retiro de equipo
 C Código ausencia de datos por calibración del equipo
 + Código ausencia de datos por falta de energía eléctrica temporalmente
 673 N° de datos válidos
 78.0 % Recuperación de datos
 D Día de Medición
 H Hora de Medición

Nota Importante al reverso

SEB-10229

MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

LUGAR : CUERPO DE BOMBEROS
 PERIODO : 1 AL 31 DE MARZO DE 1999

VARIABLE : DIOXIDO DE NITROGENO (NO₂)
 UNIDAD : µg/m³N

D/H	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA					
1-mar	+	+	+	+	+	+	+	+	+	29.1	16.8	0.0	0.0	+	+	+	+	+	+	+	+	+	+	+	29.1	0.0	11.5					
2-mar	3.8	4.7	3.8	7.5	4.7	0.9	9.4	9.4	#	7.5	27.3	1.9	18.8	18.8	18.8	9.4	3.8	4.7	1.9	1.8	1.9	5.7	2.9	3.8	+	27.3	1.8	8.5				
3-mar	1.9	4.7	0.9	2.9	1.9	9.4	2.9	9.4	1.9	9.4	1.9	7.5	6.6	2.9	0.9	1.0	1.9	1.8	3.8	1.9	4.7	3.8	4.7	1.9	9.4	0.9	4.8	0.9	4.8			
4-mar	4.7	3.8	1.9	3.8	2.9	6.6	1.9	2.9	2.9	4.7	2.9	7.5	7.5	9.4	9.4	1.9	2.9	1.9	1.9	1.9	2.9	1.0	0.0	9.4	9.4	0.0	4.0	0.0	4.0			
5-mar	1.0	7.5	1.0	0.0	0.9	3.8	1.9	25.3	1.0	6.6	5.7	2.9	1.9	5.7	4.7	+	+	2.8	6.6	3.8	5.7	1.0	1.0	2.8	25.3	0.0	4.2	0.0	4.2			
6-mar	1.9	9.4	9.4	9.4	7.5	1.0	3.8	4.7	5.7	4.7	4.7	2.9	2.9	1.0	1.9	1.0	1.9	0.8	4.7	1.9	2.9	4.7	4.7	3.8	9.4	0.0	3.9	0.0	3.9			
7-mar	3.8	5.7	4.7	3.8	2.9	4.7	7.5	8.5	9.4	4.7	4.7	2.8	2.8	6.6	9.4	4.7	5.7	+	+	15.9	1.9	0.9	1.0	+	15.9	0.9	5.3	0.0	5.3			
8-mar	1.9	3.8	1.9	0.9	0.0	2.9	4.7	9.4	9.4	9.4	2.8	7.5	7.5	7.5	5.7	5.7	4.7	4.7	0.0	1.0	0.0	0.9	1.8	3.8	6.6	9.4	0.0	3.8	0.0	3.8		
9-mar	2.9	8.5	2.8	5.7	+	+	6.6	10.9	18.3	20.7	5.6	2.8	4.7	3.8	3.8	4.7	2.9	3.8	0.0	0.0	0.0	7.5	0.8	0.9	2.9	20.7	0.0	5.5	0.0	5.5		
10-mar	3.8	6.6	3.8	3.8	1.9	0.9	0.8	2.8	2.9	1.0	2.9	0.0	4.7	3.8	7.5	0.9	6.6	0.0	0.0	5.9	0.9	2.8	0.9	0.8	7.5	0.0	2.7	0.0	2.7			
11-mar	3.8	0.8	2.8	9.4	15.0	6.6	2.8	3.7	6.6	0.9	0.9	4.7	7.5	8.4	1.8	0.9	5.7	2.8	0.9	0.0	0.0	3.8	0.0	1.0	15.0	0.0	3.1	0.0	3.1			
12-mar	0.9	0.9	5.7	1.9	1.0	1.9	2.8	1.8	5.6	9.4	1.9	4.7	3.8	1.9	1.9	0.0	1.9	0.0	3.8	1.9	0.9	0.0	6.6	1.9	11.3	0.0	4.1	0.0	4.1			
13-mar	1.9	4.7	0.9	2.8	13.1	4.7	9.4	2.8	0.0	6.6	9.4	5.6	9.4	7.5	4.7	6.6	5.6	7.5	3.8	3.7	9.4	0.8	2.8	3.8	13.1	0.0	4.8	0.0	4.8			
14-mar	2.8	3.8	1.0	4.7	3.8	0.8	3.8	1.0	0.0	5.6	1.9	7.5	4.7	1.9	7.5	2.8	1.9	2.8	4.7	1.9	1.8	6.6	5.7	4.7	9.4	0.0	4.2	0.0	4.2			
15-mar	2.8	8.6	0.8	0.8	0.8	4.7	3.8	9.4	9.4	5.7	4.7	1.9	7.5	2.8	1.9	2.8	4.7	1.9	2.8	0.8	1.9	1.0	3.8	7.5	10.3	0.0	3.4	0.0	3.4			
16-mar	8.6	7.5	8.5	5.6	6.6	0.9	5.7	0.0	6.6	12.2	3.8	1.9	4.7	0.0	5.7	1.9	2.9	1.9	3.8	15.0	4.7	4.7	0.9	1.9	15.0	0.0	4.8	0.0	4.8			
17-mar	0.8	0.0	0.9	5.7	4.7	3.8	0.9	0.9	7.5	3.8	5.6	7.5	5.6	3.8	4.7	0.9	1.9	5.7	6.6	2.8	1.9	1.0	1.9	4.7	7.5	0.0	3.5	0.0	3.5			
18-mar	1.9	3.8	4.7	1.9	6.6	3.8	10.4	9.4	9.4	15.0	1.9	2.9	0.0	1.9	2.8	0.0	3.8	0.9	0.9	4.7	+	+	3.8	0.0	15.0	0.0	4.1	0.0	4.1			
19-mar	2.8	2.8	1.9	3.8	0.9	0.0	7.5	5.6	2.9	4.7	7.5	8.5	14.1	11.3	2.8	4.7	6.6	4.7	1.9	1.9	1.9	5.7	5.6	9.4	14.1	0.0	4.6	0.0	4.6			
20-mar	8.5	7.5	8.5	11.3	1.9	0.0	5.6	0.0	1.9	4.7	11.3	7.5	10.3	1.9	3.8	6.6	5.7	0.9	5.7	9.4	0.0	0.0	0.9	1.9	11.3	0.0	4.5	0.0	4.5			
21-mar	4.7	3.8	1.9	4.7	9.4	9.4	+	+	+	+	2.9	8.5	6.6	3.7	7.5	1.0	6.6	2.8	0.0	6.6	2.8	0.0	6.6	7.5	5.7	6.6	0.0	5.2	0.0	5.2		
22-mar	3.8	6.6	4.7	1.9	6.6	0.0	1.9	2.8	2.8	0.0	1.9	0.0	2.8	2.8	10.3	3.7	1.0	1.9	10.3	1.9	0.0	1.9	0.9	10.3	0.0	2.8	0.0	2.8	0.0	2.8		
23-mar	0.0	3.8	0.0	3.8	5.7	3.8	7.5	3.8	0.0	4.7	5.6	1.9	11.3	8.4	10.3	0.9	7.5	4.7	5.7	2.8	2.8	4.7	1.9	2.8	11.3	0.0	4.3	0.0	4.3			
24-mar	5.7	0.0	1.9	4.7	9.4	3.7	8.4	10.3	3.8	7.5	3.7	9.4	10.4	6.6	5.7	1.9	5.7	8.5	9.4	3.7	3.7	1.9	1.8	0.8	10.4	0.0	5.3	0.0	5.3			
25-mar	7.5	10.3	7.5	5.6	6.6	7.5	15.0	11.3	24.4	26.3	22.6	14.1	12.2	10.3	11.3	16.0	14.1	15.0	15.0	28.3	62.9	8.4	7.5	9.4	62.9	5.6	15.3	0.0	15.3			
26-mar	0.0	0.0	1.9	2.8	4.7	2.9	2.9	4.7	4.7	7.5	4.7	7.5	7.5	6.6	4.7	9.4	0.0	3.8	8.5	4.7	0.9	2.8	1.9	1.9	9.4	0.0	4.0	0.0	4.0			
27-mar	9.7	5.6	6.5	6.6	8.6	3.6	0.5	11.3	6.4	4.7	8.5	14.3	10.8	11.6	3.0	6.2	3.0	3.1	10.4	10.7	7.2	12.6	6.4	1.2	3.8	14.3	0.5	7.0	0.0	7.0		
28-mar	9.7	10.3	8.4	11.3	15.0	9.4	15.0	25.3	24.4	29.1	27.3	14.1	18.8	18.8	18.8	16.0	14.1	15.0	15.0	28.3	62.9	11.3	10.4	8.4	8.4	0.0	0.0	0.0	0.0	0.0		
29-mar	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0		
30-mar	3.3	4.5	3.6	4.2	4.7	3.2	5.8	5.8	6.0	8.2	8.7	5.1	6.7	5.4	5.1	4.4	4.1	3.4	4.3	4.7	5.4	3.5	3.3	3.8	3.8	0.0	0.0	0.0	0.0	0.0		
31-mar																																
MAXIMA																																
MINIMA																																
MEDIA																																

Código ausencia de datos por instalación y/o retiro de equipo
 Código ausencia de datos por mantenimiento del equipo
 Código ausencia de datos por calibración del equipo
 Código ausencia de datos por falta de energía eléctrica temporalmente
 N° de datos válidos
 Recuperación de datos
 D H
 * #
 C +
 697 %
 93.7 %
 Día de Medición
 Hora de Medición

SEB-10220

MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

VARIABLE : DIOXIDO DE NITROGENO (NO₂)

LUGAR : CUERPO DE BOMBEROS

PERIODO : 1 AL 28 DE FEBRERO DE 1999

UNIDAD : µg/m³N

ANO 1999	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA
1-feb	24.4	20.7	18.8	3.8	26.3	15.0	5.6	63.8	62.0	43.2	18.8	18.8	5.6	20.7	41.3	37.6	39.4	39.4	58.2	131.4	28.2	7.5	3.8	3.8	30.8	3.8	30.8
2-feb	5.6	15.0	28.2	24.4	9.4	11.3	31.9	13.1	3.8	30.0	54.5	13.1	C	C	C	0.0	26.3	28.2	15.0	15.0	15.0	7.5	13.1	11.3	54.5	3.8	20.0
3-feb	11.3	9.4	11.3	3.8	9.4	16.9	0.0	0.0	16.9	9.4	9.4	7.5	15.0	13.1	9.4	11.3	16.9	9.4	9.4	9.4	9.4	11.3	9.4	15.0	16.9	0.0	10.2
4-feb	15.0	9.4	16.9	13.1	15.0	0.0	13.1	0.0	15.0	0.0	3.8	3.8	5.6	13.1	16.9	20.7	22.5	22.5	11.3	15.0	9.4	15.0	3.8	9.4	22.5	0.0	11.3
5-feb	9.4	11.3	15.0	11.3	13.1	5.6	22.5	13.1	13.1	9.4	13.1	3.8	3.8	0.0	0.0	15.0	13.1	15.0	15.0	15.0	13.1	20.7	18.8	0.0	22.5	0.0	11.3
6-feb	20.7	33.8	20.7	18.8	16.9	11.3	15.0	0.0	20.7	5.6	7.5	13.1	22.5	7.5	9.4	11.3	26.3	24.4	5.6	11.3	7.5	20.7	20.7	13.1	33.8	0.0	15.2
7-feb	15.0	0.0	0.0	0.0	3.8	20.7	11.3	9.4	7.5	9.4	13.1	13.1	20.7	18.8	22.5	20.7	15.0	16.9	9.4	22.5	13.1	9.4	11.3	22.5	0.0	15.2	0.0
8-feb	11.3	7.5	9.4	11.3	13.1	28.2	33.8	35.7	37.6	28.2	28.2	24.4	13.1	5.6	0.0	9.4	7.5	7.5	5.6	0.0	22.5	16.9	20.7	13.1	37.6	0.0	16.3
9-feb	15.0	11.3	15.0	16.9	18.8	13.1	9.4	0.0	0.0	13.1	3.8	3.8	3.8	3.8	3.8	7.5	9.4	18.8	20.7	18.8	16.9	15.0	11.3	5.6	20.7	0.0	11.4
10-feb	13.1	1.9	13.1	7.5	13.1	0.0	5.6	24.4	5.6	31.9	16.9	15.0	0.0	5.6	5.6	3.8	7.5	20.7	13.1	9.4	18.8	15.0	15.0	7.5	31.9	0.0	11.3
11-feb	5.6	0.0	5.6	5.6	5.6	5.6	3.8	15.0	0.0	3.8	0.0	9.4	0.0	16.9	18.8	0.0	15.0	13.1	13.1	15.0	5.6	15.0	15.0	15.0	18.8	0.0	8.4
12-feb	20.7	11.3	15.0	18.8	16.9	0.0	3.8	7.5	13.1	16.9	7.5	7.5	9.4	11.3	3.8	9.4	7.5	9.4	9.4	11.3	9.4	11.3	9.4	11.3	20.7	0.0	10.1
13-feb	9.4	13.1	15.0	18.8	13.1	5.6	13.1	7.5	13.1	13.1	18.8	3.8	22.5	15.0	16.9	7.5	24.4	15.0	15.0	9.4	11.3	15.0	20.7	15.0	24.4	3.8	13.8
14-feb	5.6	3.8	11.3	9.4	11.3	9.4	15.0	7.5	15.0	18.8	9.4	13.1	16.9	5.6	15.0	18.8	16.9	13.1	7.5	5.6	5.6	9.4	0.0	9.4	18.8	0.0	10.6
15-feb	11.3	0.0	5.6	5.6	22.5	9.4	15.0	3.8	9.4	16.9	18.8	16.9	18.8	15.0	22.5	20.7	20.7	9.4	9.4	7.5	3.8	15.0	15.0	16.9	22.5	0.0	12.9
16-feb	15.0	16.9	11.3	0.0	5.6	7.5	16.9	11.3	13.1	3.8	18.8	0.0	0.0	0.0	7.5	7.5	11.3	13.1	9.4	7.5	5.6	3.8	0.0	15.0	18.8	0.0	8.4
17-feb	15.0	0.0	15.0	11.3	5.6	0.0	9.4	24.4	28.2	11.3	11.3	5.6	0.0	9.4	5.6	3.8	3.8	11.3	11.3	5.6	9.4	11.3	15.0	13.1	28.2	0.0	9.9
18-feb	15.0	9.4	15.0	9.4	7.5	9.4	0.0	16.9	26.3	24.4	0.0	16.9	15.0	15.0	13.1	0.0	13.1	18.8	18.8	7.5	16.9	11.3	11.3	15.0	26.3	0.0	12.8
19-feb	13.1	11.3	16.9	15.0	13.1	0.0	3.8	3.8	9.4	16.9	7.5	3.8	3.8	15.0	9.4	20.7	5.6	7.5	16.9	20.7	16.9	13.1	18.8	15.0	20.7	0.0	12.2
20-feb	15.0	13.1	11.3	1.9	3.8	7.5	3.8	0.0	11.3	16.9	16.9	20.7	15.0	16.9	0.0	5.6	16.9	20.7	22.5	3.8	5.6	11.3	13.1	13.1	22.5	0.0	11.1
21-feb	13.1	16.9	18.8	16.9	22.5	22.5	20.7	22.5	24.4	16.9	0.0	0.0	9.4	7.5	11.3	5.6	5.6	15.0	15.0	22.5	18.8	13.1	5.6	9.4	24.4	0.0	13.9
22-feb	15.0	15.0	13.1	5.6	15.0	9.4	20.7	24.4	20.7	18.8	24.4	28.2	22.5	26.3	5.6	16.9	0.0	15.0	16.9	20.7	16.9	13.1	13.1	7.5	28.2	0.0	16.0
23-feb	20.7	18.8	20.7	22.5	7.5	5.6	16.9	5.6	13.1	13.1	18.8	26.3	18.8	18.8	15.0	18.8	22.5	22.5	9.4	11.3	3.8	11.3	15.0	22.5	26.3	3.8	15.8
24-feb	20.7	20.7	5.6	13.1	7.5	13.1	18.8	9.4	5.6	9.4	22.5	20.7	30.0	5.6	16.9	22.5	20.7	15.0	20.7	18.8	9.4	9.4	7.5	5.6	30.0	5.6	14.6
25-feb	3.8	5.6	9.4	22.5	22.5	24.4	24.4	35.7	0.0	37.6	11.3	13.1	16.9	15.0	13.1	0.0	11.3	16.9	15.0	15.0	13.1	11.3	11.3	7.5	37.6	0.0	14.9
26-feb	11.3	22.5	3.8	9.4	0.0	9.4	5.6	9.4	3.8	3.8	13.1	9.4	9.4	15.0	11.3	26.3	13.1	11.3	13.1	24.4	5.6	13.1	9.4	13.1	26.3	0.0	11.3
27-feb	13.1	5.6	13.1	16.9	20.7	11.3	11.3	16.9	9.4	18.8	16.9	7.5	26.3	22.5	26.3	5.6	24.4	22.5	1.9	15.0	15.0	9.4	9.4	15.0	26.3	0.0	14.8
28-feb	20.7	9.4	5.6	9.4	18.8	13.1	13.1	24.4	16.9	20.7	13.1	18.8	20.7	18.8	20.7	13.1	20.7	16.9	15.0	7.5	13.1	5.6	7.5	7.5	24.4	5.6	14.6
MAXIMA	24.4	33.8	28.2	24.4	26.3	28.2	33.8	35.7	63.8	62.0	54.5	28.2	30.0	26.3	26.3	41.3	37.6	39.4	58.2	131.4	28.2	20.7	22.5	22.5	30.8	3.8	30.8
MINIMA	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
MEDIA	13.7	11.2	12.9	11.5	12.8	10.4	13.1	12.7	15.1	16.7	15.4	12.1	13.7	11.7	12.4	11.7	15.6	17.1	13.9	14.3	15.7	12.8	11.7	11.3	14.8	1.9	14.8

Código ausencia de datos por falta de energía eléctrica temporalmente : C
 N° de datos válidos : +
 Recuperación de datos : 669
 : 100 %

MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

LUGAR : CUERPO DE BOMBEROS
PERIODO : 1 AL 31 DE ENERO DE 1999

VARIABLE : DIOXIDO DE NITROGENO (NO2)
UNIDAD : ug/m3N

Table with 31 columns (1-31) and multiple rows (1-ene to 31-ene, MAXIMA, MINIMA, MEDIA). Values range from 0.0 to 13.1.

C + 741 100 %

Código ausencia de datos por falta de energía eléctrica temporalmente
Nº de datos válidos : 741
Recuperación de datos : 100 %

SEB-10200

MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

LUGAR : CUERPO DE BOMBEROS

PERIODO : 1 AL 31 DE DICIEMBRE DE 1998

VARIABLE : DIOXIDO DE NITROGENO (NO₂)

UNIDAD : µg/m³N

ANO 1998	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEGIA	
1-dic	5.6	1.9	13.1	5.6	8.4	1.9	1.9	1.9	3.8	1.9	3.8	1.9	3.8	1.9	3.8	1.9	1.9	0.0	1.9	1.9	1.9	1.9	1.9	1.9	0.0	13.1	0.0	13.1
2-dic	1.9	0.0	13.1	13.1	5.6	1.9	1.9	0.0	1.9	0.0	7.5	0.0	3.8	1.9	5.6	0.0	0.0	1.9	0.0	11.3	1.9	0.0	0.0	3.8	0.0	3.8	0.0	13.1
3-dic	0.0	3.8	1.9	1.9	1.9	0.0	0.0	0.0	3.8	1.9	0.0	0.0	3.8	0.0	5.6	5.6	5.6	3.8	0.0	3.8	3.8	3.8	0.0	0.0	0.0	5.6	0.0	5.6
4-dic	0.0	0.0	1.9	0.0	3.8	1.9	8.4	1.9	5.6	15.0	3.8	7.5	13.1	13.1	13.1	13.1	13.1	13.1	0.0	3.8	3.8	3.8	5.6	3.8	1.9	13.1	0.0	16.0
5-dic	13.1	11.3	0.0	1.9	5.6	5.6	7.5	0.0	1.9	0.0	1.9	7.5	11.3	13.1	13.1	13.1	13.1	13.1	0.0	3.8	3.8	3.8	5.6	3.8	1.9	13.1	0.0	13.1
6-dic	3.8	3.8	0.0	1.9	8.4	5.6	1.9	3.8	1.9	3.8	3.8	1.9	1.9	5.6	3.8	1.9	3.8	0.0	7.5	5.6	8.4	11.3	0.0	3.8	0.0	11.3	0.0	11.3
7-dic	8.4	1.9	3.8	1.9	3.8	0.0	8.4	7.5	1.9	5.6	9.4	1.9	11.3	0.0	1.9	1.9	1.9	1.9	3.8	3.8	5.6	1.9	3.8	0.0	11.3	0.0	11.3	
8-dic	1.9	3.8	8.4	3.8	0.0	0.0	3.8	3.8	8.4	9.4	3.8	1.9	3.8	7.5	3.8	1.9	1.9	3.8	5.6	5.6	8.4	9.4	1.9	0.0	8.4	0.0	9.4	
9-dic	1.9	1.9	7.5	0.0	0.0	0.0	7.5	3.8	1.9	3.8	3.8	8.4	3.8	1.9	5.6	7.5	11.3	5.6	3.8	3.8	7.5	3.8	0.0	15.0	0.0	15.0		
10-dic	11.3	1.9	3.8	0.0	3.8	0.0	3.8	1.9	0.0	8.4	7.5	3.8	5.6	1.9	1.9	5.6	1.9	3.8	3.8	3.8	7.5	3.8	0.0	15.0	0.0	15.0		
11-dic	1.9	5.6	5.6	1.9	3.8	5.6	1.9	5.6	7.5	9.4	5.6	5.6	0.0	8.4	3.8	5.6	1.9	5.6	1.9	3.8	5.6	1.9	3.8	0.0	11.3	0.0	11.3	
12-dic	5.6	9.4	5.6	5.6	3.8	5.6	0.0	0.0	15.0	1.9	5.6	1.9	9.4	7.5	5.6	5.6	1.9	0.0	5.6	3.8	1.9	3.8	8.4	7.5	15.0	0.0	15.0	
13-dic	7.5	8.4	0.0	1.9	8.4	8.4	3.8	3.8	7.5	3.8	5.6	3.8	5.6	3.8	5.6	5.6	3.8	5.6	3.8	5.6	3.8	8.4	5.6	1.9	3.8	0.0	9.4	
14-dic	1.9	1.9	0.0	1.9	5.6	8.4	1.9	1.9	1.9	9.4	0.0	3.8	3.8	1.9	3.8	3.8	5.6	5.6	3.8	5.6	5.6	3.8	0.0	1.9	1.9	8.4	0.0	9.4
15-dic	1.9	0.0	0.0	1.9	1.9	1.9	8.4	3.8	3.8	3.8	5.6	1.9	7.5	3.8	0.0	9.4	15.0	9.4	+	1.9	3.8	1.9	1.9	1.9	1.9	15.0	0.0	15.0
16-dic	7.5	0.0	3.8	1.9	1.9	0.0	0.0	+	+	0.0	8.4	9.4	3.8	3.8	3.8	1.9	1.9	0.0	9.4	0.0	5.6	3.8	3.8	0.0	9.4	0.0	9.4	
17-dic	1.9	0.0	0.0	3.8	3.8	3.8	3.8	7.5	0.0	3.8	0.0	7.5	3.8	8.4	1.9	0.0	3.8	1.9	0.0	3.8	0.0	0.0	3.8	0.0	1.9	8.4	0.0	9.4
18-dic	1.9	0.0	0.0	5.6	0.0	5.6	1.9	1.9	11.3	8.4	0.0	7.5	3.8	3.8	3.8	8.4	1.9	3.8	0.0	0.0	1.9	8.4	3.8	1.9	11.3	0.0	11.3	
19-dic	0.0	5.6	3.8	3.8	0.0	0.0	0.0	3.8	1.9	5.6	3.8	0.0	1.9	0.0	1.9	0.0	1.9	3.8	5.6	1.9	9.4	1.9	13.1	1.9	13.1	0.0	13.1	
20-dic	1.9	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	3.8	1.9	1.9	3.8	1.9	3.8	0.0	0.0	1.9	1.9	0.0	0.0	0.0	0.0	0.0	3.8	0.0	3.8
21-dic	0.0	0.0	0.0	5.6	3.8	3.8	3.8	0.0	3.8	1.9	1.9	1.9	0.0	5.6	5.6	1.9	5.6	1.9	5.6	1.9	1.9	0.0	0.0	0.0	0.0	5.6	0.0	5.6
22-dic	0.0	0.0	1.9	0.0	0.0	7.5	1.9	3.8	7.5	15.0	5.6	1.9	1.9	3.8	1.9	3.8	13.1	9.4	18.8	22.5	0.0	1.9	3.8	1.9	5.6	0.0	22.5	
23-dic	5.6	0.0	3.8	3.8	3.8	0.0	8.4	13.1	8.4	9.4	1.9	3.8	9.4	18.8	3.8	3.8	9.4	3.8	7.5	0.0	1.9	3.8	1.9	3.8	18.8	0.0	18.8	
24-dic	0.0	3.8	5.6	3.8	1.9	3.8	13.1	7.5	7.5	1.9	1.9	5.6	5.6	5.6	3.8	3.8	3.8	3.8	0.0	1.9	0.0	1.9	0.0	5.6	13.1	0.0	13.1	
25-dic	3.8	7.5	5.6	7.5	0.0	8.4	3.8	3.8	7.5	15.0	0.0	13.1	5.6	13.1	9.4	5.6	3.8	11.3	3.8	3.8	1.9	5.6	0.0	0.0	15.0	0.0	15.0	
26-dic	0.0	1.9	0.0	0.0	0.0	3.8	1.9	3.8	0.0	5.6	0.0	0.0	7.5	9.4	11.3	1.9	1.9	0.0	0.0	0.0	3.8	0.0	0.0	0.0	0.0	11.3	0.0	11.3
27-dic	0.0	1.9	0.0	0.0	0.0	3.8	1.9	1.9	3.8	+	3.8	3.8	3.8	1.9	1.9	0.0	1.9	1.9	0.0	1.9	3.8	3.8	1.9	7.5	0.0	7.5		
28-dic	7.5	3.8	0.0	1.9	1.9	5.6	5.6	5.6	5.6	5.6	3.8	3.8	5.6	8.4	1.9	3.8	5.6	5.6	5.6	8.4	5.6	5.6	1.9	3.8	9.4	0.0	9.4	
29-dic	1.9	1.9	3.8	3.8	1.9	1.9	8.4	1.9	1.9	8.4	1.9	3.8	0.0	3.8	3.8	0.0	1.9	1.9	1.9	8.4	0.0	1.9	1.9	3.8	9.4	0.0	9.4	
30-dic	1.9	1.9	0.0	1.9	1.9	0.0	20.7	8.4	5.6	5.6	1.9	0.0	5.6	5.6	0.0	0.0	0.0	0.0	1.9	1.9	3.8	1.9	1.9	1.9	20.7	0.0	20.7	
31-dic	1.9	8.4	0.0	3.8	3.8	8.4	7.5	0.0	1.9	0.0	1.9	3.8	1.9	1.9	3.8	5.6	7.5	5.6	1.9	3.8	1.9	1.9	1.9	1.9	9.4	0.0	9.4	
MAXIMA	13.1	11.3	13.1	13.1	8.4	9.4	20.7	13.1	15.0	15.0	15.0	13.1	11.3	18.8	13.1	13.1	15.0	18.8	22.5	11.3	8.4	11.3	13.1	15.0	13.1	0.0	15.0	
MINIMA	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
MEGIA	3.4	3.2	3.1	3.0	3.1	3.5	5.1	3.3	4.3	4.7	4.0	3.8	4.7	4.8	4.3	4.2	4.2	3.8	4.1	3.3	3.7	3.2	2.2	3.1	3.1	0.0	0.0	

Código ausencia de datos por calibración del equipo : C
 Código ausencia de datos por falta de energía eléctrica temporalmente : +
 N° de datos válidos : 735
 Recuperación de datos : 100 %

Nota importante al reverso

MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

LUGAR : CUERPO DE BOMBEROS

PERIODO : 1 AL 30 DE NOVIEMBRE DE 1998

VARIABLE : DIOXIDO DE NITROGENO (NO₂)

UNIDAD : µg/m³N

ANO 1998	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	MAXIMA	MINIMA	MEDIA
1-nov	9.4	9.4	7.5	9.4	1.9	1.9	3.8	0.0	5.6	1.9	1.9	13.1	0.0	9.4	1.9	0.0	1.9	1.9	1.9	1.9	5.6	1.9	3.8	15.0	15.0	0.0	4.5
2-nov	9.4	1.9	0.0	3.8	9.4	15.0	0.0	0.0	5.6	5.6	3.8	3.8	9.4	3.8	3.8	0.0	1.9	1.9	3.8	1.9	0.0	0.0	0.0	1.9	15.0	0.0	3.8
3-nov	0.0	0.0	3.8	5.6	5.6	3.8	11.3	9.4	3.8	5.6	3.8	0.0	9.4	7.5	9.4	0.0	0.0	5.6	3.8	3.8	5.6	5.6	5.6	0.0	11.3	0.0	4.5
4-nov	0.0	0.0	0.0	3.8	3.8	1.9	5.6	0.0	3.8	3.8	9.4	3.8	9.4	15.0	0.0	3.8	9.4	0.0	3.8	0.0	0.0	0.0	1.9	0.0	15.0	0.0	3.3
5-nov	5.6	0.0	3.8	5.6	3.8	3.8	0.0	0.0	3.8	3.8	7.5	3.8	9.4	9.4	15.0	0.0	5.6	5.6	3.8	0.0	0.0	18.8	13.1	5.6	18.8	0.0	5.3
6-nov	9.4	3.8	0.0	0.0	0.0	5.6	13.1	3.8	1.9	1.9	13.1	1.9	9.4	9.4	5.6	1.9	1.9	1.9	0.0	0.0	0.0	0.0	5.6	5.6	13.1	0.0	4.1
7-nov	0.0	0.0	0.0	0.0	3.8	1.9	1.9	1.9	0.0	9.4	9.4	3.8	3.8	1.9	0.0	1.9	0.0	7.5	0.0	5.6	5.6	1.9	3.8	9.4	9.4	0.0	2.7
8-nov	3.8	1.9	0.0	5.6	9.4	9.4	5.6	0.0	3.8	3.8	3.8	1.9	7.5	3.8	1.9	0.0	1.9	0.0	0.0	0.0	0.0	1.9	1.9	0.0	9.4	0.0	2.9
9-nov	0.0	0.0	3.8	1.9	3.8	1.9	5.6	0.0	3.8	9.4	0.0	0.0	9.4	1.9	9.4	1.9	1.9	5.6	0.0	0.0	1.9	0.0	1.9	0.0	9.4	0.0	2.7
10-nov	1.9	3.8	1.9	1.9	0.0	0.0	0.0	0.0	1.9	3.8	5.6	7.5	9.4	5.6	3.8	3.8	0.0	0.0	0.0	0.0	7.5	5.6	9.4	3.8	9.4	0.0	3.2
11-nov	7.5	1.9	3.8	7.5	9.4	9.4	9.4	18.8	5.6	3.8	9.4	18.8	15.0	13.1	11.3	13.1	9.4	3.8	1.9	0.0	1.9	0.0	0.0	0.0	18.8	0.0	7.2
12-nov	1.9	0.0	0.0	0.0	1.9	3.8	1.9	3.8	0.0	15.0	20.7	11.3	7.5	9.4	15.0	1.9	3.8	0.0	1.9	0.0	0.0	11.3	15.0	1.9	20.7	0.0	5.5
13-nov	1.9	0.0	0.0	0.0	0.0	1.9	0.0	0.0	3.8	0.0	5.6	1.9	9.4	9.4	7.5	3.8	0.0	1.9	0.0	0.0	0.0	3.8	1.9	11.3	11.3	0.0	3.0
14-nov	0.0	0.0	0.0	0.0	5.6	1.9	3.8	0.0	3.8	9.4	13.1	7.5	1.9	3.8	1.9	1.9	1.9	1.9	0.0	0.0	0.0	3.8	9.4	3.8	13.1	0.0	3.1
15-nov	3.8	0.0	5.6	1.9	1.9	3.8	7.5	1.9	0.0	0.0	0.0	0.0	5.6	3.8	1.9	0.0	0.0	0.0	0.0	0.0	7.5	15.0	3.8	0.0	15.0	0.0	2.8
16-nov	0.0	3.8	3.8	1.9	3.8	3.8	1.9	3.8	5.6	3.8	5.6	9.4	3.8	0.0	0.0	0.0	7.5	1.9	5.6	3.8	22.5	3.8	9.4	0.0	22.5	0.0	4.5
17-nov	3.8	3.8	1.9	1.9	3.8	3.8	1.9	3.8	3.8	3.8	3.8	5.6	9.4	3.8	1.9	1.9	3.8	9.4	1.9	3.8	0.0	0.0	0.0	0.0	9.4	0.0	3.2
18-nov	0.0	1.9	1.9	3.8	0.0	3.8	5.6	0.0	3.8	3.8	3.8	5.6	3.8	1.9	0.0	0.0	0.0	3.8	0.0	0.0	0.0	0.0	0.0	0.0	9.4	0.0	3.2
19-nov	0.0	0.0	1.9	5.6	0.0	0.0	0.0	0.0	1.9	1.9	1.9	5.6	5.6	3.8	1.9	3.8	1.9	1.9	0.0	0.0	0.0	0.0	0.0	0.0	9.4	0.0	1.6
20-nov	1.9	1.9	1.9	3.8	0.0	0.0	0.0	0.0	1.9	0.0	9.4	1.9	1.9	1.9	0.0	0.0	3.8	1.9	0.0	0.0	0.0	0.0	0.0	0.0	9.4	0.0	2.3
21-nov	0.0	1.9	1.9	1.9	1.9	0.0	1.9	0.0	0.0	0.0	9.4	1.9	1.9	9.4	9.4	1.9	3.8	1.9	5.6	3.8	1.9	5.6	3.8	0.0	9.4	0.0	1.9
22-nov	1.9	1.9	3.8	1.9	1.9	0.0	1.9	0.0	1.9	1.9	0.0	9.4	9.4	9.4	1.9	3.8	1.9	5.6	3.8	1.9	5.6	3.8	3.8	1.9	5.6	0.0	1.9
23-nov	0.0	0.0	1.9	0.0	1.9	0.0	1.9	0.0	1.9	13.1	1.9	5.6	9.4	3.8	0.0	0.0	0.0	3.8	1.9	1.9	1.9	0.0	0.0	0.0	5.6	0.0	1.9
24-nov	1.9	1.9	1.9	0.0	3.8	1.9	0.0	1.9	7.5	1.9	1.9	5.6	9.4	3.8	0.0	0.0	0.0	3.8	1.9	1.9	1.9	5.6	3.8	13.1	13.1	0.0	3.1
25-nov	5.6	1.9	0.0	0.0	0.0	0.0	3.8	0.0	0.0	3.8	7.5	15.0	11.3	5.6	5.6	5.6	0.0	0.0	0.0	0.0	3.8	5.6	5.6	0.0	15.0	0.0	3.1
26-nov	1.9	1.9	1.9	1.9	3.8	3.8	7.5	0.0	0.0	3.8	0.0	22.5	9.4	0.0	1.9	1.9	5.6	0.0	0.0	0.0	7.5	0.0	0.0	0.0	15.0	0.0	3.1
27-nov	5.6	1.9	13.1	3.8	9.4	1.9	1.9	1.9	0.0	3.8	1.9	3.8	1.9	1.9	0.0	1.9	5.6	0.0	0.0	0.0	5.6	3.8	5.6	1.9	22.5	0.0	3.5
28-nov	1.9	0.0	13.1	13.1	5.6	1.9	1.9	0.0	1.9	0.0	7.5	0.0	3.8	1.9	5.6	0.0	0.0	1.9	0.0	0.0	1.9	1.9	0.0	0.0	13.1	0.0	2.5
29-nov	0.0	3.8	1.9	1.9	1.9	0.0	0.0	0.0	3.8	1.9	0.0	0.0	3.8	1.9	5.6	5.6	5.6	3.8	0.0	3.8	3.8	3.8	0.0	0.0	13.1	0.0	3.2
30-nov	0.0	0.0	1.9	0.0	3.8	1.9	9.4	1.9	0.0	3.8	0.0	1.9	7.5	0.0	1.9	0.0	0.0	0.0	0.0	0.0	1.9	0.0	3.8	0.0	9.4	0.0	1.7
MAXIMA	9.4	9.4	13.1	13.1	9.4	15.0	13.1	18.8	13.1	15.0	20.7	22.5	15.0	15.0	15.0	13.1	9.4	9.4	7.5	22.5	18.8	13.1	15.0	15.0	15.0	0.0	4.5
MINIMA	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
MEDIA	2.6	1.9	2.8	2.9	3.3	3.1	3.8	2.1	2.9	3.8	5.9	5.6	6.3	4.5	4.2	2.7	2.4	2.3	1.6	2.3	3.6	3.6	3.6	2.5	3.6	0.0	2.5

Código ausencia de datos por calibración del equipo : C
 Código ausencia de datos por falta de energía eléctrica temporalmente : +
 N° de datos válidos : 720
 Recuperación de datos : 100 %

Nota importante al reverso



SEB-10150

MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

LUGAR : CUERPO DE BOMBEROS VARIABLE : DIOXIDO DE NITROGENO (NO2)
 PERIODO : 1 AL 30 DE SEPTIEMBRE DE 1998 UNIDAD : µg/m³N

D/H	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM.
1	0.0	3.8	0.0	0.0	3.8	3.8	3.8	0.0	3.8	5.6	5.6	3.8	3.8	5.6	5.6	5.6	3.8	1.9	1.9	0.0	9.4	7.5	9.4	9.4	9.4	0.0	3.6
2	7.5	5.6	5.6	5.6	3.8	3.8	18.8	13.1	15.0	18.8	18.8	15.0	5.6	5.6	5.6	5.6	7.5	3.8	3.8	3.8	9.4	18.8	0.0	18.8	18.8	0.0	9.2
3	13.1	5.6	0.0	0.0	3.8	9.4	18.8	22.5	9.4	5.6	18.8	18.8	9.4	5.6	3.8	0.0	0.0	0.0	1.9	1.9	1.9	9.4	9.4	9.4	22.5	0.0	7.4
4	5.6	7.5	5.6	3.8	9.4	3.8	18.8	22.5	9.4	13.1	22.5	18.8	22.5	5.6	3.8	9.4	5.6	0.0	0.0	18.8	0.0	15.0	18.8	5.6	22.5	0.0	10.2
5	3.8	1.9	3.8	5.6	1.9	0.0	7.5	13.1	0.0	3.8	5.6	5.6	18.8	28.2	0.0	9.4	18.8	3.8	0.0	3.8	9.4	3.8	3.8	7.5	28.2	0.0	6.6
6	5.6	5.6	7.5	3.8	3.8	0.0	5.6	18.8	9.4	11.3	7.5	1.9	3.8	5.6	13.1	9.4	13.1	5.6	0.0	0.0	3.8	9.4	5.6	5.6	18.8	0.0	6.5
7	3.8	7.5	5.6	11.3	7.5	3.8	13.1	15.0	18.8	19.4	24.4	13.1	28.2	9.4	9.4	9.4	9.4	3.8	0.0	22.5	1.9	3.8	9.4	5.6	22.5	0.0	8.4
8	3.8	3.8	1.9	7.5	5.6	7.5	31.9	22.5	9.4	24.4	13.1	28.2	9.4	9.4	5.6	3.8	3.8	15.0	45.1	31.9	28.2	31.9	28.2	9.4	45.1	1.9	15.9
9	0.0	15.0	9.4	9.4	16.9	9.4	31.9	28.2	28.2	18.8	28.2	28.2	15.0	31.9	18.8	15.0	3.8	15.0	28.2	22.5	5.6	1.9	1.9	0.0	31.9	0.0	16.0
10	5.6	1.9	3.8	5.6	5.6	5.6	5.6	3.8	1.9	3.8	5.6	3.8	11.3	3.8	7.5	3.8	18.8	5.6	3.8	0.0	18.8	22.5	9.4	7.5	22.5	0.0	6.9
11	1.9	9.4	9.4	1.9	5.6	5.6	13.1	13.1	13.1	9.4	22.5	15.0	11.3	7.5	5.6	0.0	5.6	3.8	5.6	1.9	11.3	13.1	9.4	9.4	22.5	0.0	8.5
12	18.8	9.4	5.6	9.4	22.5	18.8	22.5	18.8	9.4	3.8	13.1	11.3	3.8	1.9	5.6	3.8	7.5	9.4	28.2	11.3	13.1	22.5	18.8	28.2	1.9	12.4	
13	9.4	13.1	18.8	22.5	9.4	5.6	15.0	41.3	1.9	3.8	3.8	0.0	0.0	3.8	5.6	0.0	16.9	3.8	3.8	30.0	60.1	24.4	13.1	5.6	3.8	0.0	13.3
14	3.8	3.8	5.6	26.3	18.8	9.4	5.6	16.9	3.8	0.0	0.0	0.0	0.0	1.9	9.4	7.5	9.4	5.6	7.5	3.8	9.4	22.5	15.0	18.8	26.3	0.0	8.5
15	13.1	13.1	16.9	18.8	41.3	41.3	22.5	11.3	3.8	3.8	5.6	5.6	5.6	3.8	0.0	1.9	3.8	5.6	3.8	3.8	13.1	9.4	5.6	5.6	41.3	0.0	10.8
16	1.9	0.0	3.8	0.0	0.0	7.5	24.4	26.3	9.4	1.9	9.4	9.4	5.6	9.4	1.9	5.6	3.8	5.6	1.9	5.6	3.8	15.0	9.4	5.6	26.3	0.0	7.0
17	0.0	1.9	5.6	1.9	0.0	3.8	22.5	13.1	5.6	7.5	3.8	3.8	5.6	5.6	1.9	1.9	3.8	3.8	0.0	20.7	13.1	18.8	9.4	5.6	26.3	0.0	6.4
18	1.9	3.8	3.8	0.0	5.6	0.0	1.9	7.5	15.0	5.6	28.2	9.4	3.8	1.9	5.6	5.6	3.8	5.6	5.6	9.4	1.9	7.5	5.6	5.6	28.2	0.0	6.0
19	9.4	9.4	3.8	1.9	3.8	0.0	0.0	0.0	0.0	5.6	3.8	1.9	5.6	3.8	0.0	3.8	0.0	3.8	0.0	7.5	20.7	13.1	22.5	31.9	28.2	0.0	7.4
20	16.9	11.3	5.6	5.6	3.8	5.6	7.5	9.4	9.4	3.8	1.9	0.0	3.8	28.2	5.6	0.0	0.0	0.0	5.6	16.9	16.9	16.9	1.9	0.0	28.2	0.0	7.4
21	1.9	5.6	3.8	5.6	5.6	5.6	1.9	9.4	1.9	3.8	5.6	11.3	9.4	5.6	5.6	5.6	3.8	0.0	3.8	7.5	3.8	3.8	5.6	5.6	11.3	0.0	5.1
22	0.0	0.0	1.9	3.8	5.6	5.6	0.0	3.8	9.4	16.9	28.2	7.5	9.4	9.4	7.5	7.5	3.8	3.8	1.9	18.8	7.5	9.4	5.6	3.8	28.2	0.0	7.1
23	1.9	5.6	3.8	7.5	16.9	18.8	28.2	16.9	1.9	9.4	5.6	9.4	13.1	5.6	3.8	3.8	1.9	0.0	28.2	18.8	5.6	9.4	3.8	5.6	28.2	0.0	9.5
24	7.5	5.6	3.8	0.0	3.8	1.9	9.4	1.9	7.5	3.8	7.5	7.5	3.8	5.6	5.6	3.8	3.8	9.4	0.0	7.5	1.9	3.8	5.6	9.4	9.4	0.0	5.0
25	9.4	0.0	5.6	0.0	0.0	0.0	0.0	5.6	0.0	1.9	9.4	9.4	7.5	3.8	5.6	3.8	3.8	5.6	15.0	1.9	3.8	13.1	15.0	15.0	15.0	0.0	5.8
26	9.4	5.6	7.5	3.8	1.9	3.8	5.6	9.4	5.6	5.6	1.9	3.8	7.5	5.6	0.0	0.0	3.8	0.0	5.6	3.8	5.6	18.8	15.0	22.5	22.5	0.0	6.3
27	9.4	5.6	7.5	13.1	7.5	9.4	22.5	3.8	20.7	22.5	7.5	5.6	3.8	7.5	5.6	5.6	1.9	0.0	3.8	9.4	11.3	9.4	9.4	3.8	22.5	0.0	8.6
28	7.5	3.8	9.4	1.9	7.5	15.0	13.1	18.8	0.0	15.0	9.4	7.5	0.0	5.6	0.0	3.8	3.8	3.8	3.8	13.1	7.5	0.0	0.0	0.0	18.8	0.0	6.3
29	0.0	0.0	18.8	5.6	3.8	0.0	0.0	3.8	0.0	1.9	1.9	5.6	13.1	13.1	3.8	0.0	1.9	3.8	5.6	28.2	9.4	3.8	0.0	3.8	28.2	0.0	5.3
30	1.9	1.9	3.8	5.6	22.5	3.8	5.6	0.0	5.6	5.6	3.8	3.8	5.6	28.2	5.6	7.5	3.8	0.0	9.4	20.7	16.9	5.6	0.0	0.8	28.2	0.0	7.0
MAX.	18.8	15.0	18.8	26.3	41.3	41.3	31.9	41.3	28.2	24.4	28.2	28.2	22.5	31.9	18.8	16.9	18.8	15.0	45.1	60.1	28.2	31.9	31.9	28.2	28.2	0.0	28.2
MIN.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
PROM	5.8	5.6	6.3	6.3	8.3	6.9	12.6	13.0	7.5	8.5	10.0	8.8	7.6	9.2	5.2	5.3	5.3	4.3	7.9	12.8	9.6	11.6	9.4	8.5	8.5	8.5	

* : Código ausencia de datos por instalación estación
 + : Código ausencia de datos por falta de energía eléctrica temporalmente
 717 : N° de datos validos
 100 % : Recuperación de datos
 D : Día de medición, correspondiendo el día 1 al 01.09.98 y el día 30 al 30.09.98.
 H : Hora de medición a la cual corresponde el promedio horario.
 C : Calibración del equipo.

Nota Importante al reverso

MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

LUGAR : CUERPO DE BOMBEROS

VARIABLE : DIOXIDO DE NITROGENO (NO₂)

PERIODO : 1 AL 31 DE AGOSTO DE 1998

UNIDAD : µg/m³N

DIH	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM.	
1	26.3	16.9	13.1	13.1	15.0	26.3	11.3	11.3	18.8	13.1	15.0	30.0	22.5	11.3	9.4	7.5	11.3	7.5	15.0	24.4	33.8	20.7	13.1	9.4	33.8	7.5	16.5	
2	3.8	5.6	9.4	5.6	9.4	5.6	7.5	9.4	7.5	11.3	7.5	7.5	1.9	5.6	1.9	13.1	9.4	7.5	5.6	5.6	18.8	7.5	5.6	11.3	18.8	1.9	7.7	
3	7.5	5.6	5.6	5.6	5.6	5.6	7.5	16.9	26.3	13.1	9.4	13.1	13.1	9.4	7.5	3.8	5.6	7.5	1.9	3.8	15.0	13.1	20.7	13.1	26.3	1.9	9.9	
4	15.0	7.5	11.3	13.1	11.3	3.8	3.8	18.8	31.9	5.6	11.3	7.5	9.4	3.8	18.8	9.4	16.9	16.9	11.3	26.3	18.8	16.9	18.8	18.8	31.9	3.8	13.6	
5	15.0	7.5	7.5	15.0	11.3	9.4	3.8	11.3	13.1	16.9	9.4	13.1	16.9	15.0	16.9	13.1	7.5	7.5	9.4	11.3	18.8	13.1	22.5	7.5	22.5	3.8	12.2	
6	9.4	9.4	9.4	1.9	5.6	0.0	3.8	3.8	1.9	3.8	9.4	28.2	11.3	1.9	0.0	1.9	1.9	1.9	7.5	13.1	7.5	7.5	9.4	3.8	28.2	0.0	7.1	
7	11.3	0.0	0.0	0.0	7.5	1.9	3.8	5.6	5.6	9.4	15.0	3.8	1.9	0.0	3.8	0.0	1.9	5.6	1.9	0.0	16.9	7.5	9.4	9.4	16.9	0.0	5.2	
8	7.5	9.4	9.4	9.4	0.0	1.9	3.8	1.9	5.6	15.0	13.1	16.9	24.4	1.9	1.9	1.9	1.9	0.0	0.0	7.5	15.0	5.6	5.6	5.6	24.4	0.0	6.6	
9	7.5	3.8	3.8	3.8	1.9	1.9	1.9	3.8	5.6	13.1	13.1	3.8	11.3	22.5	9.4	1.9	3.8	1.9	5.6	9.4	3.8	1.9	9.4	22.5	1.9	6.3		
10	5.6	0.0	3.8	1.9	1.9	1.9	3.8	11.3	35.7	11.3	1.9	3.8	9.4	16.9	3.8	1.9	5.6	3.8	0.0	5.6	9.4	11.3	9.4	18.8	35.7	0.0	7.4	
11	16.9	15.0	11.3	9.4	15.0	7.5	13.1	16.9	11.3	9.4	3.8	C	C	C	C	C	C	C	13.1	1.9	16.9	7.5	9.4	13.1	16.9	1.9	10.9	
12	9.4	3.8	5.6	1.9	5.6	5.6	11.3	13.1	28.2	7.5	3.8	9.4	16.9	11.3	16.9	13.1	1.9	22.5	7.5	11.3	24.4	16.9	31.9	13.1	31.9	1.9	12.2	
13	18.8	7.5	1.9	7.5	11.3	5.6	13.1	16.9	9.4	9.4	13.1	9.4	13.1	7.5	18.8	7.5	16.9	15.0	11.3	28.2	26.3	5.6	3.8	11.3	28.2	1.9	12.0	
14	5.6	5.6	5.6	9.4	9.4	15.0	16.9	9.4	22.5	15.0	15.0	11.3	15.0	20.7	13.1	13.1	0.0	9.4	9.4	13.1	11.3	13.1	7.5	5.6	22.5	0.0	11.4	
15	13.1	3.8	11.3	9.4	3.8	1.9	13.1	16.9	3.8	3.8	11.3	9.4	18.8	18.8	15.0	16.9	11.3	26.3	7.5	13.1	18.8	13.1	9.4	16.9	26.3	1.9	12.0	
16	11.3	3.8	5.6	18.8	13.1	18.8	5.6	15.0	5.6	9.4	9.4	15.0	13.1	7.5	0.0	3.8	7.5	5.6	16.9	18.8	13.1	15.0	15.0	26.3	26.3	0.0	11.4	
17	11.3	9.4	11.3	18.8	7.5	9.4	18.8	15.0	16.9	13.1	5.6	11.3	7.5	9.4	9.4	18.8	16.9	9.4	9.4	5.6	20.7	24.4	22.5	16.9	24.4	5.6	13.3	
18	15.0	13.1	18.8	11.3	11.3	13.1	9.4	18.8	15.0	31.9	13.1	9.4	15.0	7.5	16.9	7.5	5.6	5.6	5.6	7.5	7.5	7.5	9.4	13.1	15.0	31.9	5.6	12.4
19	9.4	7.5	7.5	9.4	11.3	9.4	5.6	16.9	28.2	11.3	18.8	7.5	9.4	9.4	9.4	7.5	9.4	3.8	1.9	13.1	31.9	15.0	16.8	26.3	31.9	1.9	12.9	
20	9.4	5.6	9.4	5.6	3.8	9.4	5.6	16.9	7.5	7.5	11.3	9.4	7.5	5.6	16.9	26.3	16.9	7.5	24.4	31.9	16.9	33.8	31.9	7.5	33.8	3.8	13.7	
21	7.5	7.5	9.4	9.4	9.4	3.8	5.6	7.5	18.8	9.4	7.5	13.1	11.3	9.4	5.6	0.0	13.1	13.1	7.5	11.3	13.1	13.1	3.8	11.3	18.8	0.0	9.2	
22	13.1	9.4	3.8	9.4	9.4	5.6	11.3	13.1	13.1	11.3	9.4	11.3	9.4	11.3	5.6	9.4	9.4	3.8	13.1	11.3	9.4	20.7	15.0	20.7	3.8	10.5		
23	11.3	7.5	5.6	18.8	9.4	3.8	5.6	13.1	7.5	5.6	5.6	13.1	16.9	11.3	5.6	11.3	13.1	22.5	5.6	11.3	7.5	5.6	18.8	16.9	22.5	3.8	10.6	
24	9.4	0.0	9.4	0.0	9.4	9.4	11.3	9.4	15.0	3.8	16.9	15.0	5.6	3.8	7.5	5.6	15.0	11.3	3.8	16.9	20.7	9.4	11.3	9.4	20.7	0.0	9.5	
25	11.3	5.6	11.3	1.9	3.8	7.5	9.4	5.6	15.0	7.5	13.1	7.5	1.9	1.9	0.0	11.3	15.0	3.8	5.6	11.3	16.9	3.8	16.9	11.3	16.9	0.0	8.3	
26	22.5	3.8	9.4	5.6	9.4	11.3	5.6	13.1	7.5	11.3	16.9	5.6	13.1	13.1	15.0	3.8	5.6	3.8	9.4	9.4	5.6	9.4	9.4	9.4	22.5	3.8	9.5	
27	5.6	11.3	7.5	1.9	1.9	1.9	3.8	11.3	35.7	11.3	1.9	3.8	9.4	16.9	3.8	9.4	5.6	3.8	0.0	5.6	9.4	11.3	9.4	3.8	35.7	0.0	7.7	
28	11.3	0.0	7.5	0.0	7.5	1.9	3.8	5.6	5.6	9.4	15.0	3.8	1.9	11.3	3.8	9.4	7.5	0.0	1.9	0.0	16.9	7.5	9.4	9.4	16.9	0.0	6.4	
29	7.5	9.4	9.4	0.0	1.9	3.8	1.9	5.6	15.0	13.1	16.9	24.4	1.9	7.5	5.6	1.9	7.5	0.0	0.0	7.5	15.0	5.6	5.6	24.4	0.0	7.2		
30	7.5	3.8	3.8	13.1	1.9	1.9	7.5	3.8	5.6	13.1	13.1	3.8	11.3	22.5	9.4	1.9	3.8	1.9	5.6	9.4	3.8	1.9	9.4	22.5	1.9	6.9		
31	5.6	7.5	3.8	1.9	9.4	1.9	3.8	11.3	35.7	11.3	1.9	3.8	9.4	16.9	3.8	9.4	5.6	3.8	0.0	5.6	9.4	11.3	9.4	3.8	35.7	0.0	7.9	
MAX.	26.3	16.9	18.8	18.8	15.0	26.3	18.8	35.7	31.9	16.9	30.0	22.5	22.5	18.8	26.3	16.9	26.3	24.4	31.9	33.8	33.8	31.9	26.3	31.9	33.8	31.9	26.3	
MIN.	3.8	0.0	0.0	0.0	1.9	0.0	1.9	3.8	1.9	3.8	1.9	3.8	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.6	3.8	1.9	3.8		
PROM	11.0	6.7	7.9	7.2	7.6	6.7	7.5	11.4	15.3	11.4	10.5	11.5	10.2	10.4	8.5	8.1	8.3	7.9	7.1	11.1	15.6	11.7	12.6	12.0	12.0	12.0	12.0	

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 : Día de medición, correspondiendo el día 1 al 01.08.98 y el día 31 al 31.08.98.
 : Hora de medición a la cual corresponde el promedio horario.
 : Calibración del equipo.

Código ausencia de datos por instalación estación
 Código ausencia de datos por falta de energía eléctrica temporalmente
 N° de datos válidos
 Recuperación de datos
 D
 H
 C

Nota Importante al reverso

MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

LUGAR : CUERPO DE BOMBEROS
 PERIODO : 1 AL 31 DE JULIO DE 1988
 VARIABLE : DIOXIDO DE NITROGENO (NO₂)
 UNIDAD : µg/m³N

D/H	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM.	
1	13.1	11.3	3.8	3.8	1.9	3.8	5.6	16.9	1.9	1.9	3.8	7.5	5.6	16.0	5.6	13.1	6.6	7.5	18.8	9.4	9.4	1.9	7.5	26.3	26.3	1.9	8.4	
2	1.9	16.9	16.0	1.9	16.9	0.0	0.0	22.5	24.4	16.9	6.6	6.6	1.9	18.8	22.5	6.6	13.1	3.8	6.6	18.8	0.0	30.0	16.0	0.0	30.0	0.0	11.0	
3	0.0	7.5	6.6	0.0	6.6	3.8	13.1	1.9	16.0	1.9	9.4	5.6	16.9	0.0	5.6	1.9	0.0	11.3	1.9	9.4	3.8	11.3	16.9	0.0	16.9	0.0	6.6	
4	0.0	1.9	11.3	11.3	9.4	16.9	1.9	11.3	46.0	3.8	7.5	1.9	0.0	6.6	7.5	16.0	22.5	3.8	3.8	16.0	1.9	16.9	1.9	16.9	22.5	0.0	7.7	
5	13.1	13.1	16.0	6.6	1.9	16.0	16.0	13.1	16.9	22.5	31.9	5.6	0.0	13.1	26.3	16.0	0.0	11.3	9.4	1.9	13.1	16.9	6.6	6.6	31.9	0.0	12.0	
6	11.3	6.6	16.0	3.8	7.5	13.1	3.8	9.4	36.7	7.5	6.6	16.9	16.0	9.4	16.0	6.6	3.8	3.8	7.5	3.8	20.7	3.8	6.6	7.5	36.7	3.8	9.9	
7	0.0	1.9	0.0	13.1	9.4	9.4	7.5	20.7	7.5	0.0	6.6	6.6	6.6	3.8	6.6	13.1	11.3	9.4	22.5	6.6	22.5	3.8	20.7	3.8	22.5	0.0	8.7	
8	0.0	3.8	7.5	1.9	7.5	3.8	13.1	18.8	6.6	6.6	13.1	13.1	6.6	7.5	11.3	7.5	3.8	6.6	6.6	16.9	1.9	6.6	9.4	3.8	18.8	0.0	7.4	
9	16.9	0.0	11.3	7.5	6.6	11.3	6.6	20.7	1.9	18.8	1.9	9.4	7.5	6.6	6.6	3.8	20.7	7.5	13.1	16.9	3.8	6.6	6.6	6.6	20.7	0.0	8.7	
10	7.5	3.8	3.8	6.6	11.3	6.6	18.8	13.1	37.6	9.4	9.4	13.1	11.3	13.1	6.6	6.6	9.4	9.4	3.8	3.8	1.9	9.4	1.9	6.6	37.6	1.9	9.2	
11	9.4	9.4	7.5	7.5	3.8	3.8	9.4	1.9	3.8	13.1	13.1	16.0	39.4	9.4	7.6	26.3	9.4	6.6	0.0	7.5	7.5	1.9	13.1	11.3	32.4	0.0	9.9	
12	3.8	9.4	6.6	6.6	7.5	16.9	9.4	7.5	1.9	11.3	13.1	16.0	3.8	7.5	11.3	3.8	13.1	18.8	6.6	6.6	3.8	16.0	16.0	3.8	18.8	1.9	8.2	
13	13.1	7.5	1.9	1.9	7.5	3.8	1.9	11.3	13.1	18.8	16.9	16.9	7.5	11.3	3.8	7.5	0.0	3.8	3.8	36.7	33.8	11.3	6.6	7.5	36.7	0.0	10.2	
14	6.6	3.8	9.4	7.5	6.6	7.5	6.6	11.3	13.1	18.8	18.8	18.8	20.7	3.8	9.4	13.1	11.3	11.3	3.8	7.5	9.4	9.4	11.3	7.5	37.6	1.9	10.7	
15	6.6	7.5	1.9	3.8	6.6	0.0	0.0	18.8	13.1	13.1	1.9	3.8	7.5	3.8	1.9	3.8	9.4	3.8	7.5	7.5	3.8	26.3	13.1	6.6	26.3	0.0	7.3	
16	6.6	7.5	0.0	3.8	1.9	7.5	1.9	6.6	26.3	3.8	6.6	7.5	0.0	0.0	3.8	6.6	6.6	3.8	1.9	1.9	3.8	11.3	11.3	22.5	26.3	0.0	6.2	
17	16.0	9.4	3.8	6.6	9.4	3.8	3.8	3.8	16.9	7.5	11.3	11.3	9.4	7.5	6.6	6.6	3.8	1.9	11.3	9.4	7.5	7.5	13.1	18.8	18.8	1.9	8.4	
18	3.8	1.9	3.8	0.0	7.5	3.8	3.8	22.5	16.9	9.4	3.8	3.8	3.8	7.5	13.1	18.8	20.7	3.8	3.8	7.5	1.9	16.9	26.3	20.7	26.3	0.0	9.4	
19	13.1	11.3	1.9	1.9	3.8	3.8	6.6	11.3	13.1	16.0	16.0	18.8	18.8	20.7	3.8	9.4	3.8	7.5	3.8	1.9	18.8	3.8	7.5	13.1	20.7	1.9	9.1	
20	9.4	7.5	7.5	0.0	1.9	3.8	0.0	16.0	28.2	1.9	0.0	11.3	16.9	6.6	6.6	0.0	7.5	9.4	11.3	5.6	28.2	3.8	24.4	18.0	28.2	0.0	9.6	
21	11.3	0.0	6.6	9.4	11.3	3.8	1.9	11.3	9.4	9.4	13.1	9.4	13.1	26.3	16.9	20.7	9.4	7.5	9.4	6.6	36.7	22.5	6.6	3.8	13.1	36.7	0.0	11.6
22	9.4	7.5	22.5	3.8	3.8	1.9	3.8	13.1	18.8	16.9	7.5	6.6	13.1	9.4	3.8	3.8	6.6	6.6	11.3	33.8	33.8	30.0	7.5	7.5	24.4	3.8	11.7	
23	6.6	7.5	16.9	9.4	7.5	6.6	9.4	0.0	16.9	11.3	13.1	16.0	7.5	1.9	0.0	7.5	9.4	9.4	6.6	6.6	6.6	30.0	24.4	16.9	26.3	30.0	0.0	12.0
24	1.9	16.9	9.4	7.5	6.6	9.4	0.0	16.9	11.3	13.1	16.0	9.4	16.0	7.5	1.9	9.4	18.8	16.9	9.4	9.4	6.6	20.7	24.4	22.5	16.9	24.4	1.9	12.1
25	11.3	9.4	1.9	18.8	7.5	11.3	13.1	9.4	18.8	16.0	31.9	6.6	11.3	1.9	9.4	18.8	7.5	6.6	6.6	1.9	13.1	31.9	16.0	18.8	26.3	31.9	3.8	13.7
26	16.0	13.1	18.8	11.3	11.3	13.1	9.4	7.5	18.8	16.9	28.2	11.3	18.8	7.5	9.4	9.4	7.5	9.4	3.8	1.9	13.1	16.9	33.8	31.9	7.5	33.8	3.8	13.7
27	9.4	7.5	7.5	9.4	1.9	3.8	6.6	16.9	7.5	7.5	11.3	9.4	7.5	6.6	16.9	7.5	6.6	6.6	7.5	7.5	9.4	3.8	13.1	16.0	31.9	6.6	12.4	
28	9.4	11.3	9.4	6.6	3.8	3.8	6.6	16.9	7.5	7.5	11.3	9.4	7.5	6.6	16.9	26.3	16.9	7.5	24.4	31.9	16.9	33.8	31.9	7.5	33.8	3.8	13.7	
29	7.5	7.5	9.4	9.4	1.9	3.8	6.6	7.5	18.8	9.4	7.5	13.1	11.3	9.4	6.6	6.6	16.9	13.1	7.5	11.3	13.1	13.1	3.8	11.3	18.8	1.9	9.3	
30	13.1	9.4	7.5	9.4	9.4	6.6	11.3	16.0	13.1	11.3	9.4	11.3	9.4	11.3	6.6	9.4	9.4	3.8	13.1	7.5	9.4	7.5	16.0	13.1	16.0	3.8	10.0	
31	11.3	9.4	9.4	9.4	7.5	7.5	6.6	11.3	16.0	16.9	6.6	13.1	24.4	7.5	1.9	9.4	3.8	6.6	6.6	13.1	11.3	9.4	16.9	7.8	24.4	1.9	9.9	
MAX.	16.9	16.9	22.5	18.8	16.9	16.9	20.7	22.5	37.6	37.6	31.9	18.8	39.4	26.3	26.3	26.3	20.7	24.4	36.7	33.8	33.8	33.8	31.9	26.3	31.9	26.3	26.3	
MIN.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	1.9	0.0	1.9	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	0.0	1.9	0.0	0.0	0.0	
PROM.	8.2	7.8	7.7	6.2	6.6	7.0	6.8	12.8	16.7	12.6	11.0	10.2	10.2	10.1	8.0	9.0	8.1	7.8	8.2	12.1	13.3	12.6	12.1	11.8	11.8	11.8	11.8	

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 744 :
 100 % :
 Día de medición, correspondiendo el día 1 al 01.07.98 y el día 31 al 31.07.98.
 Hora de medición a la cual corresponde el promedio horario.

Código ausencia de datos por instalación estación
 Código ausencia de datos por falta de energía eléctrica temporalmente
 N° de datos válidos
 Recuperación de datos
 D H



MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

LUGAR : CUERPO DE BOMBEROS
 PERIODO : 1 AL 30 DE JUNIO DE 1998
 VARIABLE : DIOXIDO DE NITROGENO (NO2)
 UNIDAD : µg/m3N

D/H	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM.	
1	5.8	3.7	2.3	3.1	1.5	2.6	3.8	6.5	10.2	7.0	9.3	4.8	8.8	5.2	3.5	2.9	5.3	5.3	10.6	14.6	11.9	11.8	9.0	5.0	14.6	1.5	6.4	
2	5.8	3.7	2.2	3.0	1.4	2.6	3.7	6.4	10.1	7.0	9.1	4.8	8.8	5.1	3.5	2.9	5.2	5.2	10.7	14.8	12.1	11.8	8.9	5.0	14.8	1.4	6.4	
3	5.8	3.6	2.1	2.9	1.4	2.5	3.6	6.5	10.2	7.0	8.7	4.6	8.9	5.0	3.4	2.8	4.9	5.0	10.7	14.9	12.1	11.6	8.6	4.9	14.9	1.4	6.3	
4	5.7	3.5	2.0	2.8	1.3	2.3	3.6	6.7	10.2	6.9	8.0	4.4	8.8	4.6	3.3	2.7	4.5	4.6	10.5	14.8	12.1	11.3	8.2	5.0	14.8	1.3	6.2	
5	5.7	4.4	2.2	2.9	1.4	2.6	3.9	7.2	10.6	6.6	8.7	4.5	9.4	4.3	3.1	2.9	4.7	4.6	8.4	10.6	10.8	10.6	7.9	4.3	10.8	1.4	5.9	
6	5.3	4.3	2.4	3.0	1.5	2.8	4.3	7.7	10.7	6.6	7.6	4.3	10.1	4.3	2.8	3.2	4.7	4.1	8.8	10.5	10.7	10.7	7.9	4.7	10.7	1.5	6.0	
7	3.6	3.5	2.7	2.9	1.7	3.1	4.8	8.1	11.1	7.3	9.0	5.2	5.4	4.2	3.1	3.5	5.2	4.6	9.8	11.7	11.9	11.9	8.8	5.2	11.9	1.7	6.2	
8	4.1	3.8	3.1	2.8	1.9	2.8	4.9	8.4	10.8	7.7	10.1	5.9	6.1	4.7	3.5	4.0	5.9	5.2	11.0	13.1	13.4	13.4	9.6	5.4	13.4	1.9	6.7	
9	5.4	4.2	2.7	3.0	2.1	2.7	5.1	8.6	11.8	8.3	11.5	6.7	7.0	5.1	3.5	2.7	6.2	5.9	12.6	13.7	12.6	12.3	9.1	4.8	13.7	2.1	7.0	
10	5.0	4.8	3.1	3.4	2.5	2.8	5.3	7.8	10.6	7.2	12.5	5.9	8.1	5.9	4.1	3.1	7.2	6.6	9.1	11.3	9.7	11.9	10.6	5.6	12.5	2.5	6.8	
11	6.0	4.5	3.0	4.1	2.3	3.4	4.1	5.6	9.0	7.5	14.3	7.1	8.3	7.1	4.9	3.8	8.6	7.9	10.9	13.5	11.6	14.3	12.8	5.3	14.3	2.3	7.5	
12	7.5	5.2	3.3	5.2	2.8	4.2	4.2	4.2	10.3	8.4	17.8	8.0	10.3	8.9	4.2	4.7	9.4	9.9	13.6	16.9	12.2	14.6	13.1	4.2	17.8	2.8	8.5	
13	6.3	2.5	0.0	1.3	0.0	0.0	0.0	1.3	6.3	7.5	16.9	6.3	15.6	10.6	3.8	0.0	4.4	6.3	12.5	16.3	14.4	11.9	10.0	5.6	16.9	0.0	6.6	
14	9.4	3.8	0.0	1.9	0.0	0.0	0.0	1.9	9.4	6.6	19.7	7.5	3.8	5.6	0.0	4.7	9.4	4.7	11.3	12.2	9.4	8.4	0.0	4.7	11.3	0.0	5.6	
15	15.0	7.5	0.0	3.8	0.0	0.0	3.8	7.5	9.4	16.9	7.5	3.8	5.6	5.6	11.3	0.0	11.3	0.0	3.8	13.1	11.3	13.1	0.0	0.0	16.9	0.0	6.1	
16	5.0	4.1	3.1	3.4	2.5	2.8	5.3	7.8	10.6	7.2	12.5	5.9	8.1	5.9	4.1	3.1	7.2	6.6	9.1	11.3	9.7	11.9	10.6	5.6	12.5	2.5	6.8	
17	6.0	4.5	3.0	4.1	2.3	3.4	4.1	5.6	9.0	7.5	14.3	7.1	8.3	7.1	4.9	3.8	8.6	7.9	10.9	13.5	11.6	14.3	12.8	5.3	14.3	2.3	7.5	
18	7.5	5.2	3.3	5.2	2.8	4.2	4.2	4.2	10.3	8.4	17.8	8.0	10.3	8.9	4.2	4.7	9.4	9.9	13.6	16.9	12.2	14.6	13.1	4.2	17.8	2.8	8.5	
19	6.3	2.5	0.0	1.3	0.0	0.0	0.0	1.3	6.3	10.0	1.9	3.1	2.5	8.8	5.6	0.0	2.5	4.4	32.5	60.7	26.3	19.4	11.3	13.1	60.7	0.0	9.2	
20	9.4	3.8	0.0	1.9	0.0	0.0	0.0	1.9	9.4	6.6	19.7	7.5	3.8	3.8	5.6	0.0	4.7	9.4	4.7	11.3	12.2	9.4	8.4	0.0	19.7	0.0	5.6	
21	15.0	7.5	0.0	3.8	0.0	0.0	3.8	7.5	9.4	16.9	7.5	3.8	5.6	5.6	11.3	0.0	11.3	0.0	3.8	13.1	11.3	13.1	0.0	0.0	15.0	0.0	2.1	
22	0.0	1.9	0.0	3.8	0.0	5.6	3.8	5.6	13.1	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	15.0	0.0	2.1
23	0.0	1.9	0.0	3.8	0.0	5.6	3.8	5.6	13.1	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	15.0	0.0	2.1
24	7.5	1.9	0.0	0.0	0.0	1.9	3.8	13.1	18.8	15.0	5.6	11.3	0.0	0.0	0.0	0.0	0.0	1.9	33.8	28.2	30.0	15.0	0.0	0.0	33.8	0.0	7.8	
25	0.0	1.9	3.8	0.0	3.8	0.0	11.3	18.8	18.8	5.6	3.8	0.0	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	18.8	0.0	3.4
26	0.0	1.9	1.9	0.0	0.0	0.0	3.8	11.3	3.8	3.8	0.0	3.8	0.0	0.0	7.5	0.0	5.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	18.8	0.0	3.4
27	11.3	13.1	13.1	16.9	11.3	16.9	13.1	22.5	11.3	20.7	13.1	18.8	20.7	1.9	11.3	18.8	16.9	16.9	16.9	18.8	5.6	22.5	22.5	0.0	22.5	0.0	14.8	
28	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	9.4	11.3	3.8	15.0	7.5	3.8	7.5	9.4	3.8	28.2	26.3	18.8	16.9	13.1	16.9	28.2	0.0	8.0		
29	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	11.3	3.8	22.5	7.5	1.9	1.9	0.0	0.0	9.4	7.5	9.4	18.8	11.3	7.5	3.8	0.0	22.5	0.0	5.0	
30	15.0	7.5	0.0	3.8	0.0	0.0	3.8	7.5	9.4	16.9	7.5	5.6	5.6	11.3	0.0	11.3	0.0	11.3	0.0	3.8	13.1	11.3	13.1	0.0	16.9	0.0	6.1	
MAX.	15.0	13.1	13.1	16.9	11.3	16.9	18.8	22.5	15.0	22.5	13.1	18.8	20.7	11.3	13.1	18.8	16.9	33.8	60.7	30.0	22.5	22.5	22.5	16.9				
MIN.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
PROM	6.1	4.0	2.2	3.1	1.5	2.4	3.6	6.3	10.0	7.2	11.3	5.7	7.1	5.4	3.9	2.8	5.3	5.8	10.1	13.7	12.0	11.8	9.4	4.7				

: *
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 : 717
 : 100 %
 : Día de medición, correspondiendo el día 1 al 01.06.98 y el día 30 al 30.06.98.
 : Hora de medición a la cual corresponde el promedio horario.
 : Calibración equipo

Nota importante al reverso



MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

LUGAR : CUERPO DE BOMBEROS
 PERIODO : 1 AL 31 DE MAYO DE 1998
 VARIABLE : DIOXIDO DE NITROGENO (NO2)
 UNIDAD : µg/m3N

D/H	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM				
1	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9		
2	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8		
3	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	
4	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	
5	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	
6	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	
7	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	
8	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	26.3	
9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	
10	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
11	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
12	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
13	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
14	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
15	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
16	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
17	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
18	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
19	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
20	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
21	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
22	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
23	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
24	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
25	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
26	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
27	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
28	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
29	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
30	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
31	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9	1.9
MAX.	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	95.8	
MIN.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
PROM	19.1	18.8	19.0	18.8	19.0	18.8	19.0	18.7	18.1	18.7	18.1	18.7	18.2	17.1	15.7	15.9	15.7	15.6	15.9	16.0	16.1	16.1	15.9	16.1	16.1	16.1	16.1	16.1	16.1	16.5	

Código ausencia de datos por instalación estación
 Código ausencia de datos por falta de energía eléctrica temporalmente
 N° de datos válidos
 Recuperación de datos
 D H

*
 +
 743
 100 %
 Día de medición, correspondiendo el día 1 al 01.05.98 y el día 31 al 31.05.98.
 Hora de medición a la cual corresponde el promedio horario.



MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

LUGAR : CUERPO DE BOMBERO
 PERIODO : 1 AL 30 DE ABRIL DE 1998
 VARIABLE : DIOXIDO DE NITROGENO (NO2)
 UNIDAD : µg/m3N

D/H	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM		
1	1.9	0.0	0.0	0.0	5.6	0.0	0.0	3.8	24.4	0.0	0.0	0.0	0.0	0.0	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	24.4	0.0	1.9	
2	0.0	0.0	3.8	0.0	0.0	0.0	0.0	0.0	0.0	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	7.5	0.0	0.5	
3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	3.8	37.6	16.9	9.4	3.8	37.6	0.0	3.1	
4	7.5	0.0	0.0	0.0	0.0	0.0	0.0	3.8	18.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	7.5	18.8	0.0	1.6	
5	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	15.0	0.0	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	15.0	0.0	0.8	
6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	28.2	1.9	0.0	0.0	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	16.9	0.0	11.3	1.9	28.2	0.0	2.8		
7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	60.1	5.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	60.1	0.0	3.8	
9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.6	7.5	9.4	9.4	0.0	0.9	
10	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	13.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	3.8	9.4	5.6	0.0	1.9	0.0	0.1		
11	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.4	
12	0.0	0.0	0.0	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.6	0.0	0.3	
13	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	15.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	15.0	0.0	0.6	
14	11.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	24.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	24.4	0.0	1.9	24.4	0.0	1.6
15	0.0	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	20.7	0.0	0.0	20.7	0.0	1.3		
16	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
17	41.3	30.0	31.9	22.5	18.8	22.5	22.5	33.8	48.8	41.3	30.0	22.5	30.0	43.2	48.8	43.2	20.7	24.4	41.3	60.1	16.9	24.4	24.4	24.4	15.0	60.1	15.0	31.6	
18	28.2	26.3	20.7	28.2	16.9	15.0	26.3	75.1	67.6	35.7	26.3	18.8	18.8	16.9	18.8	15.0	15.0	20.7	24.4	20.7	24.4	20.7	13.1	20.7	37.6	75.1	13.1	26.1	
19	50.7	43.2	22.5	16.9	31.9	30.0	24.4	20.7	28.2	41.3	39.4	30.0	20.7	24.4	31.9	22.5	15.0	28.2	16.9	15.0	20.7	15.0	15.0	28.2	50.7	15.0	26.4		
20	20.7	16.9	24.4	11.3	11.3	7.5	11.3	24.4	48.8	22.5	13.1	22.5	16.9	20.7	45.1	24.4	15.0	13.1	22.5	15.0	13.1	22.5	60.1	31.9	33.8	60.1	7.5	22.8	
21	35.7	30.0	20.7	16.9	24.4	31.9	33.8	41.3	78.9	77.0	20.7	15.0	26.3	35.7	30.0	18.8	15.0	16.9	22.5	16.9	45.1	33.8	41.3	41.3	78.9	15.0	32.1		
22	37.6	52.6	48.8	33.8	24.4	26.3	22.5	31.9	48.8	28.2	20.7	16.9	16.9	16.9	15.0	15.0	18.8	20.7	20.7	24.4	37.6	43.2	30.0	22.5	52.6	15.0	28.0		
23	30.0	20.7	20.7	18.8	20.7	15.0	16.9	22.5	37.6	33.8	41.3	35.7	45.1	33.8	26.3	22.5	16.9	20.7	15.0	22.5	37.6	43.2	30.0	22.5	54.5	15.0	29.4		
24	46.9	52.6	24.4	16.9	9.4	9.4	18.8	30.0	39.4	26.3	28.2	24.4	15.0	13.1	18.8	26.3	30.0	15.0	31.9	41.3	31.9	26.3	52.6	9.4	25.0				
25	33.8	20.7	18.8	16.9	20.7	18.8	22.5	33.8	31.9	46.9	20.7	18.8	20.7	16.9	15.0	13.1	11.3	13.1	15.0	18.8	30.0	24.4	28.2	46.9	11.3	21.9			
26	16.9	24.4	11.3	15.0	9.4	7.5	15.0	13.1	15.0	16.9	11.3	11.3	13.1	13.1	11.3	11.3	11.3	18.8	15.0	39.4	46.9	35.7	20.7	46.9	7.5	17.4			
27	18.8	11.3	20.7	13.1	11.3	11.3	16.9	22.5	33.8	48.8	28.2	26.3	28.2	39.4	26.3	15.0	18.8	18.8	16.9	35.7	48.8	41.3	50.7	37.6	50.7	11.3	26.7		
28	31.9	30.0	31.9	22.5	16.9	28.2	54.5	67.6	46.9	39.4	39.4	41.3	46.9	37.6	16.9	15.0	15.0	16.9	26.3	92.0	93.9	93.9	93.9	93.9	93.9	15.0	45.5		
29	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	94.7	
30	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	94.1	
MAX.	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	93.9	
MIN.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
PROM	20.2	18.3	16.3	14.1	13.6	13.7	15.5	19.8	28.4	22.0	18.0	16.3	18.0	17.3	18.2	15.1	15.9	15.1	16.1	18.9	24.3	25.2	24.1	23.3					

* : Código ausencia de datos por instalación estación
 + : Código ausencia de datos por falta de energía eléctrica temporalmente
 720 : N° de datos válidos
 100 % : Recuperación de datos
 D : Día de medición, correspondiendo el día 1 al 01.04.98 y el día 30 al 30.04.98.
 H : Hora de medición a la cual corresponde el promedio horario.

MONITOREO DE CALIDAD DEL AIRE

TABLA 7.

LUGAR : Cuerpo de Bomberos
 PERIODO : 2 al 31 de Marzo de 1998
 VARIABLE : DIOXIDO DE NITROGENO (NO2)
 UNIDAD : µg/m3N

D/H	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	24:00	MAX.	MIN.	PROM.		
1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
3	0.0	0.0	0.0	0.0	0.0	0.0	9.4	16.9	20.7	20.7	18.8	13.1	5.6	1.9	1.9	1.9	0.0	0.0	0.0	0.0	1.9	1.9	7.5	3.8	3.8	20.7	0.0	5.3	
4	5.6	0.0	0.0	0.0	1.9	0.0	28.2	15.0	9.4	1.9	3.8	3.8	15.0	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	28.2	0.0	3.9	
5	0.0	0.0	0.0	0.0	0.0	0.0	7.5	20.7	1.9	1.9	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	20.7	0.0	1.7	
6	0.0	0.0	0.0	0.0	0.0	0.0	3.8	0.0	1.9	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.8	0.0	0.3	
7	0.0	0.0	0.0	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.6	13.1	9.4	0.0	0.0	0.0	0.0	0.0	0.0	11.3	13.1	0.0	0.0	13.1	0.0	2.3	
8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	30.0	1.9	0.0	0.0	11.3	5.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	30.0	0.0	2.1	
9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	5.6	1.9	0.0	0.0	5.6	0.0	0.5	
10	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	9.4	1.9	3.8	13.1	7.5	1.9	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	13.1	0.0	1.8	
11	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.8	7.5	0.0	0.0	0.0	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	7.5	0.0	0.6	
12	0.0	0.0	0.0	0.0	3.8	0.0	5.6	16.9	1.9	0.0	24.4	11.3	3.8	0.0	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	24.4	0.0	3.4	
13	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.6	0.0	0.2	
14	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	13.1	1.9	33.8	5.6	0.0	33.8	0.0	2.3	
15	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	5.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.6	0.0	0.5	
16	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	9.4	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	9.4	0.0	0.6	
17	1.9	3.8	5.6	0.0	7.5	0.0	5.6	9.4	15.0	5.6	0.0	0.0	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	13.1	5.6	0.0	0.0	15.0	0.0	3.1		
18	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.8	0.0	0.3	
19	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.8	0.0	0.4	
20	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	11.3	1.9	0.0	0.0	0.0	11.3	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	11.3	0.0	1.4	
21	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.6	1.9	0.0	0.0	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.6	0.0	1.0	
22	0.0	0.0	0.0	0.0	0.0	0.0	0.0	9.4	5.6	5.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	9.4	0.0	0.6	
23	0.0	0.0	0.0	0.0	15.0	16.9	3.8	0.0	11.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	11.3	0.0	1.4	
24	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.8	0.0	0.3	
25	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	3.8	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.8	0.0	0.4	
26	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	9.4	0.0	0.0	1.9	0.0	0.0	5.6	0.0	0.0	0.0	0.0	1.9	3.8	5.6	0.0	0.0	3.8	0.0	1.4	
27	0.0	0.0	0.0	0.0	1.9	0.0	0.0	33.8	9.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	33.8	0.0	2.9	
28	1.9	1.9	0.0	0.0	0.0	0.0	1.9	1.9	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	16.9	0.0	1.3	
29	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
30	0.0	0.0	0.0	0.0	0.0	0.0	5.6	0.0	22.5	7.5	9.4	0.0	0.0	0.0	3.8	18.8	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	22.5	0.0	3.8	
MAX.	5.6	3.8	5.6	1.9	15.0	16.9	28.2	33.8	22.5	20.7	24.4	13.1	15.0	11.3	9.4	18.8	7.5	28.2	9.4	18.8	26.3	33.8	16.9	5.6	16.9	5.6	5.6		
MIN.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
PROM	0.3	0.2	0.2	0.1	1.0	0.6	2.4	5.9	4.9	1.8	2.3	2.3	2.2	1.6	1.1	1.0	0.4	1.0	0.4	1.6	2.6	3.0	1.6	0.7	3.0	1.6	0.7		

* :
 + :
 704 :
 100 % :
 Día de medición, correspondiendo el día 1 al 02.03.98 y el día 30 al 31.03.98.
 Hora de medición a la cual corresponde el promedio horario.

Código ausencia de datos por instalación estación
 Código ausencia de datos por falta de energía eléctrica temporalmente
 N° de datos válidos
 Recuperación de datos
 D
 H

TABLA N° 6
 ESTACION : BOMBEROS
 PARAMETRO : NO2
 UNIDAD : ug/m3N
 PERIODO : Febrero 1998

DIA	HORAS																								PROM	MAX	MIN		
	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23					
1	6	6	6	11	11	4	2	9	21	9	4	4	6	9	24	11	19	9	8	8	6	4	6	4	9	9	24	2	
2	6	6	4	0	2	2	2	9	9	15	8	8	6	6	9	8	4	6	4	4	4	2	4	4	4	4	9	9	
3	9	8	8	6	6	6	6	6	11	6	6	6	8	9	6	11	4	6	6	2	2	8	4	4	4	6	6	21	
4	6	9	4	6	6	4	4	4	9	8	4	6	4	6	6	8	8	6	6	2	4	2	2	2	6	6	5	9	
5	6	6	9	8	8	17	4	8	8	8	6	6	4	8	4	4	9	4	4	4	6	6	4	4	4	4	5	19	
6	6	6	11	9	8	8	8	2	8	23	11	4	4	6	4	13	9	13	8	6	15	11	8	4	4	4	5	13	
7	6	6	2	6	6	2	2	6	6	6	2	2	2	2	8	8	6	6	6	6	8	8	4	4	4	4	9	23	
8	8	4	6	2	2	2	4	4	11	6	6	8	15	8	8	8	6	6	8	6	15	8	2	2	2	2	8	15	
9	8	4	6	2	2	4	4	4	9	9	6	6	8	8	8	6	6	6	9	9	6	8	8	2	2	2	7	19	
10	6	11	13	4	6	8	9	11	9	4	11	8	8	9	11	4	4	4	4	4	8	4	4	4	4	4	7	13	
11	6	4	4	11	4	2	4	4	11	9	4	4	9	9	4	4	4	4	2	2	0	0	2	2	2	2	5	11	
12	4	4	9	8	2	2	4	2	8	2	4	4	4	6	6	11	8	8	4	2	2	2	2	2	2	2	6	13	
13	13	9	2	2	2	2	2	8	8	8	6	6	6	6	8	2	8	4	2	2	2	2	2	2	2	2	5	15	
14	11	2	2	2	4	2	4	2	8	8	4	4	4	6	6	8	4	6	4	2	2	0	0	0	0	4	5	13	
15	6	0	6	8	2	2	8	8	13	6	6	6	6	6	6	4	6	4	2	2	6	6	6	6	6	6	5	15	
16	8	6	9	8	6	6	6	6	15	6	6	6	6	4	4	6	6	4	2	2	6	4	4	4	4	4	6	15	
17	9	6	9	6	6	6	6	6	13	4	4	4	4	4	4	6	8	4	2	2	2	2	2	2	2	2	6	15	
18	11	9	9	8	6	6	4	2	9	9	15	9	9	9	9	6	6	8	13	11	0	0	2	2	13	8	8	19	
19	6	4	4	6	4	4	4	4	9	11	11	11	11	9	13	8	8	2	13	15	8	9	2	2	0	0	5	11	
20	8	2	11	8	8	4	4	6	8	8	4	4	6	6	6	8	6	4	2	2	2	4	4	2	2	9	7	19	
21	11	11	19	8	4	4	4	4	8	4	2	6	6	6	6	8	6	4	2	11	8	4	4	4	4	4	6	13	
22	2	6	9	8	2	2	2	4	2	2	6	6	6	6	4	4	0	0	6	2	4	4	2	2	2	2	5	17	
23	8	8	9	2	8	4	4	4	13	6	8	8	8	9	9	8	6	6	4	4	6	4	4	4	4	4	6	6	13
24	8	6	4	6	0	6	6	4	6	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	5	17	
25	17	6	2	2	4	4	4	6	13	6	11	2	2	2	2	6	6	6	2	4	4	4	4	4	4	4	6	6	17
26	2	9	9	9	9	9	9	9	8	8	11	6	6	6	6	4	4	4	4	4	4	4	4	4	4	4	7	19	
27	15	19	9	6	8	8	6	6	11	6	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	7	19	
28	6	6	8	6	6	8	4	4	4	4	8	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	5	13	

(*) = Sin datos

000167

TABLA N° 6
 ESTACION : BOMBEROS
 PARAMETRO : NO2
 UNIDAD : ug/m3N
 PERIODO : Enero 1998

DIA	HORAS																								PROM	MAX	MIN
	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23			
1	17	11	4	4	8	2	9	6	4	8	4	4	4	6	11	6	6	6	2	6	6	6	2	8	6	17	2
2	8	11	4	2	2	6	4	6	15	8	9	9	8	4	9	8	8	8	6	6	6	8	8	4	17	17	2
3	8	8	6	6	6	4	2	4	8	17	6	8	4	11	8	6	8	6	4	4	4	6	11	11	7	17	2
4	4	9	13	2	19	4	4	4	4	15	8	8	6	6	11	6	9	6	6	6	6	6	6	8	8	19	2
5	9	8	2	6	4	2	8	4	4	4	13	9	9	8	8	4	8	8	6	4	6	8	15	13	6	13	2
6	6	13	8	9	4	2	4	4	4	4	8	11	6	11	11	11	4	4	4	6	11	8	15	8	9	15	2
7	6	4	6	8	4	8	11	6	6	15	13	13	9	19	21	17	8	8	4	6	6	4	4	4	21	11	4
8	6	11	6	4	2	8	8	8	4	4	6	9	8	2	9	4	4	2	2	2	4	8	4	4	5	11	2
9	11	0	4	6	6	8	6	4	6	13	6	4	6	8	6	8	2	6	4	4	2	2	2	9	5	13	0
10	11	9	8	4	8	4	6	6	6	2	8	6	4	8	6	6	4	2	4	4	9	4	8	6	5	11	2
11	2	11	4	2	2	2	2	2	4	2	2	2	15	9	8	2	2	4	4	4	4	4	8	4	5	15	2
12	2	4	4	0	2	2	2	2	0	6	2	8	8	4	15	24	8	2	4	0	4	6	8	2	5	24	0
13	2	2	8	4	0	2	2	6	6	8	4	8	8	8	8	9	2	4	4	0	2	6	4	5	5	9	0
14	9	8	13	9	4	0	0	17	4	11	6	6	2	4	6	4	6	6	4	0	6	4	2	6	6	17	0
15	9	9	2	6	2	4	4	4	6	13	4	9	8	4	2	4	0	9	6	6	4	4	2	4	6	13	0
16	4	4	2	4	4	6	2	4	4	4	2	2	8	4	2	8	6	9	2	4	4	6	4	8	6	13	0
17	2	9	4	2	8	4	4	8	2	19	2	11	6	9	9	2	4	4	4	2	6	11	11	8	7	19	2
18	4	9	15	4	4	4	4	4	4	4	8	6	6	6	4	11	6	4	4	4	6	4	9	8	6	15	2
19	11	11	8	8	2	4	4	4	4	8	6	8	6	4	8	8	6	4	2	4	6	6	4	4	6	13	2
20	6	4	9	4	8	6	4	4	4	4	6	11	9	2	4	6	6	4	4	6	6	4	4	4	6	15	0
21	6	6	4	6	2	4	2	4	4	4	8	6	9	2	4	6	8	2	2	2	4	4	13	8	6	13	2
22	13	9	13	4	6	4	4	4	2	4	4	9	17	11	6	9	9	11	11	0	6	2	4	4	6	17	0
23	6	8	0	4	0	2	4	4	4	4	2	4	6	8	13	8	2	6	8	2	2	2	2	6	4	13	0
24	2	8	0	4	0	2	11	6	6	11	15	8	9	8	2	4	6	2	4	2	2	0	2	4	6	15	0
25	2	6	2	2	0	4	2	6	6	6	2	0	0	4	4	8	0	8	0	2	2	11	6	6	4	11	0
26	11	13	15	13	11	4	4	6	4	8	9	9	4	6	6	6	6	2	2	15	6	4	2	6	6	15	0
27	9	9	11	4	4	4	4	4	9	9	4	6	6	13	8	4	0	2	2	4	6	4	4	6	6	15	2
28	4	6	6	2	4	4	2	4	8	8	4	4	6	11	6	6	4	4	0	0	6	4	8	8	5	13	0
29	15	8	9	4	2	4	4	4	9	13	4	13	8	8	4	2	6	4	4	0	0	0	2	4	6	15	0
30	6	8	4	8	4	6	11	6	6	8	6	13	8	13	8	11	8	6	9	4	9	0	6	6	7	13	0
31	2	6	4	4	4	2	6	6	6	13	6	8	4	9	11	8	6	8	4	4	4	0	4	5	5	13	0

(*) = Sin datos

000168

TABLA N° 6
 ESTACION : BOMBEROS
 PARAMETRO : NO2
 UNIDAD : ug/m3N
 PERIODO : Diciembre 1997

DIA	HORAS																								PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24			
1	4	2	4	2	2	2	6	6	9	9	6	6	11	8	6	4	8	6	8	11	8	6	2	6			
2	4	6	8	0	2	2	4	6	8	8	6	2	6	11	13	4	9	9	4	4	11	6	2	6			
3	8	2	2	4	2	4	6	8	4	11	6	6	2	2	13	8	13	8	11	9	13	2	11	13			
4	2	4	8	8	13	9	8	6	4	9	8	8	8	8	15	9	9	9	9	4	4	8	4	6			
5	9	11	8	2	4	2	2	4	4	9	4	8	13	13	11	11	8	6	6	2	4	6	4	9			
6	11	2	2	8	8	2	2	4	8	8	6	8	4	4	8	9	8	9	4	4	4	6	6	15			
7	15	2	6	6	2	6	4	9	2	13	2	13	4	4	4	4	0	8	8	4	4	6	8	6			
8	6	11	9	2	2	2	4	0	2	4	6	6	4	4	11	6	6	8	4	2	4	4	4	5			
9	4	0	2	6	4	8	6	4	4	11	8	6	2	2	9	6	4	2	*	9	9	11	9	6			
10	11	11	4	2	4	6	4	11	9	15	17	4	8	2	6	8	6	9	6	2	2	6	4	7			
11	4	6	6	4	4	8	4	4	11	19	6	8	9	8	8	8	9	4	8	6	6	6	4	7			
12	6	8	6	4	2	0	0	4	4	6	6	8	6	2	11	8	9	4	4	4	4	2	2	7			
13	9	11	9	9	6	8	2	4	2	8	8	11	9	2	6	2	9	4	2	2	4	6	4	4			
14	6	4	4	2	8	2	8	6	6	6	2	8	6	6	13	9	2	2	2	4	2	4	4	4			
15	4	8	4	0	4	4	2	0	4	8	6	0	8	6	8	2	8	8	9	4	2	9	6	0			
16	6	6	4	4	2	6	2	4	6	8	6	8	4	4	8	2	6	4	0	0	2	0	6	5			
17	8	8	4	6	9	4	8	4	6	9	9	11	8	8	4	4	2	4	4	2	2	4	4	6			
18	4	8	4	11	8	6	9	8	9	9	8	6	6	11	6	6	8	4	2	0	2	6	4	6			
19	2	11	6	4	4	6	4	6	8	13	8	4	8	9	9	8	4	4	4	4	6	4	8	6			
20	4	8	6	4	8	4	8	4	6	28	15	8	6	9	13	4	8	6	2	2	6	6	4	7			
21	8	4	2	9	9	4	0	8	8	6	11	6	11	21	8	4	6	8	6	6	6	8	8	7			
22	8	11	4	6	6	6	6	8	6	13	6	8	9	6	6	6	2	9	6	4	6	11	13	7			
23	9	9	4	9	6	8	11	11	19	9	8	4	6	9	9	11	4	8	8	8	2	9	4	8			
24	8	6	6	9	8	11	8	2	9	11	13	11	8	9	9	8	15	8	4	6	6	6	6	8			
25	6	8	6	9	8	2	4	4	6	6	6	8	9	11	6	9	4	9	4	6	6	6	9	7			
26	4	11	6	11	11	4	6	9	6	15	17	17	17	8	11	6	8	6	4	2	8	4	9	9			
27	8	6	8	9	4	9	9	4	6	8	4	9	9	6	6	2	4	2	8	4	4	6	4	6			
28	9	13	9	2	8	6	11	9	11	15	4	11	15	15	11	8	6	8	6	8	6	8	8	9			
29	6	8	6	6	4	9	6	6	11	11	9	13	8	9	9	11	6	6	4	6	2	8	8	7			
30	13	11	11	4	6	2	4	4	9	8	8	8	6	6	4	8	6	6	4	6	6	6	4	7			
31	4	2	8	4	6	2	4	8	6	8	6	9	6	6	6	8	4	6	6	8	8	9	15	6			

(*) = Sin datos

000169

TABLA N° 6
 ESTACION : BOMBEROS
 PARAMETRO : NO2
 UNIDAD : ug/m3N
 PERIODO : Noviembre 1997

DIA	HORAS																														PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24									
1	2	2	0	0	0	2	2	4	13	6	6	8	9	9	8	8	8	6	8	8	8	4	2	2	5	13	0						
2	4	6	2	6	2	8	4	11	11	8	9	4	2	8	2	4	2	4	6	4	4	8	11	6	6	11	2						
3	6	9	4	4	6	4	0	6	11	4	4	11	2	2	6	8	4	4	4	4	4	2	4	5	11	0							
4	0	0	0	4	4	2	4	9	28	15	9	19	6	6	6	4	4	4	4	4	4	8	8	6	28	0							
5	4	6	2	2	0	2	6	17	4	4	6	11	11	21	19	21	21	6	6	9	6	4	4	9	24	0							
6	0	2	4	2	6	4	4	4	15	4	9	8	9	4	2	6	6	13	6	11	11	8	9	6	15	0							
7	4	2	2	4	8	2	2	4	2	8	8	11	4	6	6	13	13	11	6	6	6	4	9	6	15	2							
8	6	2	2	0	0	2	2	9	15	6	6	13	11	4	4	8	8	11	8	17	13	6	0	6	17	0							
9	0	2	6	4	0	11	4	6	11	9	6	11	6	8	2	4	4	6	2	0	0	4	4	5	11	0							
10	0	2	0	2	2	2	4	2	6	6	8	8	9	4	2	2	4	11	2	2	2	2	4	4	4	0							
11	2	0	0	4	4	6	6	8	9	6	6	9	8	13	4	4	8	8	4	4	8	8	8	6	13	0							
12	8	8	11	8	6	6	9	9	13	11	9	9	8	8	6	6	6	8	4	6	4	8	6	8	13	4							
13	9	11	9	11	15	11	8	11	13	8	8	8	11	2	8	8	6	8	9	9	4	8	8	9	15	2							
14	4	6	4	6	2	2	8	4	9	6	4	13	8	8	6	6	6	4	4	6	6	9	4	6	15	2							
15	2	6	4	4	8	4	8	2	11	8	6	11	11	9	8	8	6	6	4	4	4	6	4	6	11	2							
16	4	9	9	2	4	4	4	4	4	2	6	9	11	11	11	11	6	11	9	2	2	4	6	6	11	2							
17	9	2	2	6	6	11	11	15	17	4	6	11	6	6	9	11	13	17	4	2	6	6	9	9	19	2							
18	8	6	4	2	6	9	6	8	4	4	6	6	9	4	6	8	9	9	8	9	4	4	4	6	6	2							
19	9	8	4	2	4	2	2	2	8	2	6	6	4	4	9	11	8	6	4	4	4	6	6	5	11	2							
20	9	8	11	8	6	4	4	9	13	9	9	9	15	11	6	6	2	6	9	6	2	6	11	8	15	2							
21	8	4	4	6	8	9	6	9	9	6	9	4	6	6	15	9	6	6	11	9	4	4	4	7	15	2							
22	2	6	2	2	4	2	2	6	0	4	9	8	8	8	13	9	6	8	4	4	4	9	2	5	13	0							
23	8	6	6	6	6	6	4	6	15	4	6	4	4	11	4	9	4	4	4	6	2	2	2	6	15	2							
24	9	4	6	0	4	0	2	2	6	8	4	8	6	6	9	4	9	9	6	4	2	2	2	4	9	0							
25	2	2	2	0	4	4	2	13	23	8	11	8	6	6	8	4	2	4	2	4	2	2	2	5	23	0							
26	2	4	4	2	2	0	2	6	4	8	8	13	11	4	2	4	4	4	2	2	4	4	8	5	13	0							
27	8	8	6	6	8	2	6	11	*	*	*	*	*	*	*	2	0	0	2	0	2	2	8	5	13	0							
28	8	0	0	2	4	2	0	4	6	4	6	4	2	6	6	0	4	4	2	4	2	2	2	5	15	0							
29	4	2	2	4	6	8	4	2	17	9	4	8	6	6	4	4	6	6	4	2	0	4	9	5	17	0							
30	9	4	6	6	4	8	4	8	8	4	4	6	6	6	9	2	2	4	2	0	4	8	2	5	9	0							

(*) = Sin datos

000170

TABLA N° 6
 ESTACION : BOMBEROS
 PARAMETRO : NO2
 UNIDAD : ug/m3N
 PERIODO : Octubre 1997

DIA	HORAS																								PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24			
1	17	11	13	15	21	23	15	13	13	23	17	21	13	19	8	19	23	11	13	19	24	19	11	15	17	24	8
2	13	11	8	13	6	19	8	15	6	19	24	21	6	17	23	30	21	2	4	4	8	6	8	8	8	30	2
3	9	9	6	8	0	9	6	11	9	8	9	8	8	8	2	2	4	8	2	2	2	4	6	9	9	19	0
4	4	8	6	2	0	4	0	6	8	8	8	8	8	0	*	6	6	2	2	0	4	4	4	11	7	9	0
5	13	8	8	8	11	8	11	9	9	8	9	11	8	6	4	0	0	0	0	2	19	15	6	9	12	24	2
6	13	15	6	8	9	9	6	21	17	13	13	17	8	9	24	6	4	8	2	2	2	0	13	5	13	0	0
7	0	2	4	6	8	11	2	4	4	2	4	8	8	9	8	6	8	2	2	2	4	6	6	5	13	0	0
8	4	0	2	0	0	2	2	0	8	13	8	15	4	13	9	2	2	0	0	2	6	4	17	7	17	0	0
9	15	8	6	4	0	2	4	4	6	19	6	15	11	19	6	2	2	8	4	0	4	4	2	6	7	19	0
10	17	6	6	8	2	0	6	6	6	19	13	9	9	8	8	6	8	6	8	6	0	4	4	4	6	19	0
11	6	6	6	6	4	8	4	4	8	4	4	8	9	6	4	2	2	6	2	2	2	0	2	4	4	9	0
12	6	8	4	2	4	2	0	4	6	4	2	8	8	2	4	2	2	6	8	6	0	4	2	0	2	8	0
13	0	0	0	0	0	0	0	0	0	4	6	9	11	13	4	8	8	6	4	4	4	4	9	8	4	13	0
14	0	0	2	2	2	4	4	4	4	23	13	17	17	15	8	8	8	9	4	6	2	4	4	8	9	23	2
15	13	19	2	8	6	8	4	4	8	17	9	13	9	13	4	2	6	2	2	4	2	15	13	4	8	17	2
16	9	8	6	6	4	4	8	8	9	30	9	6	6	9	13	9	8	4	6	6	2	2	2	15	6	30	0
17	6	0	0	4	0	0	2	2	2	21	9	8	8	6	8	8	9	4	2	2	2	4	4	2	7	21	2
18	11	8	6	6	9	6	2	2	6	6	6	11	11	6	8	8	2	2	0	4	0	4	9	11	7	13	0
19	2	6	13	8	8	8	11	13	9	6	6	11	11	8	6	2	8	2	2	2	4	2	6	8	9	23	2
20	9	8	9	23	11	9	17	9	13	19	8	11	11	8	6	2	8	2	2	4	4	6	9	8	7	23	0
21	0	4	4	2	4	2	0	11	13	9	9	15	11	23	15	11	4	4	4	0	0	4	11	13	5	13	0
22	2	0	0	4	4	4	4	4	0	6	6	6	8	8	2	8	6	2	0	0	0	2	4	5	5	23	0
23	8	6	6	6	8	8	2	4	13	23	*	*	*	*	8	4	8	6	4	2	4	15	9	2	4	15	0
24	2	2	4	2	0	6	2	2	2	6	6	6	2	4	8	4	6	6	2	2	8	4	4	6	6	15	0
25	11	11	9	6	8	2	0	13	4	15	9	6	6	8	4	9	6	4	0	0	2	8	0	6	5	13	0
26	8	6	4	8	6	8	13	9	9	23	13	6	6	8	8	4	4	4	2	2	2	8	4	6	6	15	0
27	8	6	11	6	6	8	8	8	6	8	6	13	8	9	11	4	8	4	2	2	2	2	0	0	8	23	0
28	2	4	2	4	6	4	4	9	13	13	6	13	8	6	2	2	6	4	2	2	2	4	8	5	13	2	2
29	9	9	6	11	6	8	4	13	8	28	9	11	13	8	2	4	6	4	4	6	6	2	2	6	8	28	2
30	11	0	2	4	9	4	2	6	8	23	9	15	15	4	6	4	4	2	4	4	0	6	13	8	7	23	0
31	9	8	6	6	6	8	6	8	19	23	9	8	11	6	6	4	4	4	11	23	6	13	6	13	9	23	4

(*) = Sin datos

TABLA N° 6
 ESTACION : BOMBEROS
 PARAMETRO : NO2
 UNIDAD : ug/m3N
 PERIODO : Septiembre 1997

DIA	HORAS																								PROM	MAX	MIN	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24				
1	8	8	8	6	4	0	4	6	13	9	11	8	11	15	9	15	8	11	2	4	9	6	11	4	8	15	0	
2	4	8	9	11	9	6	4	4	11	8	4	4	13	15	15	11	11	19	9	11	15	21	19	17	17	21	4	
3	24	13	9	8	6	11	4	4	11	24	13	13	8	13	13	13	6	6	8	11	26	17	15	21	10	24	6	
4	9	17	13	13	8	6	4	4	8	9	4	9	9	8	4	8	4	4	4	6	6	0	4	4	7	19	0	
5	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	0
6	8	9	9	9	9	6	4	4	6	13	15	13	13	15	6	4	4	4	4	4	4	4	4	4	6	11	0	
7	6	9	9	9	11	6	4	4	8	13	9	8	9	13	13	11	4	4	4	4	8	11	13	9	7	17	0	
8	6	9	15	9	4	11	4	4	6	13	9	8	9	13	13	2	4	4	4	4	2	6	11	9	7	17	0	
9	6	17	9	2	4	4	4	4	6	13	6	6	6	13	13	2	4	4	4	4	6	17	11	8	9	17	2	
10	9	4	4	4	4	4	4	4	6	15	15	13	13	13	8	4	4	4	4	4	13	11	13	8	6	13	2	
11	6	4	4	4	4	4	4	4	6	15	15	13	13	13	2	4	4	4	4	4	6	17	11	11	8	13	2	
12	11	4	4	4	4	4	4	4	6	15	15	13	13	13	2	4	4	4	4	4	6	17	11	11	8	13	2	
13	4	8	6	6	6	4	4	4	6	11	11	11	11	11	21	21	2	2	2	2	6	6	6	6	6	21	2	
14	13	19	11	6	6	8	4	4	9	19	15	15	15	15	9	8	4	4	4	4	6	6	6	6	6	23	2	
15	13	9	6	6	6	4	4	4	9	11	11	6	6	6	9	8	4	4	4	4	6	6	6	6	6	23	2	
16	13	15	11	9	17	9	13	15	15	17	15	6	11	13	15	8	8	8	8	8	8	11	8	8	8	26	6	
17	19	4	2	2	0	0	2	2	4	21	13	9	2	2	2	2	2	2	2	2	2	2	2	2	2	21	0	
18	4	4	4	4	6	6	4	4	4	4	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	11	0	
19	4	11	9	6	8	11	4	4	4	15	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	15	2	
20	4	9	9	6	8	11	4	4	4	13	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	15	2	
21	11	8	4	2	2	2	2	2	2	11	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	19	0	
22	8	9	2	4	2	2	2	2	2	17	11	9	2	2	2	2	2	2	2	2	2	2	2	2	2	17	0	
23	13	4	4	4	2	2	2	2	2	8	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	17	0	
24	4	0	4	6	6	6	4	4	4	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	17	0	
25	9	6	6	6	4	4	4	4	4	21	11	11	6	6	6	6	6	6	6	6	6	6	6	6	6	24	2	
26	4	8	6	6	4	4	4	4	4	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	21	0	
27	11	21	6	6	4	4	4	4	4	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	21	2	
28	21	13	6	6	11	9	9	9	9	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	21	2	
29	15	13	4	4	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	19	2	
30	4	6	6	4	2	4	4	4	4	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	26	0	

(*) = Sin datos

000172

TABLA N° 9
 ESTACION : BOMBEROS
 PARAMETRO : NO2
 UNIDAD : ug/m3N
 PERIODO : Agosto 1997

DIA	HORAS																								PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24			
1	9	9	6	9	11	13	6	13	13	15	15	13	23	15	8	8	4	6	8	8	4	11	15	24	11	23	4
2	19	9	15	13	21	17	11	24	19	17	15	11	11	11	9	9	9	6	6	6	4	11	24	17	14	30	6
3	11	9	6	21	13	8	8	6	4	13	23	19	15	23	11	15	15	43	17	17	36	47	30	34	15	34	4
4	15	17	17	15	11	11	11	32	19	30	24	24	23	17	26	24	39	24	24	32	32	28	26	13	23	47	11
5	23	23	13	13	15	13	11	19	19	21	21	19	17	21	8	30	43	11	11	39	21	28	13	17	20	39	11
6	21	24	13	9	9	9	6	17	19	19	26	11	8	9	8	6	9	11	9	9	21	28	13	13	15	43	6
7	17	28	9	6	9	9	6	6	9	9	9	*	*	*	4	4	2	2	2	6	6	15	26	11	11	39	2
8	11	11	6	9	9	9	4	15	13	23	11	15	13	11	4	15	24	19	15	21	21	24	23	21	14	24	4
9	15	17	13	23	21	21	9	0	4	21	6	8	8	9	9	6	6	6	8	9	26	28	9	12	12	28	0
10	17	23	9	17	15	17	17	13	30	23	23	8	21	26	38	32	28	32	15	15	19	19	26	16	16	38	2
11	2	6	6	13	11	17	17	17	19	26	21	13	17	28	19	24	23	28	21	8	8	6	4	4	4	11	2
12	39	4	4	4	8	4	4	17	8	15	15	23	6	4	9	8	9	9	13	9	9	6	4	4	11	23	4
13	19	17	17	9	19	4	4	13	19	17	11	11	9	11	13	8	8	4	15	8	8	8	13	11	10	19	4
14	8	4	4	8	8	9	9	13	19	30	19	8	6	4	4	2	2	4	4	4	8	2	4	6	9	30	2
15	8	21	4	0	0	2	2	13	19	9	8	6	4	8	8	8	6	4	4	4	0	2	2	2	4	9	0
16	2	4	4	4	4	4	*	*	*	*	*	2	6	0	2	*	*	13	0	0	0	6	4	0	4	9	0
17	6	0	2	4	0	0	0	6	6	15	11	9	6	8	8	8	4	4	4	4	6	2	6	9	5	15	0
18	0	2	0	0	2	2	2	2	6	6	9	9	17	9	2	2	4	6	6	6	2	15	11	11	7	17	2
19	9	4	4	6	4	2	2	2	13	13	11	17	17	8	6	4	9	6	8	6	6	13	21	15	10	21	2
20	15	11	8	6	4	8	8	9	13	13	15	21	13	8	8	6	6	2	4	4	6	19	19	9	10	21	2
21	8	19	11	8	4	6	6	6	8	13	9	9	8	8	9	8	8	2	2	2	8	9	11	13	8	13	2
22	13	9	9	4	6	8	6	6	8	13	9	17	15	32	9	19	21	11	15	24	24	24	17	9	14	32	6
23	9	8	13	6	6	8	9	15	13	11	11	17	6	6	8	9	4	11	4	4	4	6	6	6	9	23	4
24	8	13	8	2	2	4	4	4	8	23	21	13	4	17	6	4	2	9	9	13	13	8	8	7	7	23	2
25	2	2	4	4	4	4	2	4	2	8	9	6	9	9	6	8	6	8	8	23	23	11	24	15	8	24	2
26	6	6	4	4	4	2	2	4	2	9	11	6	9	21	15	4	*	*	*	0	0	6	6	0	8	28	0
27	9	8	6	4	2	4	4	8	8	11	11	19	8	4	8	4	4	4	8	6	6	6	4	6	6	11	2
28	4	2	4	4	2	4	2	9	8	8	11	9	6	4	8	11	4	4	6	6	6	6	19	11	7	19	2
29	9	6	4	4	6	4	2	13	9	9	11	11	6	6	4	8	4	2	6	2	2	4	6	7	7	19	2
30	9	21	9	4	11	8	6	19	9	9	9	9	11	13	9	13	4	4	4	2	2	6	6	8	8	21	2
31	6	17	8	4	4	4	4	17	8	8	4	9	4	6	19	13	8	4	11	15	15	15	9	9	9	21	2

(*) = Sin datos

TABLA N° 6
 ESTACION : BOMBEROS
 PARAMETRO : NO2
 UNIDAD : ug/m3N
 PERIODO : Julio 1997

DIA	HORAS																															PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24										
1	4	4	4	8	6	2	6	8	15	23	9	13	9	9	11	23	6	6	*	4	4	6	0	4	8	23	0							
2	6	8	6	6	8	4	4	2	17	21	19	11	11	9	17	11	23	6	4	2	30	30	19	21	13	30	2							
3	24	21	13	13	11	9	11	13	11	15	11	28	21	21	15	19	19	38	36	41	40	36	30	30	22	41	9							
4	30	24	13	13	13	13	13	13	24	24	17	13	19	8	9	8	11	11	19	21	4	6	24	21	15	30	4							
5	13	8	13	11	8	9	4	2	8	23	23	17	19	13	11	6	6	9	9	24	24	34	28	28	15	34	4							
6	34	11	13	9	6	6	6	6	4	6	6	4	15	4	2	2	2	0	0	2	6	6	21	21	8	34	0							
7	17	11	9	8	8	11	11	13	9	23	32	19	26	23	13	9	23	11	8	6	6	21	23	23	15	32	6							
8	15	11	8	6	6	6	6	2	9	13	9	13	19	11	15	8	13	6	13	26	24	30	21	13	30	2								
9	17	9	9	9	8	8	11	13	13	24	28	11	15	15	13	13	9	15	23	21	32	26	30	21	16	32	8							
10	26	21	15	11	11	17	15	26	21	17	26	15	19	21	15	15	15	15	13	30	36	28	15	11	19	36	9							
11	15	9	26	23	13	15	8	6	11	13	26	26	13	11	13	11	6	4	4	6	6	8	6	13	13	26	4							
12	4	4	2	2	2	11	11	11	15	15	17	15	6	6	9	2	2	0	0	2	17	6	6	23	9	28	0							
13	15	15	9	17	17	13	17	17	11	15	21	13	15	19	19	6	6	4	17	28	26	19	17	11	16	28	4							
14	11	9	11	13	15	24	21	17	23	30	30	23	8	9	8	21	21	13	13	9	9	8	11	11	15	30	8							
15	8	6	4	11	9	4	15	9	21	19	15	15	13	11	11	6	17	15	32	11	6	21	32	21	14	32	4							
16	13	8	9	8	8	6	9	9	9	21	24	24	19	21	6	11	15	15	13	15	11	15	26	15	13	26	6							
17	15	17	13	15	8	6	8	8	17	11	17	17	17	15	9	13	6	19	34	40	23	34	36	41	19	41	6							
18	32	32	24	21	11	6	6	4	8	13	8	15	8	17	15	13	13	8	4	0	9	6	6	19	13	32	0							
19	21	17	4	8	4	8	9	19	13	15	23	13	15	24	30	17	24	8	6	4	26	26	30	15	16	30	4							
20	26	23	23	17	26	26	32	24	23	30	21	24	23	13	36	13	40	24	9	6	13	2	4	6	20	40	2							
21	9	2	2	4	4	26	9	11	9	32	6	6	9	11	15	15	21	11	23	15	6	15	13	17	13	32	2							
22	28	28	17	8	8	6	6	8	11	19	9	9	6	13	8	13	13	8	9	21	23	13	17	17	14	28	6							
23	13	13	8	8	6	15	11	11	15	23	28	28	32	34	15	11	24	32	45	47	47	49	34	11	23	49	6							
24	19	30	21	19	11	36	9	11	8	21	19	21	13	13	11	8	13	32	23	36	11	11	9	8	18	36	8							
25	28	28	9	13	11	9	11	15	15	19	21	21	13	15	4	9	11	11	17	6	23	47	62	51	19	62	4							
26	43	28	13	8	9	6	9	9	9	15	15	4	8	4	8	6	9	8	24	30	15	21	23	19	15	43	6							
27	17	17	40	32	15	2	4	4	9	8	6	8	6	4	9	21	30	9	21	6	13	24	8	19	15	40	4							
28	21	6	2	4	2	2	4	4	17	23	6	8	6	9	11	6	2	4	4	9	13	23	21	26	10	26	2							
29	8	6	8	8	9	8	4	15	13	15	21	17	15	9	8	6	6	8	11	15	9	13	15	23	11	23	4							
30	17	6	4	2	15	8	6	17	17	15	15	6	9	6	8	6	2	4	4	15	6	4	6	6	11	23	4							
31	4	4	0	6	15	6	8	15	15	19	11	13	19	11	19	8	2	6	6	6	11	11	17	21	10	21	0							

(*) = Sin datos

000174

División Ambiental

TABLA N° 6
 ESTACION : BOMBEROS
 PARAMETRO : NO2
 UNIDAD : ug/m3N
 PERIODO : Junio 1997

DIA	HORAS																														PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24									
1	9	4	8	4	4	4	4	4	8	4	9	11	8	0	6	8	4	2	2	0	2	2	0	8	5	11	0						
2	6	6	6	4	4	4	4	4	2	2	4	2	2	6	9	9	6	6	4	2	2	2	2	9	5	9	2						
3	2	2	6	6	9	11	8	8	6	6	11	4	13	6	4	0	4	4	4	2	0	4	6	5	13	0							
4	2	4	2	0	6	0	2	2	2	2	9	9	9	6	6	15	6	2	2	4	6	8	6	7	15	0							
5	8	6	4	8	8	8	6	8	9	8	11	8	6	9	13	11	6	2	2	4	15	9	11	10	17	2							
6	11	8	9	9	8	8	9	9	8	4	9	11	8	11	9	9	9	13	11	4	4	4	6	6	13	0							
7	8	6	2	0	2	2	2	2	4	4	6	6	4	9	4	0	6	4	4	4	6	4	4	6	9	0							
8	6	4	8	2	4	0	2	4	4	4	4	4	2	4	2	4	4	2	2	4	6	4	4	6	13	0							
9	9	4	4	0	0	2	2	2	4	4	8	8	6	6	6	6	4	2	2	0	2	4	4	3	13	0							
10	15	13	4	2	4	2	2	2	4	4	8	8	8	6	6	6	4	2	2	0	2	2	2	4	4	15	0						
11	4	2	0	2	0	0	0	0	4	4	6	4	4	6	6	4	2	2	2	2	2	2	2	4	4	6	0						
12	6	2	2	0	2	2	0	0	2	2	11	11	11	11	2	2	2	2	2	2	2	2	2	2	4	15	0						
13	0	2	6	2	4	6	0	0	2	2	8	8	6	4	6	2	4	2	4	2	6	9	8	3	13	0							
14	6	6	6	2	4	6	2	2	6	8	15	9	9	4	9	8	4	6	4	6	15	13	11	8	9	0							
15	15	11	8	4	6	4	6	6	9	15	9	9	4	4	8	4	4	9	8	9	13	6	11	8	15	4							
16	6	6	6	4	6	4	4	8	9	9	11	6	6	6	4	2	0	0	4	4	8	4	2	4	5	11	0						
17	4	2	2	2	2	2	2	2	4	4	6	4	8	6	4	6	6	6	4	4	4	9	9	4	9	0							
18	2	2	0	0	0	2	0	0	2	2	6	6	9	4	4	6	6	4	2	2	15	11	11	6	4	15	0						
19	11	8	2	0	2	4	2	2	6	8	8	13	13	6	6	0	8	6	4	13	11	4	4	8	6	13	0						
20	6	9	6	2	4	4	4	4	8	11	8	4	4	6	4	4	4	4	2	2	6	4	2	4	11	11	2						
21	0	0	4	2	2	2	4	4	4	13	15	6	6	0	6	6	4	4	4	4	6	11	11	9	5	15	0						
22	9	6	4	4	0	4	4	4	0	6	4	4	4	4	4	2	6	4	2	2	0	2	8	4	4	11	0						
23	8	8	4	2	2	4	4	4	8	8	9	8	8	6	6	6	6	4	4	2	0	0	4	8	5	9	0						
24	6	4	2	0	2	2	2	0	2	8	8	*	*	*	*	*	*	0	0	0	0	6	8	4	4	11	0						
25	8	11	6	2	4	2	2	2	4	4	8	6	4	8	4	0	0	0	0	0	6	8	11	2	4	11	2						
26	6	8	4	4	6	9	8	8	8	8	6	4	6	6	4	0	0	0	0	19	17	8	2	7	19	0							
27	17	9	24	19	17	21	15	13	19	23	23	13	28	38	38	38	38	38	26	26	40	26	36	20	40	2							
28	21	21	19	17	15	11	8	13	21	19	13	11	13	6	6	11	9	15	9	21	26	19	24	15	26	6							
29	26	28	13	11	8	13	6	6	8	9	9	15	11	19	19	21	15	11	6	40	41	40	36	18	41	6							
30	19	13	8	11	13	11	17	13	21	19	8	9	6	6	9	8	2	8	13	11	8	9	13	11	21	2							

(*) = Sin datos

TABLA N° 6
 ESTACION : BOMBEROS
 PARAMETRO : NO2
 UNIDAD : ug/m3N
 PERIODO : Abril 1997

DIA	HORAS																														PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24									
1	0	0	8	6	2	4	6	0	4	2	2	17	2	9	9	6	6	9	11	8	8	4	13	5	17	0							
2	6	11	6	11	6	2	9	8	9	13	4	6	2	9	13	8	11	8	4	2	0	6	6	13	7	13	0						
3	6	8	4	2	8	4	4	4	2	6	23	21	2	17	9	8	4	4	6	6	4	4	6	7	23	2							
4	8	6	4	6	6	6	6	13	8	11	6	2	15	17	9	9	4	4	6	6	4	4	6	7	36	2							
5	8	4	15	17	17	19	21	4	19	23	38	83	8	8	21	23	19	15	13	9	0	6	34	12	36	2							
6	4	17	11	11	21	9	2	13	8	11	8	30	9	9	9	8	8	15	13	11	0	4	19	18	33	0							
7	21	23	4	23	9	17	30	23	11	24	8	34	11	4	9	11	32	66	66	9	13	21	66	22	66	4							
8	9	49	55	21	8	21	19	43	56	*	*	*	*	*	*	*	9	0	92	145	75	71	15	22	66	4							
9	38	28	21	9	32	24	58	64	21	6	9	6	6	77	11	8	0	0	17	17	11	19	15	21	77	0							
10	6	38	17	11	11	11	4	11	4	17	6	15	24	9	11	40	32	4	8	13	8	9	6	13	40	4							
11	8	15	4	8	17	9	2	15	17	13	6	30	13	4	13	8	11	17	8	6	8	8	6	10	30	4							
12	4	17	4	13	9	8	4	6	11	8	9	2	2	6	11	0	6	2	6	6	4	4	17	0	17	0							
13	21	15	15	8	6	6	6	6	8	9	2	2	2	4	24	2	2	2	6	2	2	0	0	6	24	0							
14	0	15	0	2	2	4	0	2	0	0	0	0	0	2	0	0	0	0	4	2	2	2	0	6	15	0							
15	8	8	6	6	4	8	8	6	9	2	6	6	4	8	9	9	13	17	15	13	6	6	8	7	17	0							
16	6	8	9	6	13	2	8	6	9	4	8	6	13	13	6	9	2	2	13	4	4	4	4	7	13	2							
17	8	4	2	2	8	4	4	4	6	6	4	6	6	6	6	8	6	6	28	8	2	4	2	6	28	2							
18	4	2	6	6	4	4	4	6	8	4	6	4	6	9	4	11	11	9	4	2	2	2	4	5	11	2							
19	8	4	4	2	4	2	4	6	8	8	9	6	6	6	6	4	4	0	2	2	6	4	6	5	9	0							
20	4	9	23	9	8	2	4	6	6	0	11	4	6	6	11	4	13	8	4	4	6	13	8	7	23	0							
21	2	4	13	2	8	4	9	15	11	8	6	6	2	6	4	4	2	4	2	4	8	2	6	6	15	2							
22	8	6	8	8	6	9	8	8	21	13	6	6	4	8	6	9	13	17	15	13	6	0	8	9	21	0							
23	0	6	2	6	8	2	4	6	6	8	6	2	4	4	4	8	9	4	4	9	6	6	11	8	5	0							
24	9	2	8	11	8	8	8	6	11	4	2	0	13	8	17	13	9	6	8	13	11	30	17	30	10	0							
25	43	23	32	21	32	9	13	6	13	8	6	6	6	24	38	36	24	34	26	19	4	4	6	18	43	4							
26	4	4	23	8	11	26	28	26	4	9	34	6	49	17	28	51	28	23	21	4	11	2	11	26	19	2							
27	19	8	0	0	0	0	0	2	0	0	4	2	0	0	0	0	4	0	0	0	0	2	0	0	19	2							
28	0	0	2	2	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	19	0							
29	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	0						
30	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	0							

(*) = Sin datos

TABLA N° 6
 ESTACION : BOMBEROS
 PARAMETRO : NO2
 UNIDAD : ug/m3N
 PERIODO : Marzo 1997

DIA	HORAS																								PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24			
1	6	4	0	0	2	6	2	0	0	9	13	2	6	6	2	13	2	2	0	4	2	0	0	15	4	15	0
2	11	6	2	0	0	6	2	6	11	4	4	8	4	4	8	13	17	2	2	0	0	2	2	15	5	17	0
3	17	28	6	9	9	2	4	6	0	2	9	13	6	30	19	6	30	2	0	0	0	0	0	0	8	30	0
4	2	2	4	2	0	0	0	0	0	0	2	*	8	11	8	15	4	9	4	2	2	4	2	0	3	15	0
5	0	0	0	4	0	2	0	0	0	0	0	2	0	0	8	9	2	6	4	6	2	2	0	0	2	9	0
6	0	2	0	0	2	0	4	2	4	2	0	0	2	2	2	9	4	15	4	6	2	0	6	4	3	15	0
7	2	4	6	2	2	8	9	8	4	9	13	13	19	15	6	6	8	9	4	2	2	2	0	8	7	19	0
8	4	4	4	4	6	9	8	4	6	2	6	4	8	0	6	9	2	8	2	4	0	4	2	0	4	9	0
9	4	8	0	0	0	8	13	6	17	9	13	21	2	2	0	0	4	4	4	0	0	6	0	6	5	21	0
10	2	15	8	11	13	17	8	0	2	2	4	24	8	4	4	6	8	8	13	6	0	15	4	13	8	15	0
11	13	11	6	13	8	9	15	9	6	6	8	2	2	8	0	6	8	8	2	6	11	4	13	8	15	0	
12	11	9	2	15	9	15	8	9	0	2	0	4	9	4	4	9	6	6	6	4	8	4	8	7	15	0	
13	11	9	4	2	4	8	6	0	6	2	32	15	17	11	13	6	4	4	6	0	4	2	2	7	15	0	
14	8	2	0	0	4	4	4	6	4	2	2	2	2	4	4	8	4	2	2	0	4	2	2	7	32	0	
15	8	11	6	4	0	4	2	2	2	0	0	4	8	8	9	2	2	2	2	6	2	2	0	3	8	0	
16	6	0	0	0	2	2	2	0	2	30	23	13	6	2	6	4	8	6	2	6	2	2	2	3	11	0	
17	2	9	6	8	9	4	6	4	6	4	11	8	2	0	6	0	0	2	2	6	0	2	0	5	30	0	
18	0	2	2	2	0	2	0	0	2	0	2	2	4	4	2	0	2	2	2	6	0	2	2	4	11	0	
19	6	4	4	9	4	6	4	24	19	43	11	8	0	13	15	2	6	6	9	4	2	2	4	2	9	0	
20	0	0	11	9	9	8	8	0	2	0	4	6	2	0	2	2	4	0	0	0	8	4	0	4	8	43	0
21	9	0	11	8	2	13	4	4	0	4	8	6	9	0	2	0	0	2	0	0	4	2	4	3	11	0	
22	2	6	8	4	6	11	11	8	4	11	9	6	8	2	4	0	4	2	0	0	0	2	11	6	13	0	
23	30	6	0	2	0	2	0	6	8	2	4	0	2	0	0	2	0	0	0	2	2	0	2	6	13	0	
24	4	4	0	15	6	4	2	2	2	0	4	0	2	0	0	2	0	0	0	2	0	2	0	3	30	0	
25	0	0	0	0	0	2	2	9	6	2	0	2	0	0	0	0	2	2	0	0	0	2	0	2	15	0	
26	13	13	17	17	6	11	9	4	2	4	11	8	6	4	2	0	6	8	23	2	2	0	23	2	23	0	
27	11	9	9	9	0	4	13	4	8	4	21	9	9	2	2	9	4	2	8	4	2	2	0	6	21	0	
28	6	2	2	4	4	4	6	8	4	9	6	6	6	8	9	2	4	2	8	4	2	2	0	6	15	2	
29	6	6	9	4	23	24	11	19	23	4	8	0	2	2	2	4	0	0	0	11	9	9	4	6	15	2	
30	2	19	6	9	0	6	17	13	4	0	4	6	0	4	0	8	4	2	0	2	2	0	4	7	24	0	
31	11	21	6	6	4	11	9	9	11	0	2	9	15	4	19	9	11	2	6	0	4	4	8	5	19	0	

(*) = Sin datos

000178

CIMA-Ambiental

TABLA N° 6
 ESTACION : BOMBEROS
 PARAMETRO : NO2
 UNIDAD : ug/m3N
 PERIODO : Febrero 1997

DIA	HORAS																								PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24			
1	8	11	2	11	8	9	9	11	6	11	13	6	2	13	9	2	0	4	4	9	6	0	2	2	7	13	0
2	13	4	4	2	8	2	2	2	4	13	0	9	13	2	4	2	8	13	8	6	2	0	2	2	5	13	0
3	17	4	6	2	4	0	2	2	0	2	0	2	6	8	21	4	8	4	6	6	2	0	2	4	9	21	0
4	2	2	8	9	15	6	8	6	6	26	6	21	28	23	9	9	8	0	0	4	4	6	0	9	28	0	
5	15	13	4	0	0	2	8	13	11	15	9	11	23	26	9	21	11	4	2	6	2	2	8	9	26	0	
6	2	6	6	4	4	4	6	4	11	6	19	6	15	13	17	6	6	4	13	8	2	9	6	7	19	0	
7	0	0	0	0	0	0	4	13	2	2	11	2	9	6	6	9	2	0	0	4	6	2	6	4	13	0	
8	4	2	6	11	9	8	13	17	17	17	6	9	21	4	2	8	2	11	8	8	4	4	9	9	21	2	
9	8	6	4	2	9	2	9	6	11	19	6	6	4	23	11	2	2	0	0	0	0	4	6	6	23	0	
10	4	2	2	2	0	2	2	2	6	17	8	2	15	13	30	19	2	13	2	2	0	4	2	4	7	30	0
11	2	2	2	0	0	0	0	0	6	6	23	2	0	6	21	9	8	8	2	0	2	0	2	4	4	23	0
12	0	4	15	6	11	15	11	4	9	19	6	15	13	8	19	9	6	19	13	0	2	2	2	9	9	0	
13	13	21	15	6	13	17	2	0	23	19	11	26	11	2	4	2	15	8	4	4	2	2	6	10	26	0	
14	6	11	13	8	2	13	4	2	17	9	8	6	4	17	32	21	17	6	8	2	0	2	6	9	32	0	
15	4	2	9	17	11	8	9	6	15	11	8	15	13	4	19	15	9	8	8	2	4	4	4	8	19	0	
16	4	23	13	17	24	8	2	0	2	8	15	13	8	9	17	11	15	9	6	6	2	2	6	9	34	0	
17	0	6	6	11	4	4	4	6	19	34	21	19	13	13	9	17	2	4	2	2	2	2	2	9	8	0	
18	23	2	2	8	6	6	4	2	6	19	15	17	21	21	19	8	2	0	0	0	9	2	2	8	23	0	
19	6	8	4	11	9	9	2	2	4	6	4	2	24	28	21	24	11	17	15	8	6	8	6	10	28	2	
20	11	6	2	4	6	0	4	6	9	28	21	4	4	13	9	2	6	8	9	8	4	2	2	7	28	0	
21	13	0	13	8	2	2	4	6	8	9	9	2	4	8	6	4	0	2	2	0	0	6	4	5	13	0	
22	17	21	4	6	4	6	13	26	2	9	13	24	2	9	23	8	9	2	2	2	2	4	4	9	26	0	
23	11	4	4	6	4	2	13	2	6	8	8	6	4	6	11	9	4	11	17	6	4	6	2	6	17	2	
24	6	6	6	15	13	6	9	9	4	8	9	6	6	8	9	4	4	4	4	6	8	6	8	7	15	4	
25	11	13	9	32	11	15	11	11	13	24	9	2	8	4	11	8	8	13	13	6	9	11	8	12	32	2	
26	8	23	26	32	23	8	9	2	8	9	15	11	9	6	8	9	17	13	9	8	9	8	9	12	32	2	
27	9	8	23	6	4	2	4	4	11	8	26	6	15	6	6	9	17	32	2	13	4	15	39	12	39	2	
28	21	28	24	15	21	19	15	11	4	8	17	17	21	21	6	6	11	8	17	6	28	0	0	14	28	0	

(*) = Sin datos

000179

CIMMA-Ambiental

TABLA N° 9
 ESTACION : BOMBEROS
 PARAMETRO : NO2
 UNIDAD : ug/m3N
 PERIODO : Enero 1997

DIA	HORAS																								PROM	MAX	MIN
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24			
1	0	0	2	2	2	0	2	4	0	0	4	2	8	6	6	19	9	9	8	9	6	2	2	0	4	19	0
2	0	0	0	2	2	0	2	2	0	0	0	4	4	2	13	8	8	9	9	6	2	2	0	3	4	13	0
3	0	2	0	0	2	0	2	2	2	0	0	2	2	2	0	2	0	0	6	0	0	4	4	2	2	8	0
4	4	6	0	4	2	0	2	2	4	6	2	6	0	0	0	2	2	0	6	0	4	2	2	2	2	6	0
5	11	9	6	0	2	6	0	2	2	2	2	6	8	8	6	6	4	2	2	11	8	8	2	4	4	11	0
6	4	2	2	2	0	4	4	4	0	2	2	4	4	2	2	2	6	4	4	6	0	0	0	2	2	6	0
7	2	2	2	2	2	4	4	4	2	2	2	13	8	4	4	4	4	4	4	2	2	4	4	4	4	13	0
8	4	4	6	4	2	0	6	2	2	6	8	4	4	0	4	4	0	0	2	2	0	2	2	2	3	8	0
9	0	0	0	0	0	0	4	2	4	6	15	2	2	4	4	4	2	2	2	2	8	4	4	4	4	15	0
10	4	2	4	4	0	4	9	6	4	0	4	4	4	2	2	2	0	2	6	2	0	2	0	3	9	0	
11	2	2	4	4	4	0	2	2	2	2	2	2	2	4	2	6	4	4	4	4	2	2	4	3	8	0	
12	4	2	0	4	0	4	6	2	4	6	2	6	6	2	2	0	4	4	6	8	8	11	4	4	11	0	
13	6	4	2	2	6	4	4	4	2	4	4	6	2	6	0	8	9	6	4	8	2	4	4	4	9	0	
14	2	4	4	4	4	6	2	2	9	4	2	2	2	2	2	4	2	2	4	4	4	2	4	4	9	0	
15	2	4	0	4	0	2	6	9	2	6	4	4	4	4	6	9	4	4	4	4	0	4	4	4	9	0	
16	4	4	2	4	6	2	6	4	4	4	6	6	0	0	0	0	2	2	2	4	4	2	2	4	9	0	
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31	2	6	0	0	0	0	0	2	8	2	6	6	8	6	28	21	6	11	6	9	6	6	6	6	28	0	

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Clima-Ambiental

SANTIAGO, 22 de Junio 1978

(No publicada en el D.O.)

VISTOS: Considerando que el adecuado control y prevención de la contaminación atmosférica exige disponer de normas que definan los valores de los parámetros que configuran la calidad del aire y establezcan criterios básicos operacionales, dicto la siguiente:

R E S O L U C I O N

NORMAS SANITARIAS MINIMAS DESTINADAS A PREVENIR Y CONTROLAR LA
CONTAMINACION ATMOSFERICA

DISPOSICIONES PRELIMINARES:

1.- Las presentes normas se aplicarán en todo el territorio nacional y tienen por objeto proveer a los diversos niveles de salud los fundamentos técnicos y administrativos del sistema de prevención y control de la contaminación atmosférica. En todo caso se deberá considerar la armonización con los planes de desarrollo y la coordinación interinstitucional que permita el aprovechamiento integral de los recursos. Sin embargo, ante cualquier situación crítica que implique riesgo inminente a la salud pública, la autoridad sanitaria deberá actuar de inmediato.

DEFINICIONES :

2.- Para los fines de la presente Resolución los términos que figuran a continuación tendrán el significado que en cada caso se especifica.

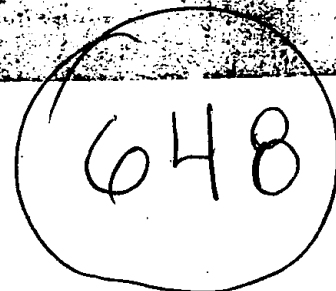
CONTAMINACION ATMOSFERICA : Es la presencia en el aire de uno o más contaminantes, o cualquier combinación de ellos, en concentraciones o niveles tales que perjudiquen o molesten la vida, la salud y el bienestar humano, la flora y la fauna, o degraden la calidad del aire, de los bienes, de los recursos nacionales o de los particulares.

CONTAMINANTES : Es toda sustancia química o sus compuestos o derivados, agentes físicos y biológicos que al adicionarse al aire, pueden alterar o modificar sus características naturales o las del ambiente.

FUENTE DE CONTAMINACION ATMOSFERICA : Es toda actividad, proceso, operación o dispositivo móvil o estacionario que independiente de su campo de aplicación, produzca o pueda producir contaminantes del aire.

FUENTE DE CONTAMINACION ATMOSFERICA ESTACIONARIA : Es toda fuente diseñada para operar en lugar fijo. Se incluyen aquellas montadas sobre vehículos transportables para facilitar su desplazamiento.

texto vigente al 26.08.91



FUENTE DE CONTAMINACION ATMOSFERICA MOVIL : Es toda aquella fuente capaz de desplazarse entre distintos puntos, mediante un elemento propulsor propio (motor) que genera y emite contaminantes.

NORMA DE CALIDAD DEL AIRE : Son los valores que definen las concentraciones máximas permisibles para los contaminantes presentes en el aire, condicionados a variación según el desarrollo de las investigaciones pertinentes.

EMISION : Es la descarga directa o indirecta a la atmósfera de toda sustancia contaminante.

NORMA DE EMISION : Es la concentración máxima permitida para un determinado contaminante, medida en el efluente de las fuentes de contaminación, sin dilución previa.

ESTUDIO DE IMPACTO AMBIENTAL : Es el análisis teórico de la incidencia de los contaminantes emitidos por una fuente en el medio ambiente.

EQUIPO EXISTENTE : Es el instalado o en proceso de instalación a la fecha de vigencia de la presente resolución.

EQUIPO NUEVO : Es el instalado con posterioridad a la fecha indicada en el punto anterior.

EQUIPO DE CONTROL : Es cualquier aditamento o dispositivo que prevenga o reduzca las emisiones de contaminantes.

HUMO : Son partículas resultantes de una combustión incompleta constituidas en su mayoría de carbón y cenizas y que son visibles en la atmósfera.

POLVO : Son partículas pequeñas emitidas a la atmósfera por elementos naturales, por procesos mecánicos o industriales, por transporte de materiales, demoliciones y otros.

POLVO FUGITIVO : Son partículas sólidas suspendidas en el aire emitidas por cualquier fuente que no sea una chimenea.

PESO DE PROCESO : El peso de todos los materiales que se introducen en un proceso específico y que puedan causar emisiones contaminantes.

Los combustibles sólidos se consideran como parte del peso de proceso, pero no así los combustibles líquidos, gaseosos y el aire de combustión.

PESO DE PROCESO POR HORA : El peso total de proceso, dividido por el número de horas necesarias para una operación completa, excluyendo períodos de detención o de inactividad.

ESCALA RINGELMANN : Es el método de prueba para definir la densidad aparente visual del humo.

OPACIDAD : Estado en el cual uno o más contaminantes impiden parcial o totalmente el paso de los rayos luminosos, ocasionando falta de visibilidad a un observador.

NORMA DE CALIDAD DEL AIRE :

3.- Para los efectos de protección de la salud se permitirán las siguientes concentraciones máximas de los contaminantes del aire que se indican :

I.: Partículas en suspensión:

Setenta y cinco microgramos por metro cúbico (75 microgr/m³ N) como concentración media geométrica anual; o doscientos sesenta microgramos por metro cúbico (260 microgr/m³ N) como concentración media aritmética

de veinticuatro horas consecutivas, no pudiéndose sobrepasar este último valor más de una vez por año.

II.: Anhídrido sulfuroso (SO_2) :

Ochenta microgramos por metro cúbico ($80 \text{ microgr/m}^3 \text{N}$) como concentración media aritmética anual, o trescientos sesenta y cinco microgramos por metro cúbico ($365 \text{ microgr/m}^3 \text{N}$) como concentración media aritmética durante veinticuatro horas consecutivas, no pudiéndose sobrepasar este último valor más de una vez por año.

III.: Monóxido de Carbono, (CO):

Diez mil microgramos por metro cúbico ($10.000 \text{ microgr/m}^3 \text{N}$) como concentración media aritmética máxima de ocho horas consecutivas, no debiendo sobrepasarse este valor más de una vez por año o cuarenta mil microgr/m³ N) como concentración media aritmética de una hora, no debiendo sobrepasarse este valor más de una vez por año.

IV.: Oxidantes fotoquímicos, expresados como ozono, (O_3).

Ciento sesenta microgramos por metro cúbico ($160 \text{ microgr/m}^3 \text{N}$) como concentración media aritmética de una hora, no debiendo sobrepasarse este valor más de una vez por año.

V.: Dióxido de nitrógeno (NO_2):

Cien microgramos por metro cúbico ($100 \text{ microgr/m}^3 \text{N}$) como concentración media aritmética anual.

4.- Todas las mediciones de estos contaminantes deberán ser corregidas para una temperatura de veinticinco grados celsius (25°C) y una presión de setecientos sesenta milímetros de mercurio (760 mm Hg).

El muestreo deberá ser efectuado con una frecuencia mínima de un período de veinticuatro horas cada seis días para anhídrido sulfuroso, dióxido de nitrógeno y partículas en suspensión y continuamente para fotoquímicos y monóxido de carbono.

5.- Para la determinación de concentraciones de los diferentes contaminantes, deberán utilizarse los siguientes métodos de análisis:

- Partículas en suspensión : método gravimétrico de muestreador de alto volumen o equivalente.
- Anhídrido sulfuroso : método colorimétrico de la pararrosanilina o equivalente.
- Monóxido de carbono : método de radiación infrarroja no dispersivo, o equivalente.
- Oxidantes fotoquímicos : método de quimiluminiscencia o equivalente.
- Dióxido de nitrógeno: método de quimiluminiscencia o equivalente.

Se considerarán equivalentes los métodos de análisis que, ensayados por el Laboratorio de Contaminación Atmosférica dependiente del Ministerio de Salud, suministren respuestas igualmente válidas respecto de los métodos de referencia ya especificados.

6.- La presente Resolución se modificará en la parte pertinente cuando a juicio de la autoridad sanitaria sea necesario incorporar otros contaminantes a la Norma de Calidad de Aire.

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A requerimiento específico de otros Ministerios o de las autoridades regionales correspondientes, el Ministerio de Salud establecerá por resolución normas especiales de calidad de aire más restrictivas en aquellas áreas en las cuales los objetivos de desarrollo de la región incluyan aspectos de relevante importancia, tales como la protección agrícola, turismo, recreación, balnearios o la preservación de las características naturales propias de parques o santuarios naturales.

7.- Se considera sobrepasada la Norma de Calidad de Aire cuando la concentración detectada en cualquier estación de muestreo localizada en el área correspondiente se exceda una de las concentraciones ya especificadas.

Se considerará saturada, en términos de contaminación atmosférica, cualquier área en que el valor de la Norma de Calidad de Aire de uno o más contaminantes esté sobrepasado.

8.- Para los efectos de aplicación de estas normas en el contexto de una política de administración del recurso aire, el territorio nacional queda dividido en las trece regiones existentes que se denominarán Regiones de Control de Calidad del Aire. En la ejecución de programas de control de la contaminación atmosférica, cualquier región podrá ser dividida en sub-regiones, constituidas por una o más comunas o por parte de ellas.

En las regiones o sub-regiones consideradas saturadas, el nivel regional de salud deberá implantar y ejecutar un programa de control de la contaminación atmosférica, asignando recursos definidos que permitan controlar las emisiones contaminantes. En aquellas consideradas no saturadas, corresponderá al nivel regional de salud aplicar las acciones de tipo preventivo pertinentes para no sobrepasar cualquier valor de la Norma de Calidad de Aire.

En ambos casos, el nivel regional de salud deberá considerar la adecuada coordinación interinstitucional que permita compatibilizar, en el marco de la estrategia de desarrollo regional, los aspectos de protección ambiental.

PROHIBICIONES Y EXIGENCIAS GENERALES .

9.- Se prohíbe quemar residuos sólidos, líquidos o cualquier otro material combustible a cielo abierto en áreas rurales, radio urbano, vía pública y recintos privados. Esta disposición regirá para áreas saturadas o en vías de saturación con las siguientes excepciones:

I.: Cuando se efectúe con permiso de la autoridad competente para:

- a) Instruir sobre procedimientos que tengan como fin combatir el fuego y los incendios.
- b) Destruir materiales peligrosos que no sea posible eliminar por otros medios sin causar un riesgo.

II.: Cuando se trate de prevenir la propagación del fuego que no pueda ser atacado de otro modo.

III.: Por razones sanitarias de protección comunitaria.

IV.: Cuando el fuego se use para cocinar al aire libre y no produzca molestias.

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10.- Prohíbese la emisión de humos con densidad colorimétrica superior al Nº 2 de la Escala de Ringelmann, provenientes de procesos de combustión estacionarios, con las siguientes excepciones:

- a) Durante un período de quince (15) minutos al día, para las operaciones de calentamiento del equipo de combustión.
- b) Durante un tiempo de tres (3) minutos, consecutivos o nó, en cualquier período de una (1) hora.

Prohíbese la emisión de humos con índice de opacidad superior al 40% de la escala respectiva, proveniente de procesos industriales estacionarios.

Aquellas fuentes de contaminación para las que no figure norma de emisión, deberán adoptar sistemas de control del o los contaminantes basados en la mejor tecnología disponible, sujetos a la aprobación de la autoridad sanitaria.

11.- La autoridad regional de salud deberá proponer al nivel central un proyecto de norma local de emisión cuando las circunstancias aconsejen criterios más estrictos que los contenidos en la norma nacional.

Estos proyectos de normas se elaborarán teniendo en cuenta los siguientes aspectos:

- a) Los objetivos y estrategia de desarrollo definidos por el gobierno regional.
- b) Las características geográficas, meteorológicas y topográficas del sector afectado.
- c) El grado de urbanización, industrialización y localización de las actividades de acuerdo a planos reguladores comunales o intercomunales.
- d) Niveles de contaminación a que se podría llegar a mediano plazo.
- e) Implementación evaluativa que permita ejercer una adecuada vigilancia de la calidad del aire.

12.- La autoridad local de salud podrá exigir al responsable de una fuente emisora de contaminantes, la instalación y operación de equipos automáticos de medición y registro, para verificar las cantidades de contaminantes emitidos. Del examen periódico de los registros respectivos dependerá la formulación de nuevas exigencias de control.

Los responsables de las fuentes de contaminación deberán comprobar la cantidad y calidad de los contaminantes atmosféricos que emitan por chimeneas, utilizando métodos aprobados por la autoridad sanitaria, pudiendo recurrir a la asistencia o servicios técnicos ajenos si lo estiman conveniente.

Cada vez que la autoridad sanitaria resuelva efectuar por si misma estudios de una fuente de contaminación, los responsables deberán otorgar todas las facilidades necesarias y cancelar según arancel los análisis de laboratorio requeridos, si esto último dicha autoridad estima conveniente exigirlo.

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NORMAS SOBRE PROYECTOS DE CONTROL DE FUENTES ESTACIONARIAS.

13.- Previa a la instalación o puesta en marcha de todo nuevo proceso, actividad u operación que implique contaminación del aire, se deberán presentar todos los antecedentes necesarios para definir el peso del proceso, a fin de precisar su posible influencia en el nivel de contaminación local.

La autoridad sanitaria en casos calificados podrá exigir la presentación de un estudio de impacto ambiental cuando a juicio de ésta los contaminantes emitidos puedan ocasionar un riesgo inminente para la salud.

Los proyectos deberán ser presentados a las Regiones de Salud correspondientes. Si estas no cuentan con programa de contaminación atmosférica remitirán todos los antecedentes al nivel central para su estudio y aprobación.

14.- La evacuación de efluentes provenientes de quemar combustibles sólidos, líquidos o gaseosos, deberá ser realizada a través de chimeneas. Cualquier otra fuente de contaminación del aire deberá estar provista de un sistema de ventilación extractiva y el lanzamiento de efluentes a la atmósfera deberá ser realizado a través de chimeneas, con excepción de aquellos casos particulares calificados en que se especifique un procedimiento distinto. En ambos casos los efluentes deberán ajustarse a la norma de emisión respectiva.

15.- Las operaciones, procesos o funcionamiento de equipos de trituración, molienda, transporte, manipulación, carga y descarga de material fragmentado o particulado, podrá exceptuarse de las exigencias anteriores, siempre que se realicen mediante procesos de humidificación permanente, o empleando otro sistema de control de la contaminación atmosférica de eficiencia igual o superior.

El almacenamiento de material fragmentado o particulado deberá efectuarse en silos adecuadamente cerrados o en otro sistema de control de la contaminación del aire de eficiencia igual o superior, de tal modo de impedir el arrastre de material por acción de los vientos.

Las exigencias formuladas en los dos párrafos inmediatamente precedentes se aplicarán solo en aquellos casos en que el área se encuentre saturada y en situaciones que creen un problema puntual.

16.- En las áreas cuya finalidad preponderante sea la residencial o comercial, quedará a criterio del nivel regional de salud, previa consulta al nivel central, especificar el tipo de combustible que podrá ser utilizado por equipos o dispositivos de combustión. Quedan incluidos los hornos de panificación, de restaurant, fuentes de soda y similares y calderas destinadas a cualquier finalidad.

17.- Las sustancias odoríferas resultantes de las fuentes que se enumeran a continuación deberán ser incineradas en post quemadores, a una temperatura mínima de setecientos cincuenta grados celsius (750°C) y un tiempo de residencia de los gases no inferior a cinco décimo (0,5) de segundo, o por otro sistema de control de contaminantes, de eficiencia igual o superior:

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Tostaduría de café, cebada, trigo, maní y similares.

Autoclaves y digestores utilizados en el aprovechamiento de material animal.

Estufas de secado o curado de piezas pintadas, barnizadas o litografiadas.

Oxidación de asfalto.

Ahumado de carnes y similares.

Fuentes de sulfuro de hidrógeno y mercaptanos.

Quando las fuentes anteriores estén ubicadas en áreas cuyo uso preponderante sea residencial o comercial se deberá utilizar gas como combustible del quemador. En otras áreas quedará a criterio de la autoridad regional de salud definir el combustible.

El post-quemador deberá estar provisto de un indicador de temperatura de la cámara de combustión, en un lugar de fácil acceso y visibilidad.

18.- Las operaciones de cobertura de superficies realizadas por aspersion, tales como pintura o aplicación de barniz, deberá realizarse en un compartimento apropiado, provisto de adecuada ventilación local de extracción, complementada con un sistema eficiente de retención de material particulado. Se exceptúan las zonas residenciales en las cuales estas actividades quedan prohibidas.

REGISTROS Y PERMISOS DE LAS FUENTES DE CONTAMINACION.

19.- Para los efectos de inscripción de los registros y obtención de autorizaciones de instalación, ampliación o funcionamiento se consideran como fuentes de contaminación las siguientes:

Actividades de extracción y tratamiento de minerales.

Actividades industriales.

Servicios de reparación, mantención o de otro tipo y actividades comerciales que produzcan impacto en la contaminación atmosférica.

Sistemas públicos o privados de recolección, transporte, tratamiento o disposición final de residuos o materiales sólidos, líquidos o gaseosos.

Fábricas de hormigón y de revestimiento asfáltico, de instalación transitoria o definitiva.

Actividades que utilicen o almacenen combustibles, sólidos, líquidos o gaseosos para fines comerciales o de servicios o industriales.

Demolición de construcciones.

Todas las actividades mencionadas en el párrafo anterior que a la fecha estuviesen instaladas, en ampliación o en funcionamiento estarán obligadas a suministrar a la autoridad sanitaria cuando ésta lo requiera, la siguiente información: ubicación, materias primas, productos terminados, sub-productos y residuos, descripción del o los procesos, distribución de maquinarias y equipo, cantidad y naturaleza de los contaminantes emitidos y equipos de control de la contaminación.

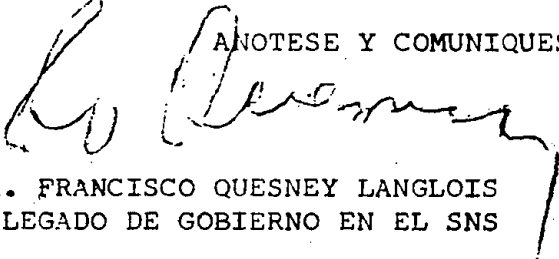
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FISCALIZACION Y SANCIONES :

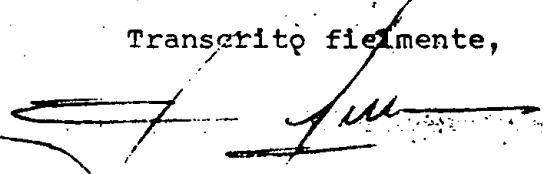
20.- La fiscalización y sanción de las infracciones a lo dispuesto en la presente resolución corresponderá aplicarlas al Servicio Nacional de Salud, de acuerdo a lo dispuesto en el Código Sanitario con excepción de la quema a cielo abierto en áreas saturadas o en vías de saturación que corresponderá al Cuerpo de Carabineros de acuerdo a lo dispuesto en los Arts. 9º y 10º del D.S. Nº 144 del 2 de mayo de 1961.

Las excepciones referentes a la quema a cielo abierto en áreas anteriormente mencionadas corresponderá resolverlas a la autoridad sanitaria.

ANOTESE Y COMUNIQUESE


DR. FRANCISCO QUESNEY LANGLOIS
DELEGADO DE GOBIERNO EN EL SNS

Transcrito fielmente,


Polidoro Palma Vergara
MINISTRO DE FE

Distribución:

- Depto. Programas sobre el Ambiente (100)
- Directores Regionales
- Direcciones Región Metropolitana
- Oficinas de Higiene y Seguridad Industrial Región Metropolitana.
- Ministerio de Transporte
- Municipalidades de la Región Metropolitana
- Dirección General de Carabineros
- Depto. del Tránsito y Carreteras
- Instituto de Investigaciones Tecnológicas (INTEC-CORFO)
- ODEPAN
- JSM/ssa.

(100)

CONTRALORÍA GENERAL DE LA REPÚBLICA
DIVISIÓN JURÍDICA

Copia para

Rodrigo

N° _____ 000189

Santiago, 17. NOV 97 *037842

Para su conocimiento y demás fines que procedan, me permito remitir a Ud. copia del oficio N° _____, de fecha _____, de esta Contraloría General.

17. NOV 97 *037841

Dios guarde a Ud.,

Gastón Astorquiza Altaner
GASTÓN ASTORQUIZA ALTANER
Abogado Jefe
División Jurídica

AL SEÑOR
DIRECTOR EJECUTIVO DE LA
COMISION NACIONAL DEL MEDIO AMBIENTE
PRESENTE


CONTRALORÍA GENERAL DE LA REPÚBLICA
DIVISIÓN JURÍDICAREF.N°s 23.639/96
JCL 26.924/96
28.751/96SOBRE VIGENCIA DE LA
RESOLUCIÓN N° 1.215, DE
1978, DEL DELEGADO DE LA
JUNTA DE GOBIERNO ANTE EL
SERVICIO NACIONAL DE
SALUD.

SANTIAGO, 17. NOV 97 *037841

Esta Contraloría General ha estimado necesario emitir un pronunciamiento acerca de la vigencia del acto administrativo de la suma, a raíz de las dudas que se han planteado con motivo de la entrada en vigor de la ley N° 19.300, y de los cuestionamientos que se han formulado a su respecto, en razón de que no fue publicado en el Diario Oficial, ni sometido al control preventivo de legalidad de este Organismo, y porque, además, regularía materias que son propias de ley.

Sobre el particular, es útil tener presente, en primer término, que la indicada resolución N° 1.215 fue dictada el año 1978, y establece, en general, normas sanitarias mínimas destinadas a prevenir y controlar la contaminación atmosférica.

Dicho acto administrativo emanó de la autoridad que a esa data tenía competencia sobre la materia. Así aparece del análisis conjunto de la ley N° 10.383, que creó el Servicio Nacional de Salud, del decreto N° 144, de 1961, del Ministerio de Salud, que establece normas para evitar emanaciones o contaminantes atmosféricos de cualquier naturaleza, y del decreto ley N° 94, de 1973, que creó la institución de los Delegados de la Junta de Gobierno, para administrar diversos servicios públicos, entre los cuales se cuenta al ex-Servicio Nacional de Salud.



AL
HONORABLE DIPUTADO
SEÑOR GUIDO GIRARDI LAVÍN
VALPARAÍSO.

Asimismo, se debe anotar que el 9 de marzo de 1994 entró en vigencia la ley N° 19.300, sobre Bases Generales del Medio Ambiente, que ha establecido un nuevo régimen normativo destinado a salvaguardar el derecho a vivir en un medio ambiente libre de contaminación.

Examinado el contenido de la mencionada resolución N° 1.215, a la luz de las disposiciones de la referida ley N° 19.300, se advierte la necesidad de distinguir entre lo preceptuado en los N°s. 3, 4 y 5 de dicha resolución, y lo dispuesto en el resto de los numerales de la misma, a fin de dilucidar el problema relativo a su vigencia.

En este sentido, cabe precisar que el N° 3 de la resolución que se estudia ha establecido las concentraciones ambientales máximas para las partículas en suspensión, el anhídrido sulfuroso, el monóxido de carbono, los oxidantes fotoquímicos (ozono), y el dióxido de nitrógeno; el N° 4, por su parte, expresa que todas las mediciones de los referidos contaminantes deben ser corregidas en la forma que indica y que el muestreo deberá ser efectuado con la frecuencia mínima que señala; y, finalmente, el N° 5, contempla los métodos de análisis para determinar las concentraciones de los diferentes contaminantes.

Ahora bien, acorde con lo señalado en el artículo 2°, letra n), de la citada ley N° 19.300 -que define lo que debe entenderse por norma primaria de calidad ambiental-, y la denominación de normas de calidad del aire que la resolución N° 1.215, da a las concentraciones máximas a que se ha hecho mención, es posible sostener que los numerales indicados han establecido y regulado las normas primarias de calidad ambiental para cada uno de los elementos recién indicados.

Siendo así, procede aplicar, respecto de la vigencia de esas normas de calidad ambiental, el criterio sustentado por esta Entidad de Control en el dictamen N° 33.256, de 1994, cuya fotocopia se adjunta, y por consiguiente deben entenderse vigentes.



Por otra parte, en lo que concierne al resto de los numerales de la resolución que se examina, cumple manifestar que algunos han perdido su vigencia, por cuanto tratan materias generales relacionadas con la garantía del artículo 19, N° 8, de la Carta Fundamental, y, por consiguiente, deben ser reguladas por disposiciones de rango legal; y otros, no pueden entenderse vigentes ya que establecen prohibiciones y exigencias de carácter general que para ser obligatorios requieren de la correspondiente publicación.

Sobre este último punto, cabe señalar que la circunstancia de que la resolución que se examina no haya sido publicada, no obsta a la conclusión a que se ha arribado en orden a entenderla vigente respecto de los números 3, 4 y 5, de la misma, toda vez que, por su naturaleza, no requería de tal publicación, a lo que cabe añadir que no se advierte precepto alguno, vigente a la época en que fue emitida, que obligara a publicar los actos administrativos que fijaban normas de calidad ambiental, como el de la especie, a diferencia del artículo 49 de la citada ley N° 19.300, que sí contempla dicha obligación.

En lo que concierne al hecho de que la resolución N° 1.215 no fue sometida al control preventivo de legalidad de esta Contraloría General, es del caso señalar que acorde con lo dispuesto en la resolución N° 600, de 1977, de esta Entidad de Control, que estableció reglas sobre exención del trámite de toma de razón, vigente al tiempo de dictarse el acto administrativo de la suma, los actos que fijaban normas de calidad ambiental estaban exentos de dicho trámite.

Por último, es dable destacar que de las disposiciones constitucionales pertinentes no se advierte que la fijación de normas de calidad ambiental sea una materia propia de ley, de lo que se sigue que la citada ley N° 19.300, no ha contemplado en sus preceptos ninguna norma de este tipo, sino que se ha limitado a consignar definiciones de carácter genérico sobre el particular y a señalar los procedimientos y autoridades competentes para dictarlas.

En mérito de lo expresado, cabe concluir que la resolución N° 1.215, de 1978, del Delegado de la Junta de Gobierno ante el ex-Servicio Nacional de Salud, sólo se encuentra vigente en sus números 3, 4 y 5, en cuanto se refieren a normas de calidad ambiental.

9. Transcribese al Ministerio Secretaría General de la Presidencia de la República, a la Subsecretaría de Salud, al Servicio de Salud del Ambiente de la región Metropolitana, y a la Comisión Nacional del Medio Ambiente.

Dios guarde a US.

JORGE REYES RIVEROS
CONTRALOR GENERAL DE LA REPUBLICA
SUBROGANTE

REF. Nº24.440/94
ABG.
HAM.
JCL.
jmv.

ATIENDE CONSULTA DEL MINISTERIO SE-
CRETARIA GENERAL DE LA PRESIDENCIA.

33256

SANTIAGO, 27 SET. 1994

Mediante el documento del rubro, esa Secretaría de Estado expresa que en forma previa a la dictación de dos decretos, uno que declara zona saturada la aldea a la Fundición de Caletones en la VI Región, y otro que aprueba un plan de descontaminación en la Fundición Hernán Videla Lira, en Paipote, III Región, ha estimado necesario solicitar un pronunciamiento a esta Contraloría General acerca de si tales medidas deben adoptarse de acuerdo con las reglas contenidas en el decreto Nº185, de 1991, del Ministerio de Minería o en la ley Nº19.300, de Bases Generales del Medio Ambiente, publicada el 9 de marzo de 1994, y si se encuentran vigentes las normas de calidad ambiental establecidas en el referido decreto.

Sobre el particular, cabe tener presente que la citada ley Nº19.300, que estatuye las Bases Generales del Medio Ambiente, no contempla en sus preceptos ninguna norma de calidad ambiental específica sino que se limita a consignar algunas definiciones de carácter genérico sobre la materia y a señalar los procedimientos y autoridades competentes para dictar tales normas.

Por su parte, el indicado decreto Nº185, que reglamenta el funcionamiento de establecimientos y fuentes emisoras de anhídrido sulfuroso, material particulado o arsénico, junto con establecer disposiciones generales acerca de los diversos aspectos que regula, fijó las concentraciones ambientales máximas permisibles para el material particulado respirable y el anhídrido sulfuroso.


AL SEÑOR
MINISTRO SECRETARIO
GENERAL DE LA PRESIDENCIA
P R E S E N T E

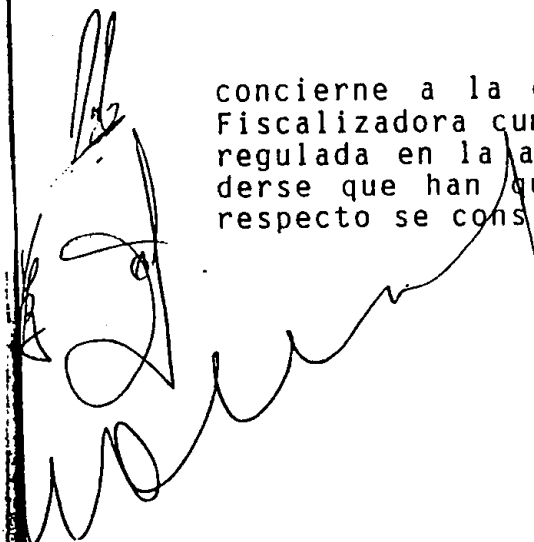
En efecto, con el fin de proteger la salud humana, el artículo 4º de ese decreto señaló normas de calidad del aire en relación al material particulado respirable y al anhídrido sulfuroso, aplicables en todo el territorio nacional y, con el objeto de preservar los ecosistemas y proteger las explotaciones silvoagropecuarias, el artículo 6º fijó normas sobre concentraciones ambientales máximas permisibles de anhídrido sulfuroso para las áreas geográficas que indica.

Es dable destacar que estas normas de calidad ambiental fueron dictadas en virtud de preceptos legales que actualmente se encuentran vigentes conforme al artículo 1º de la ley N°19.300, según el cual el derecho a vivir en un medio ambiente libre de contaminación, la protección del medio ambiente, la preservación de la naturaleza y la conservación del patrimonio ambiental se regulan por sus disposiciones, "sin perjuicio de lo que otras normas legales establezcan sobre la materia."

Corroborando lo expresado, el inciso tercero del artículo 32 del citado texto legal al disponer que el reglamento a que se refiere debe contener entre otras materias, "los criterios para revisar las normas vigentes" de calidad ambiental, lo que implica que el legislador reconoce la existencia de normas ambientales en vigor, promulgadas de acuerdo al ordenamiento que regía con anterioridad a la publicación de la Ley de Bases Generales del Medio Ambiente, como ocurre, precisamente, con las fijadas por el citado decreto N° 185.

En tales condiciones, no cabe sino concluir que las normas de calidad del aire sobre material particulado respirable y anhídrido sulfuroso fijadas por los artículos 4º y 6º del decreto N° 185, se encuentran vigentes.

Precisado lo anterior, y en lo que concierne a la declaración de zona saturada, esta Entidad Fiscalizadora cumple con manifestar que esa materia ha sido regulada en la aludida ley N°19.300, por lo que debe entenderse que han quedado sin efecto las disposiciones que al respecto se consignaban en el referido decreto N°185.



CONTRALORIA GENERAL DE LA REPUBLICA
DIVISION JURIDICA

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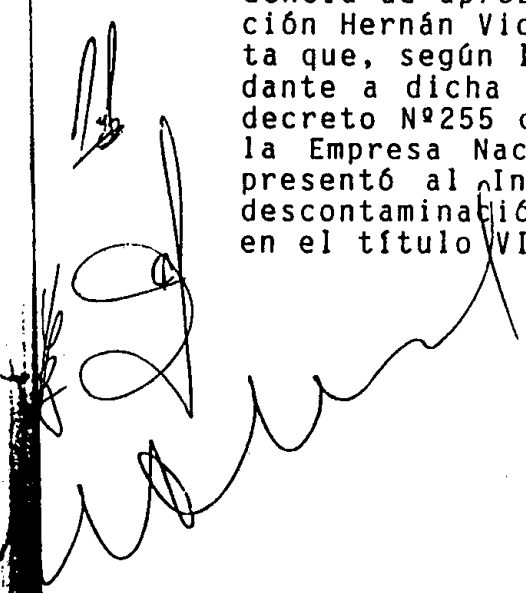
Ahora bien, es menester consignar que acorde con lo dispuesto en el artículo 2º, letra u), de la ley indicada, se entiende por zona saturada "aquella en que una o más normas de calidad ambiental se encuentran sobrepasadas".

Enseguida, es dable anotar que conforme al artículo 43 del mismo texto legal, la declaración de una zona del territorio como saturada se formaliza mediante decreto supremo que debe llevar las firmas del Ministro Secretario General de la Presidencia y la de los demás Secretarios de Estado que corresponda y contener la determinación precisa del área geográfica que abarca.

A continuación, es útil tener en cuenta que de acuerdo a dicho precepto la aludida declaración debe fundarse en mediciones, realizadas o certificadas por los organismos públicos competentes, en las que conste haberse verificado la condición que la hace procedente. Asimismo, corresponde a la Comisión Regional del Medio Ambiente, tomar a su cargo este procedimiento a menos que la zona objeto de la declaración comprenda distintas regiones, en cuyo caso el organismo competente es la Comisión Nacional del Medio Ambiente.

En consecuencia, atendido que, según se indica en la consulta, se ha aprobado la red de monitoreo para medir la calidad del aire en la zona circundante a la Fundición de Caletones, y que la Comisión Regional del Medio Ambiente ha verificado en esa zona la superación de las normas fijadas, resulta procedente que aquella medida se declare mediante decreto supremo con la firma de los Ministros que corresponda.

Finalmente, respecto de la procedencia de aprobar un plan de descontaminación para la Fundición Hernán Videla Lira, de Paipote, es dable tener en cuenta que, según lo manifestado en la consulta, el área circundante a dicha fundición fue declarada zona saturada por el decreto N°255 de 1993, del Ministerio de Agricultura, y que la Empresa Nacional de Minería, en noviembre de ese año, presentó al Intendente de la Región de Atacama un plan de descontaminación que ha seguido la tramitación contemplada en el título VI del decreto N°185.



CONTRALORIA GENERAL DE LA REPUBLICA
DIVISION JURIDICA

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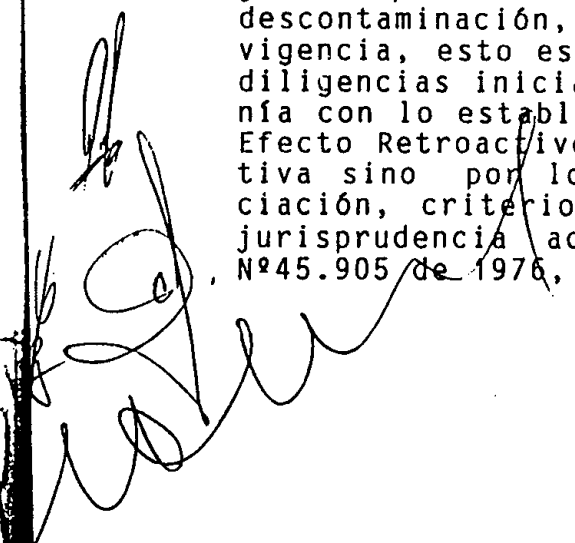
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Atendido lo anterior resulta necesario dilucidar si ese procedimiento, llevado a efecto con anterioridad a la entrada en vigencia de la ley N°19.300, es útil para la aprobación de dicho plan, teniendo en cuenta que el aludido texto legal ha fijado para tal efecto un procedimiento distinto.

En efecto, el artículo 17 del referido decreto N° 185, imponía a los establecimientos regulados que se localizaban en zonas declaradas como saturadas la obligación de elaborar, en un plazo máximo de seis meses desde la fecha de publicación del decreto que efectuaba tal declaración, planes de descontaminación de acuerdo al Título VI de ese ordenamiento. En éste se indicaba el contenido de los mismos y el procedimiento para su evaluación, etapa que se iniciaba con la presentación del plan al Intendente Regional y culminaba con su aprobación mediante decreto supremo, todo lo cual debía efectuarse en un plazo de 120 días.

Por su parte, la Ley de Bases Generales del Medio Ambiente, en su artículo 44, dispone que a través de decreto supremo del Ministerio Secretaría General de la Presidencia, que debe llevar además la firma del Ministro sectorial que corresponda, se establecen los planes de descontaminación, cuyo cumplimiento es obligatorio en las zonas calificadas como saturadas. Asimismo, señala que la elaboración de estos planes y su proposición a la autoridad competente corresponde a la Comisión Nacional del Medio Ambiente, previo informe de la Comisión Regional respectiva, debiendo seguirse para estos efectos el mismo procedimiento y etapas establecidos en el inciso tercero del artículo 32 de la citada ley, que prevé la dictación de un reglamento que regule tales aspectos.

En tales circunstancias, si bien las nuevas disposiciones de la citada ley N°19.300, que fijan el procedimiento para la aprobación de los planes de descontaminación, deben aplicarse a contar de su entrada en vigencia, esto es, el 9 de marzo de 1994, las actuaciones y diligencias iniciadas con anterioridad a esa fecha, en armonía con lo establecido en el artículo 24 de la Ley sobre el Efecto Retroactivo de las Leyes, no se rigen por esa normativa sino por los preceptos vigentes al tiempo de su iniciación, criterio que, además, guarda concordancia con la jurisprudencia administrativa contemplada en el dictamen N°45.905 de 1976, de esta Entidad Fiscalizadora.



CONTRALORIA GENERAL DE LA REPUBLICA
DIVISION JURIDICA

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000198

En consecuencia, como la etapa de evaluación del plan de la especie se encontraba pendiente ante el Intendente mencionado a la fecha de la entrada en vigencia de la ley N° 19.300, corresponde a esa autoridad, con arreglo a lo previsto en la letra d) del artículo 27 del referido decreto N°185, dar cumplimiento a la diligencia de remitir al Presidente de la República dicho plan para su aprobación, la que en todo caso debe efectuarse mediante decreto del Ministerio Secretaría General de la Presidencia, en conformidad a lo dispuesto en el artículo 44 del indicado texto legal.

Atendido lo expuesto, esta Contraloría General cumple con manifestar que ese Ministerio puede declarar zona saturada el área aledaña a la Fundición de Caltones, en la VI Región y aprobar el plan de descontaminación para la Fundición Hernán Videla Lira, de Paipote, III Región, en los términos señalados precedentemente.

Dios guarde a US.

OSVALDO ITURSIAGA RUIZ
Contralor General de la República

CONSTITUYE CONSEJO CONSULTIVO
REGIONAL DEL MEDIO AMBIENTE

RESOLUCIÓN EXENTA N° 01079 /

Puerto Montt, **24** DIC 1999

VISTOS ESTOS ANTECEDENTES :

1. Lo dispuesto en la Constitución Política del estado; la Ley 19.175 de 1992, según texto refundido por Decreto N°291 de marzo de 1993, del Ministerio el Interior, la Ley 19.300 de Bases Generales del Medio Ambiente; y el D.S. N° 86, modificado por D.S. N° 181, y la resolución 488/97 que modifica la Resolución N°520 de 1996 de la Contraloría General de la República, que fija texto refundido, coordinado y sistematizado de la Resolución C.G.R. N°55/92.

TENIENDO PRESENTE:

2. Que el Gobierno de Chile está decidido a impulsar una política ambiental que esta comprometida con el desarrollo y que asuma las funciones reguladoras del Estado.
3. Que la Intendencia Regional y la Comisión Regional del Medio Ambiente han asumido tales objetivos nacionales, buscando regular la sustentabilidad del proceso regional y elevar la calidad de vida de los habitantes de esta Región.
4. Que es necesario lograr una efectiva coordinación y eficacia en la gestión ambiental que realicen las instituciones públicas y privadas de esta Región.
5. Que es necesario avanzar en el cumplimiento de los objetivos perseguidos por la legislación ambiental.
6. Que el D.S. N°86 modificado por el D.S. 181, instruye sobre la forma y los plazos de constitución del Consejo Consultivo Regional del Medio Ambiente.

RESUELVO:

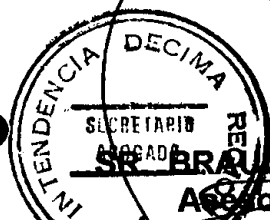
1. Declárese constituido a contar d esta fecha, en la X Región de los Lagos, el Consejo Consultivo Regional del Medio Ambiente.
2. El Consejo Consultivo Regional del Medio Ambiente estará integrado por las siguientes personas:

- Director Regional de la Comisión nacional del medio ambiente, quien lo presidirá.
 - Sr. Carlos Bertrán y Sr. Francisco Magaña, científicos en representación de Universidades e Institutos Profesionales.
 - Señor José Arenas y Sr. Waldo Vera, en representación de las Organizaciones No Gubernamentales (ONGs)
 - Sr. Osvaldo Cirano y Sr. Daniel Rebolledo, en representación del empresariado.
 - Sr. Christian Araus y Sr. Guido Yobanolo, en representación de los trabajadores.
 - Sr. Luis Durán Branchi, en representación del Intendente Regional.
3. Los Consejeros durarán en sus funciones un periodo de dos años, el que podrá prorrogarse por una sola vez.
4. Corresponderá al Consejo Consultivo Regional absolver las consultas que formule la comisión regional de medio Ambiente y ejercer todas las atribuciones y desempeñar las demás funciones que le encomiende la Ley.

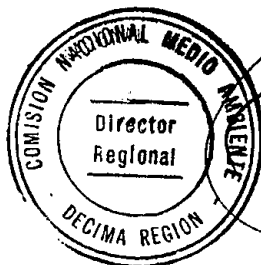
ANÓTESE, NOTIFÍQUESE Y REGÍSTRESE



SR. RABINDRANATH QUINTEROS LARA
Intendente Regional
Decima Región de Los Lagos



SR. BRAULIO SANHUEZA
Asesor Jurídico
Intendencia Regional
Decima Región de Los Lagos



SR. RAÚL ARTEAGA MONTESINOS
Director Regional
Comisión Nacional del Medio Ambiente
Decima Región de Los Lagos

**CONSTITUYE CONSEJO CONSULTIVO
REGIONAL DEL MEDIO AMBIENTE.**

RESOLUCIÓN EXENTA 175,

COYHAIQUE, 26 OCT 1999

VISTOS:

Lo dispuesto en la Constitución Política del Estado; la Ley 19.175 de 1992, según texto refundido por Decreto N°291 de marzo de 1993, del Ministerio del Interior, la Ley 19.300 de Bases Generales del Medio Ambiente; y el D.S. N°86, modificado por D.S. N°181, y la Resolución 488/97 que modifica la Resolución N°520 de 1996 de la Contraloría General de la República, que fija texto refundido, coordinado y sistematizado de la Resolución C.G.R. N°55/92.

TENIENDO PRESENTE:

Que el Gobierno de Chile está decidido a impulsar una política ambiental que esté comprometida con el desarrollo y que asuma las funciones reguladoras del Estado.

Que esta Intendencia Regional y la Comisión Regional del Medio Ambiente han asumido tales objetivos nacionales, buscando regular la sustentabilidad del proceso Regional y elevar la calidad de vida de los habitantes de esta Región.

Que es necesario lograr una efectiva coordinación y eficacia en la gestión ambiental que realicen las instituciones privadas y públicas de esta Región.

Que es necesario avanzar en el cumplimiento de los objetivos perseguidos por la legislación ambiental.

Que el D.S. N°86 modificado por el D.S. 181, instruye sobre la forma y los plazos de constitución del Consejo Consultivo Regional del Medio Ambiente.

RESUELVO:

1.- Declárese constituido a contar de esta fecha, en la XI Región de Aysén, el Consejo Consultivo Regional del Medio Ambiente.

2.- El Consejo Consultivo Regional del Medio Ambiente estará integrado por las siguientes personas:

Directora Regional de la Comisión Nacional del Medio Ambiente, quién lo presidirá.

Sr. Eduardo Aedo Marchant y Sra. Margarita Oyarce Igor, científicos en representación de las Universidades e Institutos Profesionales.

Sra. Miriam Chible Contreras y Sr. Bernardino Ojeda Barria, en representación de las Organizaciones No Gubernamentales (ONG).

REPÚBLICA DE CHILE
MINISTERIO DEL INTERIOR
INTENDENCIA REGIONAL DE AYSÉN

Sr. Luis Gómez Pizarro y Sr. Eduardo Santelices
Puelma, en representación del empresariado.

Sr. Jacinto Tejeda Muñoz y Sr. Víctor Inostroza
Flores, en representación de los Trabajadores.

Sra. Lucy Puchi Muñoz en representación del
Intendente Regional.

3.- Los Consejeros durarán en sus funciones un
periodo de dos años, el que podrá prorrogarse por una sola vez.

4.- Corresponderá al Consejo Consultivo Regional
absolver las consultas que le formule la Comisión Regional del Medio Ambiente y ejercer
todas las atribuciones y desempeñar las demás funciones que le encomiende la Ley.

ANÓTESE, Y COMUNÍQUESE.



Moscoso Gatica
VAN MOSCOSO GATICA
Asesor Jurídico
Intendencia Regional de Aysén



[Signature]
CARLOS SACKEL BAHAMONDES
Intendente Regional de Aysén



RESOLUCIÓN EXENTA (G.R.) N° 014 /

MAT.: Renueva Consejo Consultivo Regional del Medio Ambiente.

PUNTA ARENAS, 02 NOV. 1999

Con esta fecha se ha resuelto lo que sigue:

VISTOS:

1. Los artículos 82 y 83 de la Ley N° 19.300, sobre Bases del Medio Ambiente;
2. El Decreto N° 86, de 1995, del Ministerio Secretaría General de la Presidencia, Reglamentario del Consejo Consultivo de la Comisión Nacional del Medio Ambiente y de los Consejos Consultivos Regionales;
3. La Resolución N° 55, de 24.01.92 de la Contraloría General de la República, cuyo texto refundido, coordinado y sistematizado, se fijó mediante Resolución N° 520, de 15.11.96, del mismo Organismo;
4. La Ley N° 19.175, Orgánica Constitucional sobre Gobierno y Administración Regional,

CONSIDERANDO:

1. Que, de acuerdo con lo establecido en el artículo 15 del Reglamento señalado en el N° de los Vistos del presente documento, corresponde designar el Consejo Consultivo Regional del Medio Ambiente de Magallanes y Antártica Chilena para el período 2000-2002;
2. Que, de conformidad con las proposiciones de sus representantes, formadas por las instituciones y entidades indicadas en la misma disposición esta Autoridad Regional ha procedido a seleccionar como integrantes del referido Consejo para el período 2000-2002 a las personas que se individualizan en la parte resolutive.

RESUELVO:

1. **DESÍGNASE**, como miembros del Consejo Consultivo Regional del Medio Ambiente de Magallanes y Antártica Chilena para el período 2000-2002 a las personas que se indican en representación de las entidades que se señalan:
 - a) En representación de la Universidad de Magallanes, los científicos:
 - Señora María Soledad Astorga España y
 - Señor Orlando Dollenz Alvarez
 - b) En representación de Organizaciones no Gubernamentales:
 - Don Eliecer Bahamonde Mansilla y
 - Don José Luis Oyarzún Barría


- c) En representación del empresariado:
 - Don José Jainaga Mallagaray y
 - Don Ivan Nikovic Fernández

 - d) En representación de Organizaciones y Trabajadores:
 - Don Raúl Hein Bozic y
 - Don Luis Arriaza Henriquez

 - e) En representación del Intendente Regional:
 - Don José Guzmán V.
2. El Consejo Regional del Medio Ambiente de Magallanes y Antártica Chilena, integrado por los Consejeros designados en la presente resolución, será presidido por el Director Regional de la Comisión Nacional del Medio Ambiente, don Sergio Nitrigual Norambuena.
3. La organización y funcionamiento del Consejo se someterá a las disposiciones pertinentes del Decreto Reglamentario N° 86, de 1995, del Ministerio Secretaría General de la Presidencia de la República, señalando en los Vistos de la presente Resolución.

ANÓTESE, COMUNÍQUESE Y ARCHÍVESE. (Fdo.) Jaime Jelincic Aguilar, Intendente Regional (S) "Magallanes y Antártica Chilena", Juan Poblete Silva Jefe Depto. Jurídico Servicio Gobierno Regional.

Lo que transcribo a Ud. para su conocimiento.


JUAN POBLETE SILVA
JEFE DEPTO. JURÍDICO
SERVICIO GOBIERNO REGIONAL

DISTRIBUCIÓN:

- Integrantes del Consejo
- Archivo Depto. Jurídico
- Archivo

JJA/JPS/eps

**REPUBLICA DE CHILE
GOBIERNO INTERIOR
INTENDENCIA IX REGION
DE LA ARAUCANIA
DEPARTAMENTO JURIDICO**

REF.: Designa Integrantes Consejo Consultivo
Regional del Medio Ambiente

Temuco, 25 OCT 1999

Resolución Exenta N° 421

VISTOS:

1. El Art.82 de la Ley N° 19.300 sobre Bases Generales del Medio Ambiente.
2. El Art.15 del Decreto N°86 de 1995 del Ministerio Secretaría General de la Presidencia que aprobó el reglamento que regula el funcionamiento de los Consejos Consultivos Regionales del Medio Ambiente.
3. El ORD. N° 359 del 15.10.99 de Director Regional IX Región de CONAMA.
4. Art. 2° letra p) de la Ley 19.175 Orgánica Constitucional sobre Gobierno y Administración Regional.
5. Resolución Exenta N° 582 del 14.10.97 de Intendencia Regional.
6. La Resolución N° 520 de 1996 de la Contraloría General que fijó el texto refundido, coordinado y sistematizado de la Resolución N° 55 de 1992.

CONSIDERANDO:

1. Que la Ley 19.300 sobre Bases Generales del Medio Ambiente, Establece los Consejos Consultivos Regionales Como órganos Asesores de las Comisiones Regionales del Medio Ambiente.
2. Que por las normas de los "Vistos 1) y 2), se ha radicado en los Intendentes Regionales la designación de los integrantes de dichos Consejos, conforme al procedimiento establecido en el Reglamento

RESUELVO:

1. DESIGNASE, como integrantes del Consejo Consultivo de la Comisión Regional del Medio Ambiente IX Región, a las siguientes personas:
 - a) En su calidad de científicos:
 - Dr. Carlos Klein Koch
 - Dr. Fernando Peña Cortés
 - b) En representación de las Organizaciones No Gubernamentales sin fines de lucro que tengan por objeto la protección o estudio del Medio Ambiente.
 - Sra. Angélica Hernández Moreno
 - Sr. Roberto Koch B.
 - c) En representación del Empresariado

- Sr. Edison Rocha Durán
- Sr. Juan Ojeda Viera

- d) En Representación de los Trabajadores

- Sr. Servando Contreras
- Sr. Edgardo Alonqueo M.

- e) En representación del Sr. Intendente Regional

- Sr. Sergio Meza Villegas

ANOTESE, COMUNIQUESE Y ARCHIVESE

Elizabeth V. Brevis Silva
Jefe Departamento Jurídico
Intendencia IX Región



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ANALISIS DE LA CONSISTENCIA DE LOS ANTECEDENTES PARA LA REVISION DE LAS NORMAS DE CALIDAD DE AIRE CONTENIDAS EN LA RESOLUCION N°1.215/78 DEL MINISTERIO DE SALUD

Este análisis se basa en el estudio del informe final "Antecedentes para la Revisión de las Normas de Calidad de Aire contenidas en la Res. N°1.215 del Ministerio de Salud, 1978", elaborado por la Consultora Sociedad de Gestión Ambiental Ltda. (S.G.A.) en 1998 para la Comisión Nacional del Medio Ambiente. Adicionalmente, se revisaron los antecedentes correspondientes al Plan de Prevención y Descontaminación Atmosférica de la Región Metropolitana (1997), la Resolución N°1.215 de 1978 del Ministerio de Salud y el Reglamento para la Dictación de Normas de Calidad Ambiental y de Emisión, contenido en el Decreto Supremo N°93 de 1995 del Ministerio Secretaría General de la Presidencia.

Antecedentes Generales

El estudio realizado por la consultora SGA comprende, para cada uno de los contaminantes incluidos en la Resolución N°1.215 (en adelante, la Resolución), los siguientes aspectos: (1) efectos del contaminante en la salud: experiencia nacional; (2) efectos del contaminante en la salud: experiencia internacional; (3) niveles del contaminante en la calidad del aire en Chile; (4) cumplimiento y fiscalización de la Resolución; (5) experiencia internacional en normas de calidad del aire; y, (6) proposiciones para la revisión de la norma.

A continuación se presenta un breve resumen de los principales antecedentes contenidos para cada uno de los contaminantes normados:

Material Particulado

Un análisis de consistencia sobre los antecedentes relativos a este contaminante se presentó en el informe del mes de Agosto a CONAMA.

Dióxido de Azufre (SO₂)

La experiencia nacional sobre los efectos de la contaminación por SO₂ muestran que la mortalidad no es estadísticamente significativa. En cuanto a los estudios de morbilidad, se encontró un aumento de las consultas infantiles de urgencia y un efecto en el flujo respiratorio forzado, en asociación con SO₂.

Por su parte, la Organización Mundial de la Salud (OMS) determinó la existencia de niveles umbrales para los efectos del SO₂ sobre la salud humana tanto para efectos agudos (250 ug/m³ para niveles de 24 h), traducidos en un aumento de las enfermedades respiratorias agudas en adultos, como para efectos de largo plazo (100 ug/m³ para niveles anuales de exposición), expresados en un aumento en los síntomas o enfermedades respiratorias.

Adicionalmente, estudios recientes se han enfocado en determinar los efectos en la salud asociados con las exposiciones al dióxido de azufre de más corto plazo. La OMS ha establecido el menor nivel de efecto observado en 1.000 ug/m³ (10 minutos) y un factor de seguridad igual a 2 para la protección de la salud pública. De ahí que entregue un valor guía máximo de 500 ug/m³ para exposiciones de 10 minutos.

La Tabla 1 presenta un resumen comparativo entre los niveles normados en Chile y países relevantes respecto a la temática ambiental.

Tabla 1: Comparación de las Normas de Calidad del Aire para Dióxido de Azufre (SO₂).

PAIS	SO ₂ (ug/m ³)				
	10 min.	30 min.	1 h	24 h	Anual
Chile	-	-	-	365	80
Estados Unidos	-	-	-	365	80
Unión Europea	-	-	350	125	-
OMS	500	-	-	125 ⁽¹⁾	50 ⁽¹⁾
Suiza	-	100	-	100	30
Japón	-	-	260	104	-
Alemania	-	400	-	-	140

Nota: ⁽¹⁾ Valores guía para exposición combinada de dióxido de azufre y material particulado.

Como se desprende de la tabla anterior, la experiencia internacional conduce a regulaciones más estrictas en cuanto a las concentraciones ambientales diarias y anuales de SO₂, las cuales se fundamentan en los niveles umbrales determinados por la OMS. Asimismo, la tendencia conduce a la regulación de los niveles a más corto plazo de dicho contaminante, ya sea para las concentraciones horarias, de 10 ó 30 minutos.

El nivel de este contaminante en Santiago se encuentra bajo los valores normados. En el resto del país no existen mediciones continuas, con excepción de la ciudad de Copiapó, en la cual los valores han disminuido considerablemente los últimos años, cumpliendo con los niveles establecidos en la Resolución.

El estudio propone los siguientes valores para las concentraciones máximas de SO₂ permisibles y los periodos asociados:

Tabla 2: Valores de las Concentraciones y Periodos Permisibles Propuestos por el Estudio de SGA.

Concentración máxima permisible (ug/m ³)	Período
(1)	1 h
240	24 h
80	Anual

Nota: (1) Se realizó evaluación técnico-económica para valores entre 700 y 1.300 g/m³ para la ciudad de Copiapó, la cual presenta valores mayores a los mencionados anteriormente. Los resultados indicaron que los beneficios son menores que los costos, por lo tanto se sugiere no imponer un nivel horario para este contaminante.

En el caso de la disminución de la norma diaria de 365 ug/m³ a 240 ug/m³ no se realizó una evaluación económica específica, puesto que en la gran mayoría de las ciudades de Chile se esta cumpliendo este último valor. Sin embargo, según lo establecido en el Artículo 15 del D.S. N°93/95 del Ministerio Secretaría General de la Presidencia, una vez elaborado un anteproyecto de norma deberá realizarse el análisis general del impacto económico y social de la(s) norma(s) contenidas en dicho anteproyecto. Por lo tanto, dicha evaluación deberá ser efectuada una vez elaborado el anteproyecto para SO₂.

Monóxido de Carbono (CO)

Los estudios nacionales demuestran una relación estadísticamente significativa entre los niveles de CO en el ambiente y el aumento de muertes ante la presencia de este contaminante. Sin embargo, las referencias internacionales no son concluyentes al respecto.

En cuanto a los estudios de morbilidad, los informes nacionales notifican un aumento de tos, ronquera y ausentismo escolar en relación con incrementos del CO. La OMS, por su parte, reporta cuatro tipos de efectos en la salud producidos por la exposición al CO: cardiovasculares, neuroconductuales, fibrinólisis y perinatales. Con respecto a los efectos cardiovasculares, se demuestra que adultos jóvenes y saludables tienen una capacidad de esfuerzo reducida a partir de 5% de carboxihemoglobina (COHb) en la sangre y una menor relación entre tiempo de trabajo y agotamiento en el ejercicio a partir de 2,3% de COHb.

La acumulación de CO en la sangre es más rápida al comienzo de la exposición y se acerca asintóticamente a un equilibrio dependiendo del nivel de contaminante en el ambiente. Así por ejemplo, a un nivel de exposición de 100 ppm se tiene un nivel de equilibrio aproximado de 22% de COHb en la sangre para una exposición de 17 horas, en tanto que para una duración de exposición de 1 hora se tiene un nivel de COHb en la sangre de 4,1%, aproximadamente.

La Tabla 3 presenta los niveles normados de calidad ambiental para monóxido de carbono, actualmente vigentes en distintos países.

Tabla 3: Comparación de las Normas de Calidad del Aire para Monóxido de Carbono (CO).

PAIS	CO (g/m ³) ⁽¹⁾					
	15 min.	30 min.	1 h	8 h	24 h	Anual
Chile	-	-	40.000	10.000	-	-
Estados Unidos	-	-	40.000	10.000	-	-
Unión Europea	-	-	-	-	-	-
OMS ⁽²⁾	100.000	60.000	30.000	10.000	-	-
Suiza	-	-	-	-	8.000	-
Japón	-	-	-	22.222	11.111	-
Alemania	-	30.000	-	-	-	10.000

Nota: ⁽¹⁾ 1 mg/m³ = 0,873 ppm.

⁽²⁾ Los niveles sugeridos permiten que el grupo más sensible se mantenga con niveles de COHb en la sangre menores a 3,0%.

De la tabla anterior se desprende que las normas nacionales son razonables comparadas con las de otros países. La OMS advierte que si se toma como estándar de 1 h un valor de 40.000 g/m³ (caso de Chile), se deben tomar precauciones para que no se exceda el período de exposición, puesto que el nivel de COHb aumentaría sobre el umbral. Para ello se recomienda el uso de promedios móviles de 8 h, lo cual existe en la normativa nacional.

Por otra parte, sólo en Santiago se realizan mediciones continuas de este contaminante, desde el año 1990 a la fecha. Los niveles identificados se encuentran por sobre la norma horaria y de 8 horas, es así que en 1996 se declaró a la Región Metropolitana saturada por este contaminante.

La propuesta del estudio es mantener los niveles normados en la Resolución. Sin embargo, no se realizó una evaluación técnico-económica de la normativa propuesta. En cuanto a los valores que generan situaciones de emergencia ambiental, la Tabla 4 muestra una comparación entre los niveles que activan alertas y emergencias

ambientales por monóxido de carbono en algunos países y la propuesta entregada por el estudio de SGA.

Tabla 4: Comparación de los Niveles que generan Situaciones de Emergencia Ambiental por Exposición a Monóxido de Carbono.

PAIS	Nivel de Alerta	Nivel de Preemergencia	Nivel de Emergencia
Chile ⁽¹⁾	17.000	34.000	40.000
Estados Unidos ⁽¹⁾	17.000	34.000	46.000
Alemania ⁽²⁾	30.000	45.000	60.000

Nota: ⁽¹⁾ Concentración 8 horas (g/m³).

⁽²⁾ Concentración 3 horas (g/m³).

Ozono (O₃)

Numerosos estudios internacionales de adultos que practican ejercicios han demostrado disminuciones de la función pulmonar tanto para las exposiciones de 1-3 horas a niveles mayores o iguales a 240 g/m³ de O₃ como para las exposiciones de 6,6 horas a niveles mayores o iguales que 160 g/m³. Por su parte, los estudios epidemiológicos que han investigado las posibles asociaciones entre las exposiciones de largo plazo al O₃ y los efectos respiratorios crónicos en seres humanos hasta ahora sólo han entregado evidencia indicativa de tal relación, pero no han identificado niveles específicos a los cuales se produce una relación estadística significativa.

La Tabla 5 muestra un resumen comparativo entre los niveles de O₃ normados, actualmente, en Chile y países relevantes respecto a la temática ambiental.

Tabla 5: Comparación de las Normas de Calidad del Aire para Ozono (O₃).

PAIS	O ₃ (g/m ³)		
	30 min.	1 h	8 h
Chile	-	160	-
Estados Unidos	-	240	160
Unión Europea	-	-	-
OMS	-	-	120
Suiza	100	120	-
Japón	-	120	-
Alemania	120	-	-

En cuanto a las concentraciones de ozono en la calidad del aire a nivel nacional, sólo en la ciudad de Santiago se han realizado mediciones continuas desde el año 1992 a la fecha en la red MACAM. Los resultados del monitoreo indican que los valores establecidos en la Resolución son excedidos ampliamente en la Región Metropolitana.

Es por ello que en 1996 dicha región fuese declarada zona saturada también para este contaminante.

Por su parte, el criterio para el manejo de excedencias de la norma se muestra en la siguiente tabla. Se observa que Chile tiene sustancialmente los mismos niveles que los otros países que cuentan con este mecanismo.

Tabla 6: Comparación de los Niveles que generan Situaciones de Emergencia Ambiental por Exposición (g/m^3) a 1 h de Ozono.

PAIS	Nivel de Alerta	Nivel de Emergencia
Chile	470	1.090
Estados Unidos	400	1.000
Alemania	360	-
Japón	480	800

El estudio realizó una evaluación técnico-económica para niveles más restrictivos de la normativa horaria para el ozono (140 y 120 g/m^3). Adicionalmente, se evaluaron los escenarios de extender la norma de 1 hora a 8 horas, basado en que los estudios clínicos en seres humanos demuestran que los efectos preocupantes del O_3 están asociados con niveles de exposición de 240 , 200 y 160 g/m^3 por 6 y 8 horas. Los resultados de la evaluación indican que las alternativas de cumplir con normas más estrictas que la actual de 1 h en el año 2011 significa mayores costos que beneficios. Sin embargo, establecer normas de exposición a ozono de 8 horas genera un VPN positivo. Aún así, el estudio propone mantener sólo la norma horaria para el ozono, en el nivel actualmente normado por la Resolución.

Dióxido de Nitrógeno (NO_2)

Los estudios nacionales de mortalidad no mostraron efectos significativos para NO_2 . Sin embargo, establecieron un exceso de riesgo para consultas de urgencia infantil asociadas a este contaminante. Por su parte, los estudios internacionales indican evidencia de que una alta exposición al NO_2 (dentro del orden de 376 - 564 g/m^3), por un período corto de exposición, puede causar un aumento en la reactividad de las vías respiratorias en personas asmáticas.

En cuanto a las exposiciones de largo plazo al NO_2 , la OMS las asocia al aumento del riesgo de infecciones respiratorias en los niños. Estudios cuantitativos han examinado estos efectos referidos a concentraciones en interiores, que son elevadas en las casas con cocinas a gas, pero que no pueden extrapolarse directamente a las concentraciones en el exterior. Los efectos, sin embargo, son preocupantes porque las infecciones pulmonares repetidas en la infancia pueden provocar más tarde daños pulmonares.

En la Tabla 7 se muestran los niveles normados, actualmente, en Chile y otros países de relevancia ambiental.

Tabla 7: Comparación de las Normas de Calidad del Aire para Dióxido de Nitrógeno (NO₂).

PAIS	NO ₂ (g/m ³)			
	30 min.	1 h	24 h	Anual
Chile	-	-	-	100
Estados Unidos	-	-	-	100
Unión Europea	-	200	-	40
OMS	-	200	-	40
Suiza	100	-	80	30
Japón	-	-	80-120	-
Alemania	200	-	-	80

Como se desprende de la anterior tabla, el valor anual establecido en Chile, mediante la Resolución N°1.215, es superior al valor guía entregado por la OMS y normado en la Unión Europea y Suiza, pero es asimilable al estándar existente en Estados Unidos y Alemania. Por otra parte, existe la tendencia mundial a establecer niveles máximos permisibles para períodos más cortos de exposición, ya sea diarios, horarios o de 30 minutos. Sin embargo, ni Estados Unidos ni Chile han seguido esta tendencia.

Los niveles de calidad del aire para NO₂ han sido medidos, continuamente, en Santiago desde el año 1990 a la fecha a través de la red MACAM. Los valores indican que las concentraciones son regulares en general, encontrándose entre un 80% y un 100% de la norma, por lo cual en 1996 se declaró a la Región Metropolitana como zona latente por este contaminante.

La Tabla 8 presenta los valores máximos permisibles para exposición de NO₂, propuestos por el estudio de SGA.

Tabla 8: Valores de las Concentraciones y Períodos Permisibles Propuestos por el Estudio de SGA.

Concentración máxima permisible (g/m ³)	Período
400	1 h
100	Anual

El fundamento para esta proposición de norma es que existe evidencia médica y científica que indica la necesidad de restringir las exposiciones horarias a NO₂. Esta evidencia se ve ratificada en la tendencia mundial a normar las exposiciones de corto plazo para este contaminante. Sin embargo, el estudio no presenta un análisis técnico-

económico que sustente este criterio, así como el de mantener la norma anual en el nivel existente y no disminuirlo según las recomendaciones de la OMS, debido a que "no existen estudios nacionales ni internacionales que contengan información acerca de las funciones dosis-respuesta que permitan valorar los costos evitados en salud (beneficios)". Lo anterior, según lo establecido en el Artículo 15 del D.S. N°93/95, deberá ser resuelto de alguna manera, ya que este Reglamento exige una evaluación de los costos y beneficios para la población derivados del establecimiento de todos los estándares de calidad primario a nivel nacional.

Conclusiones

Sobre la base de lo establecido en el Título III, Párrafo 1°, del D.S. N°93/95 del MINSEGRES, el estudio "Antecedentes para la Revisión de las Normas de Calidad de Aire contenidas en la Res. N°1.215 del Ministerio de Salud, 1978", realizado por SGA, cumple con los siguientes requerimientos:

- (1) Describir la distribución del contaminante en el país, identificando el nivel actual, natural o antropogénico, existente en los respectivos medios;
- (2) Recopilar la información disponible acerca de los efectos adversos producidos por la exposición en la población, tanto desde el punto de vista epidemiológico como toxicológico del elemento en estudio;
- (3) Describir los efectos independientes, aditivos, acumulativos, sinérgicos o inhibidores de los elementos o compuestos;
- (4) Proponer, como normas primarias de calidad ambiental, valores de las concentraciones y períodos máximos o mínimos permisibles de elementos o compuestos;
- (5) Proponer valores críticos que determinen las situaciones de emergencia ambiental, el plazo para su entrada en vigencia y los organismos públicos con competencia para fiscalizar su cumplimiento;
- (6) Señalar las metodologías de medición y control de los parámetros normados;
- (7) Realizar una evaluación técnico-económica de las propuestas de norma para los siguientes contaminantes: PM10 (norma diaria y anual), SO₂ (norma horaria y anual) y ozono (norma horaria y de 8 horas).

En general, el estudio presenta una recopilación bastante completa, tanto a nivel nacional como internacional, sobre los efectos adversos en la salud de las personas de cada uno de los contaminantes contenidos en la Resolución N°1.215 y de los métodos de medición de cada uno de ellos en el ambiente. A su vez, presenta una compilación de las normativas actualmente vigentes en varios países (Estados Unidos, Unión Europea, Japón, Alemania, Suiza) y los valores guía entregados por la Organización

Mundial de la Salud, lo cual permite realizar una adecuada comparación entre los niveles y métodos normados en Chile con respecto a las tendencias mundiales.

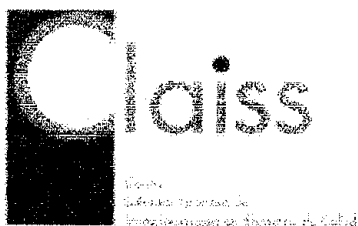
Adicionalmente, se identifican los niveles de cada contaminante en la calidad del aire en Chile, según las redes de monitoreo continuas existentes en el ámbito nacional así como sobre la base de monitoreos realizados por proyectos específicos. Cabe señalar que, en estos últimos casos, los métodos de medición no siempre han sido comparables a los establecidos por normativa y que en la mayoría de los casos se refieren sólo a ciertos puntos dentro de las localidades, lo cual no permite establecer conclusiones representativas de las ciudades como un todo.

La principal red de monitoreo que existe en Chile está constituida por las estaciones establecidas en Santiago, en forma permanente, a través de la Red de Monitoreo de Contaminantes Atmosféricos (Red MACAM) que dirige el Servicio de Salud Metropolitano del Ambiente. Sin embargo, como se sabe, la Región Metropolitana fue declarada Zona Saturada para las partículas totales en suspensión (PTS), material particulado respirable (PM10), monóxido de carbono (CO) y ozono (O₃); y Zona Latente para el dióxido de nitrógeno (NO₂). Por lo tanto, los antecedentes sobre la calidad del aire en Chile indican, en general, muy malas condiciones de exposición para la población, pero no permiten identificar adecuadamente zonas geográficas más sensibles que otras.

Finalmente, con respecto a las evaluaciones técnico-económicas realizadas en el estudio, es necesario efectuar un análisis más exhaustivo sobre los supuestos considerados y/o adoptados en la simplificación de algunos escenarios. En el informe entregado a CONAMA el mes de Agosto, se realizó una revisión más detallada sobre la evaluación efectuada para la norma diaria y anual de PM10. En ella, se identificaron algunos criterios de sustentación débiles, por lo que es probable que se encuentren ciertas inconsistencias también en las evaluaciones efectuadas para otros contaminantes.

Lo anterior, hace recomendable profundizar en cada una de las evaluaciones económicas establecidas en el estudio, necesarias para la fundamentación de las normas primarias de calidad ambiental, de manera que no se generen controversias sobre los reales costos y beneficios para la sociedad en su conjunto, y sobre la efectividad de las medidas consideradas, una vez que se presenten los respectivos anteproyectos.

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Santiago, Octubre 15 de 1999.

**Doctora
Patricia Matus
Jefe Departamento Planes y Normas
Comisión Nacional del Medio Ambiente
Presente**

Estimada Doctora Matus:

De acuerdo a lo solicitado en su fax N°995142, de fecha Octubre 13, adjunto encontrará un resumen conteniendo nuestra opinión en relación a los puntos de especial interés para CONAMA en relación al Estudio "Revisión de las Normas de Calidad de Aire Contenidas en la Resolución N°1215 del Ministerio de Salud".

Sin otro particular, saluda atentamente a usted,



Fernando Muñoz Porras
Director

ANALISIS DE LA CONSISTENCIA DE LOS ANTECEDENTES PARA LA REVISION DE LAS NORMAS DE CALIDAD DE AIRE CONTENIDAS EN LA RESOLUCION N°1.215/78 DEL MINISTERIO DE SALUD

Este análisis se basa en el estudio del informe final "Antecedentes para la Revisión de las Normas de Calidad de Aire contenidas en la Res. N°1.215 del Ministerio de Salud, 1978", elaborado por la Consultora Sociedad de Gestión Ambiental Ltda. (S.G.A.) en 1998 para la Comisión Nacional del Medio Ambiente.

1. Niveles de Concentración Máxima Permisible y Período

a. PM10

De acuerdo a la evidencia de los estudios nacionales sobre el efecto de las partículas en suspensión sobre la salud de las personas, se pudo ratificar el hecho de que las normas primarias para material particulado deben expresarse en términos de PM10 y PM2,5 ya que éstas son las fracciones que presentan riesgos a la salud humana y a la que apuntan los estudios epidemiológicos nacionales positivos. Por su parte, los resultados de los estudios internacionales conducen a conclusiones similares a las anteriormente expuestas, entregando mayores antecedentes relativos a los efectos crónicos derivados de la exposición prolongada a partículas en suspensión. En efecto, estudios de cohorte realizados en Estados Unidos mostraron una asociación significativa entre niveles de PM10 y PM2,5 con aumentos en la mortalidad total. A su vez, que estudios prospectivos de morbilidad por exposición crónica, indicaron que existía una relación entre contaminación por PM10 y disminución de la función pulmonar, así como una fuerte relación con bronquitis crónica y tos. Todo lo anterior, sustenta en forma favorable incorporar en la norma primaria para material particulado respirable una restricción de concentración anual de PM10, que conduzca a proteger de efectos respiratorios crónicos a la población.

En cuanto a los niveles establecidos, parecen adecuados en comparación con las concentraciones reguladas a nivel internacional. Sin embargo, es importante señalar que no se ha determinado un nivel umbral de efectos en la salud humana para este contaminante. Por lo tanto, los niveles de exposición permisibles deben estar relacionados a un adecuado análisis costo-beneficio que lo sustente.

b. SO₂

Los niveles de concentración máxima permisible propuestos en el estudio antes referido parecen adecuados en base a los niveles umbrales determinados por la OMS para exposiciones combinadas de dióxido de azufre y material particulado. Así también, se adecuan a la experiencia internacional conducente a regulaciones más estrictas en cuanto a las concentraciones ambientales diarias de SO₂.

c. CO

Considerando estudios nacionales de mortalidad y estudios internacionales de morbilidad, así como la normativa internacional existente para este contaminante, se desprende que las normas nacionales establecidas en la Resolución N°1.215 son razonables. En efecto, la OMS advierte que si se toma como estándar de 1 h un valor de 40.000 g/m³ (caso de Chile), se deben tomar precauciones para que no se exceda el período de exposición, puesto que el nivel de COHb aumentaría sobre el umbral; para ello recomienda el uso de promedios móviles de 8 h, lo cual existe en la normativa nacional.

Por lo tanto, parece adecuado la mantención de los niveles de concentración máxima permisible y períodos establecidos para este contaminante en la Resolución N°1.215.

d. O₃

En base a los estudios internacionales y a la comparación con la normativa internacional existente, parece adecuado mantener a lo menos el nivel actualmente establecido en la Resolución N°1.215. Sin embargo, en base a estudios de costo-beneficio más exhaustivos, sería posible justificar niveles de concentración más conservadores y/o períodos adicionales de regulación (tales como promedios móviles de 8 horas).

e. NO₂

El valor anual establecido en Chile mediante la Resolución N°1.215, y propuesto para ser mantenido en el estudio antes referido, es superior al valor guía entregado por la OMS. Este último valor se basa en estudios epidemiológicos de riesgo incrementado de enfermedades respiratorias en niños. Adicionalmente, el estudio de SGA no realiza una evaluación costo-beneficio que sustente la mantención de la actual normativa, pudiendo existir beneficios netos mayores al hacerla más restrictiva. Todo lo anterior, se traduce en que la propuesta para mantener los niveles de concentración anual, actualmente permisibles para NO₂, encuentre débil fundamento en el estudio del consultor.

Por otra parte, existe la tendencia mundial a establecer niveles máximos permisibles para períodos de exposición aguda, ya sea diarios, horarios o de 30 minutos. Es por ello que se considera adecuado el establecer un lineamiento horario para este contaminante. Sin embargo, el nivel propuesto por el consultor aparece bastante elevado en comparación con las normativas internacionales y, por lo mismo, presenta las mismas deficiencias de sustentación que en el caso de la norma anual.

2. Niveles de Concentración de Emergencia

a. PM10

Los valores de emergencia propuestos son consistentes con los niveles existentes y con la evaluación económica que sustenta el D.S. N°59/98 para PM10.

b. SO₂

Los nuevos valores de emergencia para contaminación por SO₂ no se encuentran bien fundamentados en el estudio de soporte. Se hace referencia a una evaluación económica que no se encuentra claramente identificada. Adicionalmente, se señala que “se establecen los siguientes valores de emergencia para exposición diaria a SO₂” y, posteriormente, la tabla indica “concentración horaria g / m³” (ver página 5-53 del estudio). Por lo anterior, no es posible sostener una opinión seria a este respecto.

c. CO

Los niveles de concentración de emergencia propuestos para la contaminación por CO no se encuentran suficientemente justificados en el estudio del consultor. La frase asociada al fundamento se encuentra inconclusa en la página 6-28 del estudio de soporte. Sin embargo, los valores establecidos son consistentes con los niveles determinados en la Resolución Exenta N°369/88 del SESMA y con las concentraciones decretadas internacionalmente.

d. O₃

Los niveles de concentración de emergencia propuestos en el estudio del consultor, parecen adecuados en base a los niveles establecidos en la Resolución Exenta N°369/88 del SESMA y a los niveles establecidos internacionalmente.

e. NO₂

Los niveles de concentración de emergencia propuestos en el estudio del consultor, parecen adecuados en base a los niveles establecidos en la Resolución Exenta N°369/88 del SESMA y a los niveles establecidos internacionalmente.

3. Procedimientos de Medición

En general, los procedimientos de medición establecidos en la normativa vigente para todos los contaminantes atmosféricos se corresponden a los permitidos y utilizados a nivel mundial. De esta forma, parece adecuada la propuesta del consultor para mantener, básicamente, las actuales tecnologías de medición.

4. Cumplimiento y Condiciones de Superación de las Normas

Parece adecuada la propuesta de establecer el método de los percentiles (que el percentil 98 de las mediciones se encuentre bajo los niveles normados) para establecer el cumplimiento y las condiciones de superación de norma para los niveles diarios, horarios y promedios móviles de 8 horas de los diferentes contaminantes, según corresponda.

5. Entrada en Vigencia de las Normas Propuestas

Parecen consistentes las fechas de entrada en vigencia propuestas, dado los niveles de concentración máxima permisibles establecidos para los distintos contaminantes, con excepción del plazo de cumplimiento para el nuevo criterio anual de SO₂. En este

último caso, se debiera analizar con mayor detalle la costo-eficiencia de su aplicación en el plazo establecido (1 de Enero del año 2000), dada la conocida existencia de localidades en las cuales no se cumplirán los nuevos estándares planteados.

6. Justificación de la Propuesta desde el Punto de Vista de los Efectos en Salud, los Costos y Beneficios asociados a su Aplicación

En general, el estudio del consultor presenta una recopilación bastante completa, tanto a nivel nacional como internacional, sobre los efectos adversos en la salud de las personas de cada uno de los contaminantes contenidos en la Resolución N°1.215. A su vez, presenta una compilación de las normativas actualmente vigentes en varios países (Estados Unidos, Unión Europea, Japón, Alemania, Suiza) y los valores guía entregados por la Organización Mundial de la Salud, lo cual permite realizar una adecuada comparación entre los niveles normados en Chile con respecto a las tendencias mundiales.

Con respecto a las evaluaciones de costo-beneficio realizadas por el consultor, se considera necesario efectuar un análisis más exhaustivo sobre los supuestos considerados y/o adoptados en la simplificación de algunos escenarios. En el informe entregado a CONAMA el mes de Agosto, se realizó una revisión más detallada sobre la evaluación costo-beneficio efectuada para la norma diaria y anual de PM10. En ella, se identificaron algunos criterios de sustentación débiles, por lo que es probable que se encuentren ciertas inconsistencias también en las evaluaciones efectuadas para otros contaminantes. Los principales problemas detectados en la evaluación técnico-económica de la normativa propuesta para PM10 fueron los siguientes:

- Es dudoso pensar que la reducción de emisiones establecidas en cada uno de los escenarios para la alternativa N°1 del estudio de soporte (50%, 60% y 70% de reducción en las emisiones, sin considerar el polvo resuspendido) sean realmente efectivas en la reducción de concentraciones ambientales de PM10 y permitan alcanzar los niveles de calidad del aire normados. Esto se debe, principalmente, a la participación del polvo resuspendido dentro de las emisiones totales y a su importancia en la calidad ambiental. Hay que tener presente que las emisiones debidas al polvo resuspendido comprenden alrededor de un 80% de las emisiones totales de PM10 (según el Inventario de Emisiones de 1997 y la Proyección de Emisiones para el año 2005 del PPDA) y representan entre un 25 y 35% de la concentración ambiental de PM10 en la Región Metropolitana. De esta forma, la alternativa N°1 del estudio se hace poco sustentable, puesto que los costos determinados no se relacionan con los beneficios establecidos.
- La alternativa N°2 del estudio de soporte consideró el valor presente del costo medio de remoción de 1 ton de PM10 utilizando medidas de reducción de emisiones que tampoco comprendieron las acciones de disminución del polvo resuspendido, tales como programa de lavado de calles, programa de pavimentación, programas de

forestación y áreas verdes, etc. De esta manera, también es posible cuestionar la efectividad real de esta alternativa en la reducción de concentraciones ambientales de PM10, para todos los escenarios evaluados. Al ser necesario incluir la evaluación de estas medidas, para lograr la reducción meta de emisiones, sería recomendable realizar nuevamente el análisis costo-beneficio, ya que los beneficios evaluados también se relacionan con los costos asociados a estas medidas.

- En cuanto a este último punto, es necesario mencionar que existen ciertas medidas de planificación que ayudan a disminuir el polvo resuspendido y que son difíciles de evaluar, tales como el desincentivo al uso del automóvil, ordenamiento territorial, promoción y protección de la forestación y áreas verdes, etc. Por lo tanto es muy importante tener especial cuidado en definir con cuáles medidas es suficiente lograr la reducción de emisiones requeridas, considerando todas las actividades que se realizan y aquellas que no es posible evaluarlas.

Todo lo anterior, hace recomendable profundizar en cada una de las evaluaciones económicas establecidas en el estudio, necesarias para la fundamentación de las normas primarias de calidad ambiental, de manera que no se generen controversias sobre los reales costos y beneficios para la sociedad en su conjunto, y sobre la efectividad de las medidas consideradas, una vez que se presenten los respectivos anteproyectos.

GUIDELINES FOR AIR QUALITY

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This WHO document on the *Guidelines for Air Quality* is the outcome of the WHO Expert Task Force meeting held in Geneva, Switzerland, in December 1997. It bases on the document entitled "Air Quality Guidelines for Europe" that was prepared by the WHO Regional Office for Europe and regional background papers.

Note to the user:

The electronic form of this document is available on the CD ROM of the Healthy Cities Air Management Information System AMIS and, in part, from the Web site of the World Health Organization (<http://www.who.int/>).



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The authors alone are responsible for the views expressed in this document.

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Foreword

Achievements in air quality management underlie increased economic and social welfare in many developing countries. Sound air quality management is also a proven way of enhancing public health, since air pollution is associated with increases in outpatient visits due to respiratory and cardiovascular diseases, in hospital admissions and in daily mortality. Recent estimates of the increase in daily mortality show that on a global scale 4-8% of premature deaths are due to exposure to particulate matter in the ambient and indoor environment. Moreover, around 20-30% of all respiratory diseases appear to be caused by ambient and indoor air pollution, with emphasis on the latter. It is suggested that without clean air, a sound economic development becomes virtually impossible and social conflicts inevitable.

Although enormous progress has been made in developing clean air implementation plans for urban areas, especially in developed countries, a substantial number of people living in urban areas - around 1.5 billion, or 25 per cent of the global population - are still exposed to enhanced concentrations of gaseous and particle compounds in the air they breathe. And the use of open fires for indoor cooking and heating currently exposes about 2 billion people to quite substantial concentrations of suspended particulate matter, 10-20 times higher than ambient concentrations according to the limited measurements available.

Other sources of air pollution include industrial and vehicular emissions, as well as vegetation fires. Furthermore, the rate of population growth continues to increase and is likely to peak around the year 2000, leading to a doubling of the global population by the middle of the 21st century. Most population growth will occur in low-income countries and will stress already inadequate infrastructures and technical and financial capacities. In parallel, the process of urbanisation will continue, such that the proportion of the global population living in cities will increase from around 45% to around 62% by the year 2025, creating dense centres of anthropogenic emissions.

The primary aim of the WHO *Guidelines for Air Quality* is to protect public health from the effects of air pollution, and to eliminate or minimize exposure to hazardous pollutants. Air quality guidelines are set up to help governments derive legally enforceable air quality standards, and to guide the environmental health authorities and professionals who are trying to protect people from the harmful effects of environmental air pollution.

Agenda 21 states in Chapter 6 on human health and environmental pollution:

Nationally determined action programmes in this area, with international assistance, support and coordination where necessary, should include:

(a) *Urban air pollution:*

(i) *Develop appropriate pollution control technology on the basis of risk assessment and epidemiological research for the introduction of environmentally sound production processes and suitable safe mass transport.*

(ii) *Develop air pollution control capacities in large cities, emphasizing enforcement programmes and using monitoring networks, as appropriate.*

(b) *Indoor air pollution:*

(i) *Support research and develop programmes for applying prevention and control methods to reducing indoor air pollution, including the provision of economic incentives for the installation of appropriate technology.*

(ii) *Develop and implement health education campaigns, particularly in developing countries, to reduce the health impact of domestic use of biomass and coal.*

The WHO *Guidelines for Air Quality* should help to greatly reduce the burden of excess mortality and preventable disability suffered by the poor. It should also help counter potential health threats resulting from economic crises, unhealthy environments and risky behaviour. In this sense, the *Guidelines* contribute to meeting two of the key challenges that were highlighted in the 1999 World Health Report and, thus, they contribute to making health a fundamental human right.

Dr Richard Helmer
Director, Department for Protection of the Environment

Preface

The risks posed to human health by air pollution have been evaluated since the 1950s and guideline values were derived in 1958. In 1987, the WHO Regional Office for Europe EURO published the *Air Quality Guidelines for Europe*. Since 1993, these guidelines have been revised and updated. In a recent Expert Task Force Meeting convened in December 1997 in Geneva, Switzerland, the Guidelines for Air Quality was extended to provide global coverage and applicability, and the issues of air quality assessment and control were addressed in more detail.

The WHO *Guidelines for Air Quality* document is the outcome of the consensus deliberations of the WHO Expert Task Force.

The WHO *Guidelines for Air Quality* provides a basis for protecting public health from the adverse effects of environmental pollutants and for eliminating, or reducing to a minimum, contaminants that are known or likely hazards to human health and well-being. The *Guidelines* does so by providing background information and guidance to governments for making risk management decisions, particularly in setting standards. It also helps governments carry out local air quality control measures.

The WHO *Guidelines for Air Quality* values are levels of air pollution below which lifetime exposure, or exposure for a given averaging time, does not constitute a significant health risk. If these limits are exceeded in the short-term it does not mean that adverse effects automatically occur; however the risk of such effects increases. Although the *Guidelines for Air Quality* values are health- or environment-based levels, they are not standards *per se*. Air quality standards are air quality guidelines promulgated by governments, for which additional factors may be considered. For example, the prevailing exposure levels, the natural background contamination, environmental conditions such as temperature, humidity and altitude, and socio-economic factors.

When proceeding from the *Guidelines for Air Quality* to standards, policy options include such questions as what proportion of the general population, and which susceptible groups, should be protected. Several additional items must also be considered: the legal aspects; a definition of what constitutes adverse effects; a description of the population at risk; the exposure-response relationship; the characterisation of exposure; an assessment of risks and their acceptability; and the financial costs of air pollution controls and their benefits.

The *Air Quality Guideline* has been prepared as a practical response to the need for action with respect to air pollution at the local level, and for improved legislation, management and guidance at the national and regional levels. WHO will be pleased to see that these *Guidelines* are used widely. Continuing efforts will be made to improve its content and structure. It would be appreciated if users of the *Guidelines* would provide feedback and their own experiences. Please send your comments and suggestions on the WHO *Guidelines for Air Quality – Guideline document* directly to the Department of Protection of the Human Environment, Occupational and Environmental Health, World Health Organization, Geneva, Switzerland (Fax: +41 22-791 4123, e-mail: schwelad@who.int).

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Executive Summary

Introduction

Air pollution is a major environmental health problem, affecting developed and developing countries around the world. Increasing amounts of potentially harmful gases and particles are being emitted into the atmosphere on a global scale, resulting in damage to human health and the environment. It is damaging the resources needed for the long-term sustainable development of the planet.

There are three broad sources of air pollution from human activities: Stationary sources, Mobile sources, and Indoor sources. In developing countries, indoor air pollution from using open fires for cooking and heating may be a serious problem. It has been estimated that about 1.9 million people die annually due to exposure to high concentrations of suspended particulate matter in the indoor air environment, while the excess mortality due to suspended particulate matter and sulphur dioxide in the ambient air amounts to about 500 000 people annually. Although the indoor air database is weak due to the scarcity of monitoring results, these estimates indicate that a serious indoor air problem may exist in developing countries.

Air pollutants are usually classified into suspended particulate matter (dusts, fumes, mists, smokes), gaseous pollutants (gases and vapours) and odours. Current techniques used to measure the mass concentration of particles in air make use of size-specific sampling devices. Thus the mass of particles less than 10 μm diameter may be determined (PM_{10}) as an index of the mass concentration of particles that can penetrate into the human thorax. The mass concentration of particles of less than 2.5 μm diameter ($\text{PM}_{2.5}$) is a means of measuring the total gravimetric concentration of several chemically distinct classes of particles that are emitted into, or formed within, the ambient air as very small particles.

Fine and coarse particles generally have distinct sources and formation mechanisms, although there may be some overlap. Biological material such as bacteria, pollen and spores may also be found in the coarse mode.

Fine and coarse particles typically exhibit different behaviour in the atmosphere and these differences must be taken into consideration when interpreting central-site monitored values, as well as the behaviour of particles after they penetrate homes and buildings, where people spend most of their time. Fine accumulation-mode particles typically have longer atmospheric lifetimes (days to weeks) than coarse particles, and tend to be more uniformly dispersed across an urban area or large geographic region. Larger particles generally deposit more rapidly than small particles; as a result, total coarse particle mass is less uniform in concentration across a region than that of fine particles.

This publication is focused on those gases and particulate matter that have been accepted as posing a threat to health. The relative health threat of different pollutant gases and particles varies with their concentrations over time and distance, implying that the effects of air pollutants on health may vary from country-to-country.

Consequently, careful monitoring of the concentrations of polluting gases, as well as of the particle size distribution, concentration and composition, is needed before an acceptable estimate of the effects can be produced. The picture is further complicated because some pollutant combinations act in an additive manner and some perhaps synergistically.

WHO's air quality guidelines were first published as *Air Quality Guidelines for Europe* in 1987 (WHO 1987). Since 1993 the *Air Quality Guidelines for Europe* has been revised and updated, incorporating a review of the literature published since 1987 (WHO 1999a). Also, the following additional compounds were considered in the review procedure: 1,3 butadiene, environmental tobacco smoke (ETS), fluoride, man-made vitreous fibres and platinum. Parallel to the review of the air quality guidelines for Europe, the Environmental Health Criteria series of the International Programme on Chemical Safety has

continued and the health risks of more than 120 chemical compound and mixtures were assessed between 1987 and 1998.

The WHO *Air Quality Guidelines for Europe* (WHO 1987) were based on evidence from the epidemiological and toxicological literature published in Europe and North America. They did not consider the effects of exposure to the different ambient air particle concentrations in developing countries, as well as the different conditions in these countries. However, these guidelines were used intensively throughout the world. In view of the different conditions in developing countries, the literal application of the WHO *Air Quality Guidelines for Europe* could be misleading. Factors such as high and low temperature, humidity, altitude, background concentrations and nutritional status could influence the health outcomes after the population has been exposed to air pollution. To make the WHO *Air Quality Guidelines for Europe* globally applicable, a task force group meeting was convened at WHO Headquarters from 2-5 December 1997. The outcome of that meeting is this publication of globally applicable air quality guidelines.

The objective of WHO's *Guidelines For Air Quality* is to help countries derive their own national air quality standards. The guidelines are technologically feasible and consider socio-economic and cultural constraints. They provide a basis for protecting public health from the adverse effects of air pollution and for eliminating, or reducing to a minimum, those air pollutants that are likely hazardous to human health. Consequently, the instruments of air quality management are also addressed in this publication.

2. Factors affecting the concentrations of air pollutants

Local concentrations of air pollutants depend upon the strength of their sources and the efficiency of their dispersion. Day to day variations in concentrations are more affected by meteorological conditions than by changes in source strengths. Wind is of key importance in dispersing air pollutants and for ground level sources pollutant concentrations are inversely related to wind speed. Turbulence is also important: a "rough" terrain, as produced for example by buildings, tends to lead to increased turbulence and better dispersion of pollutants.

3. Exposure to air pollutants

The total daily exposure of an individual to air pollution is the sum of the separate contacts to air pollution experienced by that individual as he/she passes through a series of environments (also called micro-environments) during the course of the day (e.g. at home, while commuting, in the streets, etc.). Exposures in each of these environments can be estimated as the product of the concentration of the pollutant in question and the time spent in the environment.

There are many factors that can account for the substantial differences between the concentrations of pollutants measured at central sites and those in the breathing zone of residents of the community. Many of these factors can be modelled and such models have been used for estimating dose distributions associated with ambient air concentrations.

4. Health significance of air pollution

A new database of epidemiological studies emerged in the late 1980s and 1990s. This database of time-series studies was developed first in the United States and later in Europe and other areas. In essence the time series approach takes the day as the unit of analysis and relates the daily occurrence of events such as deaths or admissions to hospital to daily average concentrations of pollutants whilst taking careful account of confounding factors such as season, temperature and day of the week. Powerful statistical techniques have been applied and coefficients have been produced that relate the daily average concentrations of pollutants to their effects. Associations have been demonstrated between daily average concentrations of particles, ozone, sulphur dioxide, airborne acidity, nitrogen dioxide, and carbon monoxide. Although the associations

for each of these pollutants were not significant in all studies, taking the body of evidence as a whole the consistency is striking. For particles and ozone it has been accepted by many that the studies provide no indication of any threshold of effect.

5. Air pollutant concentrations and factors affecting susceptibility

The concentrations of classical pollutants in ambient air of European countries and of the United States have been extensively discussed in the *Air Quality Guidelines for Europe* (WHO 1999a). In developing countries, by contrast, the concentrations of pollution levels in ambient air are higher by an order of magnitude, according to the main source of information on air pollution in developing countries, the Air Management Information System (AMIS).

Indoor air pollutants usually differ in type and concentration from outdoor air pollutants. Indoor pollutants include environmental tobacco smoke, biological particles, non-biological particles, volatile organic compounds, nitrogen oxides, lead, radon, carbon monoxide, asbestos, various synthetic chemicals and others. Degradation of indoor air quality has been associated with a range of health effects, from discomfort and irritation to chronic pathologies and cancers.

On a global scale, biomass fuels are used daily in about half the world's households as energy for cooking and/or heating. Biomass smoke contains significant amounts of several important pollutants: carbon monoxide, particulate matter, hydrocarbons and to a lesser extent, nitrogen oxides. However, biomass smoke also contains many organic compounds, including PAH that are thought to be toxic, carcinogenic, mutagenic or otherwise of concern. In China, coal burning is a major source of indoor air pollution and coal smoke contains all of these pollutants as well as additional ones, e.g. sulphur oxides and heavy metals such as lead.

An unknown, but significant, proportion of biomass fuel burning takes place in conditions where much of the air-borne effluent is released into poorly ventilated living areas. Therefore, some of the highest concentrations of particulate matter and other pollutants occur in rural, indoor environments in developing countries. Due to the high pollutant concentrations and the large populations involved, the total human exposure to many important air pollutants can be much higher in homes of the poor in developing countries than in the outdoor air of cities in the developed world.

Altitude, temperature and humidity vary significantly across the globe. At increased altitude the partial pressure of oxygen falls and inhalation increases in compensation. For particles, this increased inhalation will lead to an increased intake of airborne particles. On the other hand, for gaseous pollutants no increase in effects over those experienced at sea level would be expected. Temperature has a very significant effect on health, whereas humidity is unlikely to have a significant effect on the toxicity of gaseous pollutants.

The age structure of populations differs markedly from country to country. Old people tend to show increased susceptibility to air pollution. Very young children may also be at increased risk. People with a poor standard of living suffer from nutritional deficiencies, infectious disease due to poor sanitation and overcrowding, and tend to be provided with a poor standard of medical care. Each of these factors may render individuals more susceptible to the effects of air pollution. Diseases which produce narrowing of the airways, a reduction in the area of the gas-exchange surface of the lung and an increased alteration of inhalation-perfusion ratios are likely to make the subject more susceptible to the effects of a range of air pollutants.

6. Role of guidelines and standards

The purpose of the *Guidelines for Air Quality* is to provide a basis for protecting public health from adverse effects of air pollution and for eliminating, or reducing to a minimum, those contaminants that are known to be, or likely to be, hazardous to human health and well being. The *Guidelines* should provide background information for nations engaged in setting air quality standards, although their use is not restricted to this. These *Guidelines* are not intended as standards. In moving from guidelines to standards, prevailing exposure levels and environmental, social, economic and cultural conditions in a nation or region should be taken into account. In certain circumstances there may be valid reasons to pursue policies which will result in pollutant concentrations above or below the guideline values.

In the updated version of the Air Quality Guidelines for Europe, a similar approach to that in the 1987 air quality guidelines was used. However, total tolerable intakes were calculated for multimedia pollutants first, and then adequately partitioned among the different exposure routes. The term "protection factor" used in the 1987 guidelines was abandoned. Instead, uncertainty factors were used to account for the extrapolation from animal to man (alternatively, human equivalent concentrations were calculated), and to account for individual variability. Wherever information on inter- and intraspecies differences in pharmacokinetics was available, data-derived uncertainty factors were employed. Additional uncertainty factors were applied whenever necessary to account for the nature and severity of the observed effects and for the adequacy of the database. For most of the compounds considered, information on the dose/exposure response relationship was provided, to give policymakers clear guidelines on the possible impact of the pollutant at different exposure levels and to permit an informed decision making process to take place. For some compounds, e.g. platinum, a guideline value was considered unnecessary as exposure through ambient air levels was considerably below the lowest level at which effects were seen. For other compounds, for example particulate matter (PM₁₀), no threshold of effect(s) could be found and therefore no guideline value could be derived. Instead, exposure-effect information highlighting the public health impact of different pollutant levels was provided.

In the updating process for carcinogens, a more flexible approach than in the 1987 air quality guidelines was applied. As a default approach, low-dose risk extrapolation was conducted for the IARC groups 1 (proven human carcinogen) and 2A (probable human carcinogen, limited evidence), and an uncertainty factor was applied for agents in IARC groups 2B (probable human carcinogen, inadequate evidence) and 3 (unclassified chemicals). However, the mechanism of action of the carcinogen was the determining factor for the method of assessment. Hence, it was decided that compounds classified under 1 or 2A could be assessed using uncertainty factors, if evidence for a non-threshold mechanism of carcinogenicity existed. By way of contrast, compounds classified under 2B could be assessed by low-dose extrapolation methods, if a non-threshold mechanism of carcinogenicity in animals was proven. Flexibility was also given in the choice of the extrapolation model, depending on the available data (including data for PBPK modelling). The linearized multistage model was used as a default approach. Besides providing unit risk estimates in cases where low dose risk extrapolation was conducted, levels associated with excess cancer risk of 1 : 10000, 1 : 100 000 and 1 : 1000 000 were calculated.

7. Exposure-response relationships

These guidelines place some emphasis on epidemiological data. Epidemiological studies are sometimes preferable to controlled exposure studies in that they provide information on responses in populations and on the effects of real exposures to pollutants and pollutant mixtures. However, the results of epidemiological studies are less easy to use than the results of controlled exposure studies in defining guidelines.

For both particles and ozone an assumption of linearity was made when defining the exposure-response relationships included in the revised guidelines. Extrapolation beyond the available data is dangerous;

however, as there is evidence to suggest that the exposure-response relationship may become less steep as ambient levels of particles rise. For ozone, the relationship at low concentrations may be concave upwards. These are important points to be considered if the guidelines are to be used in countries with levels of pollution different from the range covered by the guidelines.

8. Moving from guidelines to standards

An air quality standard is a description of a level of air quality, adopted by a regulatory authority as enforceable. At its simplest, an air quality standard should be defined in terms of one or more concentrations and averaging times. Further information on the form of exposure (e.g. outdoor), on monitoring to assess compliance with the standard, and on methods of data analysis and Quality Assurance and Quality Control requirements should be added. Other factors to be considered in setting an air quality standard include the nature of the pollution effects and whether they represent adverse health effects; and whether special populations are at risk.

The development of air quality standards is only a part of an adequate air quality management strategy. Legislation, identification of authorities responsible for enforcement of emission standards and penalties for exceeding standards are also necessary. Emission standards may play an important role in the management strategy especially if exceeding air quality standards is used as a trigger for abatement measures. These may be needed at both the national and the local level. Air quality standards are also important in informing the public about air quality. Used in this way they are a double edged weapon as the public commonly assumes that once a standard is exceeded adverse effects on health will occur. This may not be the case.

The transfer of the dose-response relationships to other parts of the world, especially for particulate matter, should be conducted with caution for several reasons. These include:

1. The chemical composition of the particles.
2. The concentration range.
3. The responsiveness of the population.
4. The limitations of the established relationships.

9. Cost-benefit analysis and other factors

Cost-benefit analysis is one way of formally weighing the costs of reducing air pollution against the benefits produced. The concept is that emissions are reduced until the marginal costs and benefits are equal. While the cost of abatement measures may be relatively easy to quantify, this may not be the case when non-technical measures are employed. In any case, it is likely to be more difficult to assign monetary values to the benefits obtained. Some aspects of reduced morbidity, such as the reduced use of hospital facilities and drugs are comparatively easy to cost; others, such as reductions in premature deaths and symptoms, are not. Applying monetary values based on a "willingness to pay" basis has been suggested, and has been accepted as appropriate by many health economists. This approach has been seen as preferable to one based only on such indices as loss of production, earnings or hospital expenses.

Factors other than monetary factors also need to be considered when considering the setting of national air quality standards. These include the technical capacity of a country to achieve and maintain an air quality within the desired standards, the social implications of adopting certain standards to ensure equity of costs and benefits among the population, and environmental costs and benefits.

10. Health-based Guidelines

For the purpose of presenting the health-based air quality guidelines, the key air pollutants, also termed "classical" air pollutants - SO₂, NO₂, CO, O₃, SPM, and lead are briefly described with respect to health risk evaluations and recommended guideline values. Particular emphasis is given to suspended particulate

matter <10 µm diameter (PM₁₀) and < 2.5 µm diameter (PM_{2.5}). The guidelines are presented in Chapter 3 in tables 3.1 to 3.5 and in figures 3.1 to 3.9. The information available for a number of other air pollutants (including carcinogens and non-carcinogens) is also summarized and presented in synoptic tables.

11. Classical air pollutants: applicability of WHO Air Quality Guidelines for Europe on a world wide scale

In the derivation of the *WHO Air Quality Guidelines for Europe*, assumptions were made for some compounds, which may not be applicable in some parts of the world. For example, the importance of different routes of exposure for some pollutants may vary from country to country. It should be understood that if such factors were to be taken into account then different guidelines could be derived. For a number of pollutants a Unit Risk (UR) assessment has been provided. These assessments are also dependent upon considerations of the comparative importance of different routes of exposure.

It is important that regulatory authorities should evaluate whether local circumstances give cause to doubt the validity of the guideline set out in the *WHO Guidelines for Air Quality* as a basis for setting local guidelines or standards.

12. Indoor Air Quality

Indoor spaces are important microenvironments when assessing risks from air pollution. For many air pollutants most of the daily exposure by inhalation occurs indoors because of the amount of time spent indoors or because of the pollutant concentration levels encountered. The air quality inside buildings is affected by many factors. In an effort to conserve energy, modern building design has favoured tighter structures with lower rates of ventilation. By contrast, in some areas of the world, natural ventilation only is used; in others, mechanical ventilation is common. In modern buildings most of the pollution problems arise from low ventilation rates and the presence of products and materials that emit a large variety of compounds, whereas the inhabitants of many less developed countries face problems related to pollutants generated by human activities, in particular by combustion processes.

If only the health effects of air pollution are being considered, it does not matter if a pollutant is inhaled by breathing outdoor or indoor air. However, there are important differences in the composition of pollutant mixtures in outdoor and indoor air. For example, in outdoor air there are traffic-generated emissions, whereas indoor air pollution is generated from tobacco smoke or from cooking with biomass-fuelled stoves. Not all of these compositions have been taken into account in developing the *Guidelines for Air Quality*, and they may not be applicable under all circumstances, so care should be taken to avoid misinterpretation.

13. Ambient Air Quality Monitoring and Assessment

The three main air quality assessment tools are: i) ambient monitoring; ii) models and iii) emission inventories/measurement.

The ultimate purpose of monitoring is not merely to collect data, but to provide the necessary information required by scientists, policy makers and planners to enable them to make informed decisions on managing and improving the environment. Monitoring fulfils a central role in this process, providing the necessary scientific basis for policy and strategy development, objective setting, compliance measurement against targets and enforcement action. However, the limitations of monitoring should be recognised. No monitoring programme, however well funded and designed, can hope to comprehensively quantify

patterns of air pollution in both space and time. In many circumstances, measurements alone may be insufficient or impractical for the purpose of fully defining population exposure in a city or country. Monitoring therefore often needs to be used in conjunction with other objective assessment techniques, including modelling, emission measurement and inventories, interpolation and mapping. At best, monitoring provides an incomplete, but useful, picture of current environmental quality.

Reliance on modelling alone also is not recommended. Although models can provide a powerful tool for interpolation, prediction, and optimisation of control strategies, they are effectively useless unless properly validated by real-world monitoring data. It is important, also, that the models utilised are appropriate to local conditions, sources and topography, as well as being selected for compatibility with available emission and meteorological datasets. Many models depend on the availability of reliable emission data.

A complete emissions inventory for a city or country may need to include emissions from point, area and mobile sources. In some circumstances, assessment of pollutants transported into the area under study may also need to be considered. Inventories will, for the most part, be estimated using emission factors appropriate to the various source sectors (verified by measurement), and used in conjunction with surrogate statistics such as population density, fuel use, vehicle kilometres or industrial throughput. Emission measurements will usually only be available for large industrial point sources or from representative vehicle types under standardised driving conditions.

All three assessment tools are interdependent in scope and application. Accordingly, monitoring, modelling and emission assessments should be regarded as complementary components in any integrated approach to exposure assessment or in determining compliance with air quality criteria.

14. Ambient Air Quality Management

Some basic principles guide international and national policies for the management of all forms of air pollution. An important global initiative occurred in 1983 when the UN General Assembly established the World Commission on Environment and Development, headed by Gro Harlem Brundtland. The report produced by the Commission was entitled *Our Common Future* and it was presented by the UN General Assembly in 1987 and endorsed by it. It has been influential in bringing environmental issues into the global arena, and in expressing some concepts that have been influential in air quality management.

The Brundtland Commission suggested that to meet the legitimate aspirations of the world's population without destroying the environment, sustainable development would be required. It defined **sustainable development** as: *development that meets the needs of the present without compromising the ability of future generations to meet their own needs*. This concept has been embraced as an apparent means of integrating environmental policy and economic development.

Following from the Brundtland Commission, the UN Conference on the Environment and Development was held in Rio in 1992. The aim was to ensure that practical foundations for sustainable development were put into place. The Agenda 21 document and the Rio declaration were the most obvious results of this conference. Agenda 21 is a document covering sustainable development which is not binding on countries, but national implementation is reviewed by the Sustainable Development Commission and the UN General Assembly. Agenda 21 supports a number of environmental management principles on which some government policies including air quality management are based. These include:

- **precautionary principle** - where there is a clear possibility of damaging environmental consequences, action should be taken to protect the environment without awaiting the full scientific proof that the environment will be damaged by the proposal.

- **polluter pays** - the full costs associated with pollution (including monitoring, management, clean-up and supervision) should be met by the organisation responsible for the source of the pollution.

In addition, many countries have adopted the principle of **pollution prevention**, which aims to reduce pollution at sources.

The responsibility of national governments for international reporting on the environment of their country has enabled greater exchange of air quality information around the world.

The foundation for air quality management is the government policy framework. Without a suitable policy framework and adequate legislation it is difficult to maintain an active or successful air quality management programme. A policy framework refers to transport, energy, planning, development, and policy in other areas, as well as environmental policy. Air quality objectives are more readily achieved if these interconnected government policies are compatible, and if mechanisms exist for co-ordinating responses to issues, which cross different areas of government policy. Measures to achieve some integration of air quality policy with health, energy, transport and other policy areas have been adopted in many developed countries.

The goal of air quality management is commonly stated to be to maintain a quality of air that protects human health and welfare. This goal recognises that air quality must be maintained at levels, which protect human health, but it also must provide protection of animals, plants (crops, forests and natural vegetation), ecosystems, materials and aesthetics, such as natural levels of visibility. To achieve an air quality goal requires the development of policies and strategies.

15. Management of indoor air quality

Most human beings spend most of their time in indoor environments, where they can be exposed to poor air quality. Pollution and degradation of indoor air cause illness, increased mortality, loss of productivity and have major economic and social implications. Health effects can include increased rates of cancer, lung disease, allergy and asthma as well as fatal conditions such as carbon monoxide poisoning and legionnaires' disease, as discussed in Section 4.1. The medical and social cost associated with these illnesses, and the related reduction in human productivity, result in staggering economic losses.

Indoor air quality problems affect all types of buildings including homes, schools, offices, health care facilities and other public and commercial buildings. Indoor air problems can be reduced by better urban planning, design and operation, as well as maintenance of buildings, materials and equipment in buildings.

This document considers the management of indoor air quality in developed countries, and in some situations in developing countries, and then focuses on the important and widespread problem of how to manage indoor air quality associated with biomass fuel combustion in developing countries.

16. Priority Setting in Air Quality Management

It is important to give guidance to countries on how to set priorities in rational air quality management. Actual priorities will differ for each country; therefore, each country sets priorities in air quality management according to its policy objectives, needs and capabilities. Priority setting in air quality management refers to prioritising health risks to be avoided, with corresponding prioritisation of air pollutant compounds, and concentrating on the most important sources of the pollutants. Conceptually, prioritising health risks is straightforward. High priority of health risks will be given to those compounds

for which "high" toxicity and "high" exposure of the population are entailed. Conversely, low priority health risks involve agents of "low" toxicity and "low" exposure. "Medium" priority risks include compounds in which either toxicity or exposure is "low" while the other is "high".

A framework for a political, regulatory and administrative approach is required to guarantee a consistent and transparent derivation of air quality standards and to ensure a basis for making decisions on risk-reducing measures and abatement strategies. In such a framework the following considerations need to be included:

- The legal aspects.
- The potential of air pollution to cause adverse effects on health, taking into account the populations at risk.
- The exposure-response relationships of pollutants and pollutant mixtures and the actual exposure responsible for related health and/or environmental risks.
- The acceptability of risk.
- The cost-benefit analysis.
- The stakeholder contribution in standard setting.

17. Enforcement of air quality standards: Clean air implementation plans

The enforcement of air quality standards aims to evaluate the need for control action on emission sources to attain compliance with the standards. The instruments used to achieve this goal are the Clean Air Implementation Plans (CAIPs). The outline of such a plan should be defined in regulatory policies and strategies. Clean air implementation plans were developed in several developed countries during the 1970s and 1980s. Air pollution was characterized by a multitude of sources of many different types of air pollutants. Consequently it was extremely difficult to assess the public health risks associated with a single source, or even a group of sources. As a consequence, on the basis of the polluters pay principle (Chapter 6), sophisticated tools were developed which assessed the sources, air pollutant concentrations, health and environmental effects and control measures, and which made a causal link between emission, air pollution and the necessary control measures. A typical clean air implementation plan (CAIP) includes:

- A description of the area.
- An emissions inventory.
- An air pollutant concentrations inventory - monitored and simulated.
- A comparison with emissions and air quality standards or guidelines.
- An inventory of the effects on public health and the environment.
- A causal analysis of the effects and their attribution to individual sources.
- Control measures and their costs.
- Transportation and land-use planning.
- Enforcement procedures.
- Resource commitment.
- Projections for the future.

In developing countries, the air pollution situation is often characterized by a multitude of sources of few types, or sometimes few sources. Using the experience obtained in developed countries, the control action to be taken is very often obvious. As a consequence, in cases where little useful monitoring data are available, less monitoring could be sufficient, and dispersion models could help to simulate spatial distributions of pollutant concentrations. Much simplified CAIPs would have to be developed for cities of developing countries or countries in transition. At present, the main sources of emissions in many cities of the developing world are old vehicles and some industrial sources such as power plants, brick kilns, cement factories and a few others. Their relative contribution to air pollution could be determined by use of rapid emission inventories. The emission factors used in such inventories are published and a PC programme is available, which enables an estimation of emissions and ambient air concentrations, and

evaluates the impact of possible control measures. Projections for the future can also be evaluated by the programme.

1. Introduction

Air pollution is a major environmental health problem affecting developed and developing countries around the world. Increasing amounts of potentially harmful gases and particles are being emitted into the atmosphere on a global scale, resulting in damage to human health and the environment. It is damaging the resources needed for the long-term sustainable development of the planet.

The sources of air pollution resulting from human activities are of three broad types.

- Stationary sources. These can be subdivided into:
 - Rural area sources such as agricultural production, mining and quarrying.
 - Industrial point and area sources such as manufacturing of chemicals, non-metallic mineral products, basic metal industries, power generation.
 - Community sources, e.g. heating of homes and buildings, municipal waste and sewage sludge incinerators, fireplaces, cooking facilities, laundry services and cleaning plants.
- Mobile sources. These comprise of any form of combustion-engine vehicles, e.g. light duty gasoline-powered cars, light and heavy-duty diesel-powered vehicles, motorcycles, aircraft, and including line sources such as fugitive dusts from vehicle traffic.
- Indoor sources. These include: tobacco smoking, biological sources (such as pollen, mites, moulds, insects, micro-organisms, pet allergens etc.), combustion emissions, emissions from indoor materials or substances such as volatile organic compounds, lead, radon, asbestos, various synthetic chemicals and others.

In addition, there are also natural sources of pollution, e.g. eroded areas, volcanoes, certain plants that release great amounts of pollen, sources of bacteria, spores and viruses, etc. These natural physical and biological sources of pollution are not discussed in this publication.

In recent years it has become clear that indoor air pollution from the use of open fires for cooking and heating may be a serious problem in developing countries. It has been estimated that about 2 500 000 people die annually from exposure to high concentrations of suspended particulate matter in the indoor air environment; and the excess mortality due to suspended particulate matter and sulphur dioxide in the ambient air amounts to about 450 000 people annually (Murray and Lopez 1996; Schwela 1996a; WHO 1997a). Although the indoor air database is weak due to the scarcity of monitoring results, these estimates indicate that a serious indoor air problem may exist in developing countries.

Air pollutants are usually classified into suspended particulate matter (dusts, fumes, mists, smokes), gaseous pollutants (gases and vapours) and odours.

Suspended particulate matter (SPM) Particulate matter suspended in air includes total suspended particles (TSP), PM₁₀, (SPM with median aerodynamic diameter less than 10 µm), PM_{2.5} (SPM with median aerodynamic diameter less than 2.5 µm), fine and ultrafine particles, diesel exhaust, coal fly-ash, mineral dusts (e.g. coal, asbestos, limestone, cement), metal dusts and fumes (e.g. zinc, copper, iron, lead), acid mists (e.g. sulphuric acid), fluoride particles, paint pigments, pesticide mists, carbon black, oil smoke and many others. Suspended particulate pollutants provoke respiratory diseases, and can cause cancers, corrosion, destruction to plant life, etc. They can also constitute a nuisance (e.g. accumulation of dirt), interfere with sunlight (e.g. light scattering from smog and haze) and also act as catalytic surfaces for reaction of adsorbed chemicals.

Gaseous pollutants: Gaseous pollutants include sulphur compounds (e.g. sulphur dioxide (SO₂) and sulphur trioxide (SO₃)), carbon monoxide (CO), nitrogen compounds [e.g. nitric oxide (NO), nitrogen dioxide (NO₂), ammonia (NH₃)], organic compounds [e.g. hydrocarbons (HC), volatile organic compounds (VOC), polycyclic aromatic hydrocarbons (PAH) and halogen derivatives, aldehydes, etc.], halogen compounds (HF and HCl) and odourous substances.

Secondary pollutants may be formed by thermal, chemical or photochemical reactions. For example, by thermal action SO_2 can be oxidised to SO_3 which, dissolved in water, gives rise to the formation of sulphuric acid mist (catalysed by manganese and iron oxides). Photochemical reactions between NO_x and reactive hydrocarbons can produce ozone (O_3), formaldehyde (HCHO) and peroxyacetyl nitrate (PAN); reactions between HCl and HCHO can form bis-chloromethyl ether.

Odours: While some odours are known to be caused by specific chemical agents such as hydrogen sulphide (H_2S), carbon disulphide (CS_2) and mercaptans (R-SH , R_1S R_2), others are difficult to define chemically.

An air pollutant concentrations inventory summarizes the results of monitoring ambient air pollutants. The data are expressed in terms of annual means, percentiles and trends of the parameters measured. In most developed countries compounds measured for such an inventory include SO_2 , nitrogen oxides (NO_x), SPM, CO, O_3 , heavy metals, PAH, and VOC. In developing countries the "classical" compounds SO_2 , NO_x , SPM, CO, O_3 and lead are commonly monitored.

Trends in air pollution exposure are usually shown as annual arithmetic or geometric means and as statistical measures of short-term exposure such as high percentiles, or maximal or second highest values of a sample. The general picture for the "classical" compounds considered in this publication is that SO_2 and SPM concentrations are decreasing in developed countries while NO_x and O_3 concentrations are either constant or increasing (UNEP/WHO 1992). In many countries in transition and in developing countries, SO_2 and SPM concentrations are increasing as a consequence of increasing combustion, as are NO_x and O_3 due to increasing traffic exhaust and emissions of VOC by industrial sources as precursors of O_3 .

WHO's air quality guidelines were first published as *Air Quality Guidelines for Europe* in 1987 (WHO 1987). Since 1993 the *Air Quality Guidelines for Europe* has been revised and updated after a review of the literature published since 1987 (WHO 1992a; WHO 1994a; WHO 1995a; WHO 1995b; WHO 1995c; WHO 1996a; WHO 1998a; WHO 1999a). Also, the following additional compounds were considered in the review procedure: 1,3 butadiene, environmental tobacco smoke (ETS), fluoride, man-made-vitreous fibres (MMVF) and platinum. Parallel to the review of the air quality guidelines for Europe, the Environmental Health Criteria series of the International Programme on Chemical Safety has continued and the health risks of more than 120 chemical compound and mixtures were assessed between 1987 and 1998.

Trends of ambient air pollution were assessed in the WHO/UNEP Global Environmental Monitoring System/Air Pollution (GEMS/Air) which operated from 1973 to 1995 (UNEP/WHO 1993). The GEMS/Air programme has been replaced by a new programme under the umbrella of WHO's Healthy Cities Programme: Air Management Information System (AMIS). AMIS is intended as an information turntable which collects information on all issues of air quality management from its participants and distributes this information among them via the information centre at WHO. Several databases have already been developed (WHO 1997b; WHO 1998b). The AMIS core database of ambient air pollutant concentrations contains summary data, including annual means, percentiles and the number of days on which WHO Air Quality Guidelines are exceeded, from more than 100 cities in the world. A database on air quality guidelines and air quality standards contains data from about 60 countries. A database on air pollution management capabilities contains data from 70 cities. A database of the AMIS focal points helps AMIS participants in different countries to communicate with each other. A database on indoor air pollutant concentrations and a noise database have been developed and will be available in the near future.

The WHO Air Quality Guidelines for Europe (WHO 1987) were based on evidence from the epidemiological and toxicological literature published in Europe and North America. They did not consider exposure to ambient air concentrations in developing countries and the different conditions in these countries. However, these guidelines were used intensively throughout the world. In view of the

different conditions in developing countries, the literal application of the WHO Air Quality Guidelines for Europe could be misleading. Factors such as high and low temperature, humidity, altitude, background concentrations and nutritional status could influence the health outcome after exposure of the population to air pollution. To make the WHO *Air Quality Guidelines for Europe* globally applicable, a task force group meeting was convened at WHO Headquarters from 2-5 December 1997. The outcome of this meeting is this publication of the globally applicable *Guidelines for Air Quality*.

The objective of WHO's *Guidelines for Air Quality* is to help countries derive their own national air quality standards, to help protect human health from air pollution. The guidelines are technologically feasible and consider socio-economic and cultural constraints. They provide a basis for protecting public health from the adverse effects of air pollution, and for eliminating or reducing to minimum, air pollutants likely to be hazardous to human health. Consequently, the instruments of air quality management are also addressed in this publication.

2. Air Quality and Health

2.1 Basic facts

Pure air comprises oxygen (21%) and nitrogen (78%) and a number of rarer gases, of which argon is the most plentiful. Carbon dioxide (CO₂) is present at a lower percentage concentration (0.03%) than argon (0.93%).

Water vapour, up to 4% by volume, is also present. Oxygen is produced by plants as a by-product of photosynthesis and the earth's atmosphere is now described as oxidant, or oxidising, in comparison with the hydrogen-rich reducing atmosphere that was present before life began. The increase in oxygen has led to the development of anti-oxidant defences in many living organisms.

The atmosphere contains a number of gases which, at higher than usual concentrations, are poisonous to humans and animals and damaging to plants. These include O₃, SO₂, NO₂, CO and a wide range of VOC. Some of the latter are carcinogenic, for example benzene and butadiene. All these potentially toxic gases are referred to as air pollutants.

As well as gases, the atmosphere contains a wide variety of particulate matter, both solid and liquid, ranging in size from a few nanometres to about 0.5 mm. Small particles (<2.5 µm) persist in the air for long periods, forming a more or less stable aerosol. Larger particles are more quickly lost as their mass leads to rapid sedimentation.

This publication is focused on gases and particulate materials that have been accepted as posing a threat to health. The relative importance of the different pollutant gases and particles varies with their concentrations over both time and distance. This implies that the extent of the effects of air pollutants on health may vary from country-to-country. Careful monitoring of the concentrations of polluting gases and the particle size distribution, concentration, and composition is thus needed before an acceptable estimate of effects can be produced. The picture is further complicated as some combinations of pollutants act in an additive manner and some perhaps synergistically.

2.1.1 Physico-chemical aspects of air pollution and units used to describe concentrations of air pollutants

A consistent system of units is necessary if concentrations of air pollutants in different countries are to be compared. For both gases and particles WHO has adopted a mass per unit volume system, with concentrations generally expressed as µg/m³. The volume of a mass of air varies with ambient temperature and atmospheric pressure and thus these conditions should be specified. In considering pollutants on a global scale this is clearly important.

The alternative system, the volume mixing ratio, is applicable only to gases. In this system the concentration of gas is expressed as parts per billion, for example, and assuming ideal gas behaviour, does not depend upon the conditions of sampling because these will affect the air containing the pollutant and the pollutant itself to the same extent. A gas present at one part per million thus occupies 1 cm³ per m³ of polluted air; is present as 1 molecule per 1 x 10⁶ molecules and exerts a partial pressure of 1 x 10⁻⁶ atmospheres.

The two systems are interconvertible as under ideal conditions, 1 Mole of gas occupies 22.4 litres at 273K and 13mb pressure, dry air Standard Temperature and Pressure Dry (STPD). The interconversion formula is:

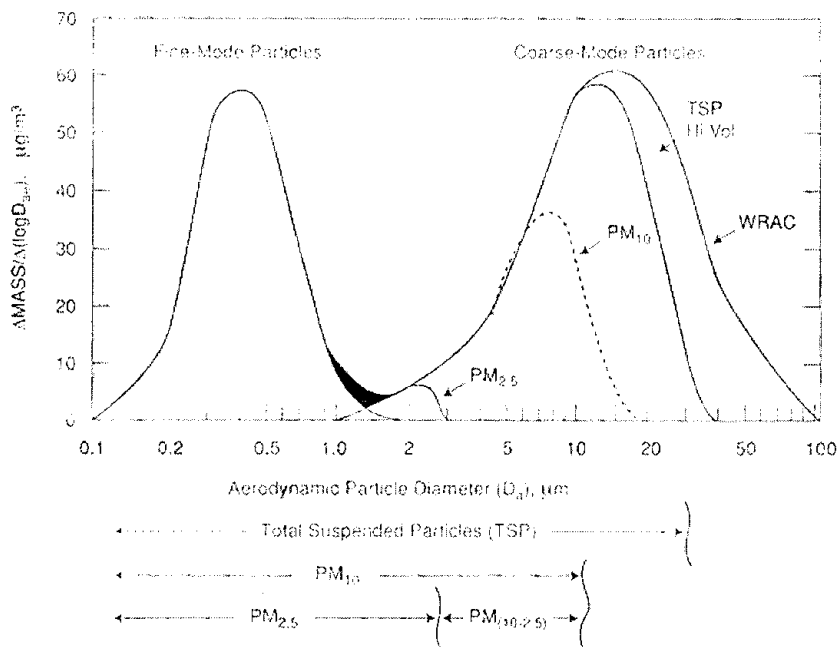
$$\text{mg/m}^3 = \text{ppm} \times (\text{molecular weight/molar volume})$$

$$\text{molar volume} = 22.4 \times T \times 1013/273 \times P$$

T = absolute temperature (K)

P = atmospheric pressure (mb)

For particles, the mass per unit volume approach is used. Particle deposition in the respiratory tract depends upon the dimensions of the particles (WHO 1979a). Thus, in describing the particle loading of the air, information on the distribution of particle size should be given in addition to the mass concentration. A representative size distribution of urban particulate matter is provided in figure 2.1. It may also be important to specify the number of particles present in each of several specific size ranges per unit volume of air.



Source: USEPA, 1996

Figure 2. 1. Representative example of a mass distribution of ambient PM as function of aerodynamic particle diameter. A wide-ranging aerosol collector (WRAC) provides an estimate of the full coarse mode distribution. Inlet restrictions of the high volume sampler for TSP, the PM₁₀ sampler, and the PM_{2.5} sampler reduce the total mass reaching the sampling filter.

The distribution of sizes of particles arising from each source of aerosols has been shown to follow a log-normal distribution: thus the geometric mean (or median) diameter and the geometric standard deviation are often quoted and specify the distribution. In defining the median diameter of the particles of an aerosol it should be specified whether this value reflects the mid-point of the distribution of the mass or number of particles present. Thus the Mass or Count Median Diameter (MMD or CMD) should be specified. An additional refinement involves adjusting for the aerodynamic properties of the particles and so the Mass or

Count Aerodynamic Median Diameters should be quoted. In naturally occurring aerosols the geometric standard deviation tends to vary from about 2 to 4 μm with 84% of the distribution being of size less than that specified by the median diameter multiplied by the geometric standard deviation. It is incorrect to refer to the median diameter of a single particle: the term refers to the distribution of sizes present in an aerosol cloud.

Current techniques used to measure the mass concentration of particles in air make use of size-specific sampling devices and thus the mass of particles of less than 10 μm diameter may be determined (PM_{10}) as an index of the mass concentration of particles that can penetrate into the human thorax. Sampling devices allow a fairly definite separation of particles of greater or less than the specified size. To be precise, the percentage of particle mass in the specified size range accepted by the sampling system, should be specified (e.g. 10 μm in the above example). A PM_{10} sampling head accepts 50% of particles of aerodynamic diameter exactly 10 μm , the acceptance fraction rising rapidly for particles of smaller diameter and declining rapidly for particles of greater diameter.

The mass concentration of particles of less than 2.5 μm diameter ($\text{PM}_{2.5}$) is a means of measuring the total gravimetric concentration of several chemically distinctive classes of particles that are emitted into or formed within the ambient air as very small particles. In the former category (emitted) are carbonaceous particles in wood smoke and diesel engine exhaust. In the latter category (formed) are carbonaceous particles formed during the photochemical reaction sequence that also leads to O_3 formation, as well as sulphate and nitrate particles resulting from the oxidation of SO_2 and nitrogen oxide released during fuel combustion and their reaction products.

The coarse particle fraction, i.e., those particles with aerodynamic diameters larger than about 2.5 μm , are largely composed of soil and mineral ash that are mechanically dispersed into the air. Both the fine and coarse fractions are complex mixtures in a chemical sense. To the extent that they are in equilibrium in the ambient air, it is a dynamic equilibrium in which they enter the air at about the same rate as they are removed. In dry weather, the concentrations of coarse particles are balanced between dispersion into the air, mixing with air masses, and gravitational fallout, while the concentrations of fine particles are determined by rates of formation, rates of chemical transformation, and meteorological factors. Concentrations of both fine and coarse particulate matter are effectively depleted through in-cloud and below-cloud scavenging by precipitation. Further elaboration of these distinctions is provided in Table 2.1.

Table 2.1. Comparisons of ambient fine and coarse mode particles

	Fine Mode	Coarse Mode
Formed from:	Gases	Large solids/droplets
Formed by:	Chemical reaction; nucleation; condensation; coagulation; evaporation of fog and cloud droplets in which gases have dissolved and reacted.	Mechanical disruption (e.g. crushing, grinding, abrasion of surfaces); evaporation of sprays; suspension of dusts.
Composed of:	Sulphate, SO_4^{2-} ; nitrate NO_3^- ; ammonium, NH_4^+ ; hydrogen ion, H^+ ; elemental carbon; organic compounds (e.g., PAHs); metals (e.g. Pb, Cd, V, Ni, Cu, Zn, Mn, Fe); particle-bound water.	Resuspended dusts (e.g., soil dusts, street dust); coal and oil fly ash, metal oxides of crustal elements (Si, Al, Ti, Fe); CaCO_3 , NaCl, sea salt; pollen, mould spores; plant/animal fragments; tire wear debris
Solubility	Largely soluble, hygroscopic and deliquescent	Largely insoluble and non-hygroscopic
Sources	Combustion of coal, oil, gasoline, diesel, wood; atmospheric transformation products of NO_x , SO_2 and organic compounds including biogenic species (e.g. terpenes) high temperature processes, smelters, steel mills, etc.	Resuspension of industrial dust and soil tracked onto roads; suspension from disturbed soil (e.g. farming, mining, unpaved roads); biological sources; construction and demolition; coal and oil combustion; ocean spray
Lifetimes	Days to weeks	Minutes to hours
Travel Distance	100s to 1000s of kilometres	< 1 to 10s of kilometres

Source: USEPA (1996a, b)

As indicated in Table 2.1, fine and coarse particles generally have distinct sources and formation mechanisms, although there may be some overlap. Primary fine particles are formed from condensation of high temperature vapours during combustion. Secondary fine particles are usually formed from gases in three ways:

1. Nucleation (i.e., gas molecules coming together to form a new particle).
2. Condensation of gases onto existing particles.
3. By reaction of absorbed gases in liquid droplets.

Particles formed from nucleation also coagulate to form relatively larger aggregate particles or droplets with diameters between 0.1 - 1.0 μm , and such particles normally do not grow into the coarse mode. Particles form as a result of chemical reaction of gases in the atmosphere that lead to products that either have a low enough vapour pressure to form a particle, or react further to form a low vapour pressure substance. Some examples include:

1. The conversion of SO_2 to sulphuric acid droplets (H_2SO_4).
2. Reactions of H_2SO_4 with NH_3 to form ammonium bisulphate (NH_4HSO_4) and ammonium sulphate ($(\text{NH}_4)_2\text{SO}_4$).
3. The conversion of NO_2 to nitric acid vapour (HNO_3), which reacts further with NH_3 to form particulate ammonium nitrate (NH_4NO_3).

Although some directly emitted particles are found in the fine fraction, secondary particles formed from gases dominate the fine fraction mass. By contrast, most of the coarse fraction particles are formed directly as particles, and result from mechanical disruption such as crushing, grinding, evaporation of sprays, or suspension of dust from construction and agricultural operations. Basically, most coarse particles are formed by breaking up bigger masses into smaller ones. Energy considerations normally limit coarse particle sizes to greater than $1.0 \mu\text{m}$ in diameter. Some combustion-generated mineral particles, such as fly ash, are also found in the coarse fraction. Biological material such as bacteria, pollen, and spores may also be found in the coarse mode.

In general, fine and coarse particles exhibit different degrees of solubility and acidity. With the exception of carbon and some organic compounds, fine particles are largely soluble in water and hygroscopic (i.e., fine particles readily take up and retain water). Except under fog conditions, the fine particle mode also contains almost all of the strong acid. By contrast, coarse mineral particles are mostly insoluble, non-hygroscopic, and generally basic.

Fine and coarse particles typically exhibit different behaviour in the atmosphere. These differences affect several exposure considerations including the representativity of central-site monitored values and the behaviour of particles that were formed outdoors after they penetrate into homes and buildings where people spend most of their time.

Fine accumulation mode particles typically have longer atmospheric life times (i.e. days to weeks) than coarse particles, and tend to be more uniformly dispersed across an urban area or large geographic region. Atmospheric transformations can take place locally, during atmospheric stagnation, or during transport over long distances. For example, the formation of sulphates from SO_2 emitted by power plants with tall stacks can occur over distances exceeding 300 kilometres and 12 hours of transport time; therefore, the resulting particles are well mixed in the air shed. Once formed, the very low dry deposition velocities of fine particles contribute to their persistence and uniformity throughout an air mass.

Larger particles generally deposit more rapidly than small particles; as a result, total coarse particle mass is less uniform in concentration across a region than that of fine particles. The larger coarse particles ($> 10 \mu\text{m}$) tend to fall out of the air rapidly and have atmospheric lifetimes of only minutes to hours depending on their size, wind velocity, and other factors. Their spatial impact is typically limited by a tendency to fall out in the nearby downwind area. The atmospheric behaviour of the small particles within the "coarse fraction" ($\text{PM}_{10-2.5}$) is intermediate between that of the larger coarse particles and fine particles. Thus, some of the smaller coarse fraction particles may have lifetimes on the order of days and travel distances of up to 100 km or more.

In some locations, source distribution and meteorology affects the relative homogeneity of fine and coarse particles, and in some cases, the greater measurement error in estimating coarse fraction mass precludes clear conclusions about relative homogeneity.

The composition of airborne particles is seldom routinely determined though this can vary significantly from site to site. This is important in interpreting the results of epidemiological studies of the effects of particles on health. Extrapolation from data collected in one country to conditions in another may be unwise unless some comparability of particle composition has been established.

2.1.2 Sources of air pollutants

The sources of air pollutants may be divided into anthropogenic and natural. However, as human activity disturbs natural systems, the distinction may become blurred. Natural sources include dust storms, volcanic action, forest fires and the formation of radioactive particles from gases such as radon. Incursions from the stratosphere increase ground level (tropospheric) concentrations of O_3 . For some pollutants, e.g. SO_2 , natural sources exceed anthropogenic sources on a global scale. However, when considering the effects of air pollutants on health, especially in urban areas where population densities are high, anthropogenic sources are very important and are those to which attention is usually directed with a view to control.

Most anthropogenic sources of fine particles, i.e. those less than $2.5 \mu m$ in aerodynamic diameter, involve combustion of some sort. Materials of biological origin (e.g. wood, coal and oil) burn in air by virtue of their carbon content. If a substance containing only hydrocarbon compounds burns with complete efficiency, only water and CO_2 are produced. Such combustion demands a stoichiometric ratio of oxygen to fuel and, in practice, is never attained. Unburned fragments of combustible material, semi-volatile organic compounds, which vaporise and subsequently recondense as tarry droplets and incombustible matter are usually emitted as components of smoke during and following the combustion process. Improving the mix of air and fuel and pre-removal of volatile compounds may reduce smoke production. Smokeless fuel is prepared and burnt in this way. If the supply of oxygen is inadequate, large increases in CO production occur.

In most countries, motor vehicles, industrial activity and the generation of electricity account for a large percentage of the anthropogenic production of the oxides of nitrogen and sulphur. These, in addition to CO, particles and VOC are described as primary pollutants in that they are produced directly by the combustion process. Reactions taking place in the troposphere generate secondary pollutants: O_3 is a classic example. NO_2 breaks down photochemically under the action of ultra-violet light to generate NO and atomic oxygen. The latter combines with molecular oxygen to produce O_3 . The presence of peroxy radicals derived from atmospheric reactions of HC and other organic compounds ensures that NO is oxidized back to NO_2 without loss of O_3 . Thus an O_3 -generating series of reactions is established. The formation of O_3 typically occurs as polluted air drifts away from sites of production including urban areas; O_3 may thus occur at large distances from sources of NO_2 and HC.

NO_2 is both a primary and a secondary pollutant. Motor vehicles emit both NO and NO_2 . In the atmosphere, NO is oxidized to the dioxide, slowly by oxygen but rapidly by O_3 . This explains the low concentrations of O_3 generally found close to sources of oxides of nitrogen.

In addition to the above, sulphur in fuel also gives rise to both primary and secondary pollutants. SO_2 is formed by oxidation during combustion. Further oxidation of SO_2 leads to SO_3 , which rapidly undergoes hydration to form sulphuric acid and this, in turn, is neutralized by NH_3 to ammonium bisulphate and ammonium sulphate. These compounds make an important contribution to the ambient fine particle aerosol.

The combustion of oil and petrol in internal combustion engines leads to the release of organic compounds, which condense in the air to produce small particles of the order of $1 \mu m$ in diameter. These and the freshly formed sulphuric acid droplets of similar size are described as nucleation mode particles. Such particles have a short lifetime (< 1 hour) and aggregate or agglomerate to produce particles in the $0.2-2.0 \mu m$ diameter range which are defined as accumulation mode particles. These particles are stable and long-lived, and may be transported many hundreds of kilometres before being eventually lost from the air, generally as a result of below-cloud scavenging by precipitation.

2.1.3 Factors affecting the concentrations of air pollutants

Local concentrations of air pollutants depend upon the strength of their sources and the efficiency of their dispersion. Day to day variations in concentrations are more affected by meteorological conditions than by changes in source strengths. Under some conditions both factors may play a part: in cold, still weather, dispersion is reduced whilst production is increased by the increased use of domestic space heating.

Wind is of key importance in dispersing air pollutants: concentrations being inversely related to wind speed for ground level sources. Turbulence is also important: a "rough" terrain, as produced for example by buildings, tends to lead to increased turbulence and better dispersion of pollutants.

Temperature inversions are of great importance in controlling the depth of the layer of air adjacent to the ground in which pollutants are well mixed (the mixing depth). As a mass of air rises it is exposed to decreasing atmospheric pressure and expands accordingly. This causes the temperature of the air mass to fall.

The rate at which temperature falls with height is described as the adiabatic lapse rate: for dry air the rate of decline of temperature is about 1°C for each 100 m of height. Air saturated with water vapour loses heat more slowly than dry air, since the heat capacity of water vapour is twice that of dry air. As temperature falls and the saturated vapour pressure also falls, water condenses out as droplets and latent heat is released. As air containing water vapour, but not saturated, cools on rising it will reach saturation and thereafter the adiabatic lapse rate will be reduced.

As a mass of air rises it cools but as long as its temperature remains greater than that of the surrounding air it will retain buoyancy and continue to rise. Conversely if the actual temperature falls more slowly than that of the mass of air, or even increases, the cooling air will rapidly become heavier than the surrounding air and it will fail to rise. Consequently, a temperature inversion occurs when the air temperature rises with height above the ground.

At night, with low wind speeds and clear skies, rapid cooling of the ground and the adjacent air causes air to be coldest close to the ground and thus air cannot rise. Polluted air will not rise in the layer in which the usual temperature gradient is reversed and thus the concentration of pollutants in this layer will increase, sometimes leading to a thick layer of polluted air close to the ground.

Temperature inversions occur in summer as well as in winter. With strong sunlight and high traffic density, temperature inversions contributed to the high incidence of photochemical smog first described in the early 1950s in Los Angeles and now seen commonly in other large cities surrounded by mountains, such as Mexico City, Sao Paulo, and Caracas.

2.1.4 Exposure to air pollutants

The total daily exposure of an individual to air pollution is the sum of the separate contacts to air pollution experienced by that individual as he/she passes through a series of environments during the course of the day (also called micro-environments, e.g. at home, while commuting, in the streets, etc.). Exposures in each of these environments can be estimated as the product of the concentration of the pollutant in question and the time spent in the environment. In this model, the concentration of pollutants is assumed to be approximately constant during the time a person spends time in it. Exposure should not be confused with dose: i.e., the amount of pollutant absorbed. As the number of micro-environments studied is increased, a better estimate of total daily exposure is produced. The daily average concentration of a pollutant recorded at a single, fixed-site outdoor monitoring point provides only a very approximate guide to actual exposure.

One obvious and important micro-environment is the indoor environment where the types and concentrations of pollutants may be very different from those outdoors. For example, O₃ concentrations are generally much lower indoors in the absence of indoor sources, and O₃ penetrating from outdoors is destroyed by reaction

with interior surfaces. By contrast, indoor concentrations of a chemically non-reactive fine particle such as sulphate may reach 90% of those outdoors. For some pollutants, indoor concentrations usually exceed outdoor concentrations.

In some cool climate countries people living in urban areas spend as much as 90% of their time indoors; this should be considered in interpreting the results of epidemiological studies relating outdoor concentrations of pollutants to effects on health. In other countries where climates are warm and many occupational activities are conducted outdoors, the percentage of the day spent indoors may be very much less. In some developing countries, indoor air pollution may be much higher than outdoor air pollution due to use of biomass fuels in open stoves (Section 4.2).

Besides varying temporally, outdoor concentrations of air pollutants vary from place-to-place. For example, concentrations of primary pollutants generated by motor vehicles decline rapidly as one moves away from busy roads. However, concentrations of pollutants generated by motor vehicles may be significantly higher inside motor vehicles than indicated by single site monitors and thus the motor car may itself be a significant micro-environment. Some pollutants are comparatively evenly distributed across large areas: O₃ and fine particles are examples. For such pollutants, monitoring at a limited number of sites may provide an adequate indication of concentrations over wide regions.

Personal monitoring devices have been developed for some pollutants. At their simplest these provide an integrated assessment of personal exposure over a given period. An overview of some aspects of the technology of monitoring devices is provided in Chapter 5.

2.1.5 Health significance of air pollution

Exposure to air pollution is probably as old as human exposure to fire. There is a large amount of archaeological evidence that indoor air pollution must have been troublesome to early humans, who used fire in confined spaces (Brimblecombe 1987). The classical writers record the oppressive fumes of Rome. Attention to effects of air pollution on health was focused during the early and mid 20th Century by a series of air pollution episodes, which produced dramatic effects on health. The Meuse Valley in Belgium (1930), Donora in the USA (1948) and London, England (1952) all experienced air pollution episodes which were investigated in some detail. In the 1952 London air pollution episode it was estimated that 4000 extra deaths occurred as a result of a smog largely consisting of high concentrations of SO₂ and particulate matter (Brimblecombe 1987), and in Donora some 43% of the population were affected by symptoms including headache, eye irritation, dyspnoea and vomiting. Analysis of the London episode showed that the elderly, especially those suffering from pre-existing cardio-respiratory disorders and the very young were at greatest risk. Later studies demonstrated a decline in urban levels of chronic bronchitis as concentrations of air pollutants fell (Chin et al 1981).

Emphasis on severe episodes of pollution may have distracted attention from the effects of long term exposure to pollution. Studies in London in the 1950s and 60s showed that the self-reported state of health of a panel of patients suffering from chronic bronchitis varied with day-to-day levels of air pollution (Waller 1971). It was noted, using simple methods of analysis, that symptoms did not increase unless the concentrations of smoke (measured as Black, or British Smoke) and SO₂ exceeded 250 and 500 µg/m³, respectively. It is likely that, had more searching methods of analysis been applied, effects would have been seen at lower concentrations.

Since the 1950s a great body of evidence has accumulated showing that air pollutants have a damaging effect on health. Some of the key studies are reviewed in Chapter 3 of this publication. Two especially important groups of studies will be dealt with briefly here as they have played an important role in the formulation of these guidelines.

When the WHO Air Quality Guidelines for Europe were developed in 1987 (WHO 1987) emphasis was placed on the results of studies of volunteers exposed to air pollutants under controlled conditions. Where such studies demonstrated a Lowest Observed Effect, or Adverse Effect Level this was used as a starting point for deriving the relevant air quality guideline. Epidemiological studies that demonstrated a threshold of effect were used in the same way.

A new database of epidemiological studies emerged in the late 1980s and 1990s. This database of time-series studies was developed first in the United States and later in Europe and other areas (Schwartz *et al* 1996).

In essence the time series approach takes the day as the unit of analysis and relates the daily occurrence of events, such as deaths or admissions to hospital, to daily average concentrations of pollutants whilst taking careful account of confounding factors such as season, temperature and day of the week. Powerful statistical techniques have been applied and coefficients relating daily average concentrations of pollutants to effects have been produced. The results of these studies have been remarkably consistent and have withstood critical examination well (Samet *et al.* 1995). Such methods cannot, of course, be expected to prove the possible or probable causal nature of the associations demonstrated, but detailed examination of the data and application of the usual tests for likelihood of causality have convinced many that it would be unwise to disregard the findings.

Associations have been demonstrated between daily average concentrations of particles, O₃, SO₂, airborne acidity, NO₂, and CO. The associations for each of these pollutants were not significant in all studies though, taking the body of evidence as a whole, the consistency is striking. More remarkable than the consistency of the results was the demonstration of associations at levels of pollution hitherto expected to be quite safe: indeed, below the levels recommended in the 1987 WHO Air Quality Guidelines for Europe.

For particles and O₃ it has been accepted by many that the studies provide no indication of any threshold of effect. This was reflected in the tables relating small differences in daily concentrations of particles and O₃ to effects on health (Chapter 3).

In time - series studies, daily counts of events are related to the daily average concentration of pollutants measured, usually at a single, fixed, monitoring site or predicted from such measurements. In any city it is likely that there will be a distribution of personal exposure across the population. Thus, on days when the measured or predicted level of pollution is low, some individuals may be exposed to greater than the reported concentration. If such exposure exceeded some threshold then effects would be recorded and attributed to occurring as a result of exposure to the recorded or predicted concentration. It might then be asked whether time series studies are capable of discerning a threshold of effect, especially if the threshold is low. This problem is by no means limited to particulate matter and O₃: similar difficulties in identifying a threshold of effect at a population level apply to lead. This is an important point with regard to defining an air quality guideline based on such data: it is unlikely that a single guideline value can be derived from such a database and thus the "guideline" should be accepted to be a relationship relating events to airborne concentrations.

This is a significant departure from the concept of a guideline value as a level of exposure at which the great majority of people, even in sensitive groups, would be unlikely to experience any adverse effects. Translation of this new form of guideline into an air quality standard is likely to be difficult. Junker and Schwela further discussed this issue in some detail (Schwela and Junker 1978; Junker and Schwela 1998).

Time-series studies relate the concentrations of air pollutants to their effects on health: in fact they provide the slope of a regression line relating concentrations to health events. There are no grounds for simple extrapolation of the concentration-exposure relationship to high levels of pollution. Several studies have shown that the slope of regression line is reduced when the annual average concentration of pollution is high (Schwartz and Marcus 1990).

Elevations in daily rates for various adverse health outcomes are sometimes referred to as the acute effects of air pollutants. For example, an increase in pollutant concentration might cause an increase in asthma attacks. It is assumed that without an increase in pollution, neither would asthma attacks increase. It is also

likely that long-term exposure to air pollution produces chronic effects on health. For example, lifelong exposure to air pollution in England amongst those born in the late 19th Century is likely to have increased their chances of developing chronic bronchitis and dying earlier than expected as a result of the illness. (Chinn et al. 1981). In the United States, cohort studies in a range of towns have demonstrated associations between long term average concentrations of fine particles (PM_{2.5} and sulphates) and the Standardized Mortality Ratios of communities (Dockery *et al* 1993; Pope *et al* 1995). Attempts to estimate the public health impact of air pollution have been made on the basis of both the cohort studies and the time-series studies. On the basis of one of the cohort studies (Pope et al. 1995), Brunekreef (1997) has reported that exposure to current levels of air pollution in the Netherlands may lead to a average reduction in longevity of 1 year. Work reported from the United States reports slightly larger effects: perhaps 2 years are lost in polluted communities compared with unpolluted areas of the United States. Loss of life expectancy may be distributed statistically across the affected population. This is the case amongst cigarette smokers where the average loss of life expectancy is of the order of 3-5 years, though some smoking-related deaths occur among people in their forties.

2.2 Air pollutant concentrations and factors affecting susceptibility

The concentrations of emitted pollutants and population exposures to air pollution vary substantially from country to country. In addition, human responses to air pollutant exposure also vary. Outdoor and indoor concentrations of air pollutants, and a number of examples of factors affecting responses to pollutants, are considered in this section.

2.2.1 Concentrations of classical pollutants in ambient air

There are far more data available on the ambient outdoor concentrations of certain classic air pollutants in many countries around the world than for any of the other pollutants, as monitoring records on black smoke (BS) and SO₂ in particular go back for five decades or more. There are, however, relatively few locations where all of the classical air pollutants have been measured simultaneously, or over extended periods. Additionally, historical data are often of limited value for retrospective or cross-sectoral analyses of air quality and health. Only recently, and only for a limited number of sites, have the specificity of analyses, the validity of calibrations, the identification of site representativity for the specific sampling purpose, the consistency of averaging times and/or sampling intervals, and the frequency and data management procedures been standardized to appropriate quality assurance procedures (see Chapter 5).

Available air pollutant concentration data were reviewed by the Task Group and selected data summaries are presented here to give the reader some general perspectives on recent pollutant levels and trends in the various WHO regions. The presentation is organized into three categories for each of the classical air pollutants.

The first category contains data on air quality in the European region on the basis that these summary data provided key input to the *Air Quality Guidelines for Europe* (WHO 1999a), which in turn provided the basis for the *WHO Guidelines for Air Quality* summarized in this publication. These data underwent a limited peer review by the WHO/EURO Working Group that judged them to be sufficiently representative and reliable for inclusion in the *Air Quality Guidelines for Europe*.

The second category contains data on ambient outdoor air quality in other WHO regions that were collected from countries by representatives from those regions on the WHO Global Air Quality Guidelines Task Group. In most cases, the Task Group was not able to assess data quality. Thus, it was not possible to endorse these data in terms of their accuracy and representativity. Although some data may be of high quality, some of the data were based on intermittent sampling programmes and cannot be reliably used for determining longer-term average concentrations.

Despite these limitations, the Task Group considered that presentation of some of the available summary data would provide a valuable frame of reference for the readers of this report. Accordingly, for each WHO Region other than Europe, a restricted set of data was selected for this report. Wherever possible, they represent: (a) at the one extreme, data for point source monitoring in regions as being representative of high-end human exposures; (b) non-typical levels, selected from data for urban sites not greatly affected by industrial point sources; and (c) at the other extreme, non-urban site data selected as being representative of the low end of concentrations for the country.

Each region was represented by data from a limited number of countries in that region, that differed in size and extent of industrial development, to demonstrate the extent of potential exposure of people in that region. Wherever possible, data that are summarized include available information on the source of the data, averaging times, and the quality assurance procedures followed in producing the data.

The third category of data consists of summaries from the WHO Air Management Information System (AMIS) programme (WHO 1997b, WHO 1998b). Since AMIS collects data from collaborating centres in all WHO regions, there is some overlap in coverage with the data summarized in the regional reports within the second category. The primary justification for including the AMIS data as a separate category is that the procedures used to generate and report these data are more uniform and were subjected to more validation, providing an independent source of data of assured quality.

An examination of the data summaries that follow clearly shows that air quality in large cities in many developing countries is remarkably poor, and that very large numbers of people in those countries are exposed to ambient concentrations of air pollutants well above the WHO *Guidelines for Air Quality*.

AIR QUALITY DATA IN DEVELOPING COUNTRIES

The main source of information on air pollution in developing countries is the Air Management Information System AMIS (WHO 1997b) set up by the WHO as a continuation of GEMS/Air (UNEP/WHO 1993). AMIS is based on voluntary reporting of data by municipalities of the WHO member states. The AMIS core data base collects information on annual (arithmetic) mean and high (95-, 98-) percentiles of daily mean concentrations of SO₂, NO₂, O₃, CO, SPM, lead and other potentially monitored compounds. In principle, data from three types of monitoring stations are stored: "industrial," reflecting levels in areas affected by emissions from industry; "city center / commercial," which will be mostly affected by traffic; and "residential," which should reflect the best basic level of population exposure. Until now the coverage of the system has been limited to 100 cities, but the intention is to acquire current information from some 300 cities by the end of 2000. The analysis of the data and its limitation is discussed by Krzyzanowski and Schwela (1999).

AIR POLLUTION LEVELS AND TRENDS

Sulphur dioxide

In most analysed cities, the annual mean concentrations of SO₂ in residential areas have not exceeded 50 µg/m³. Notable exceptions are several cities in China, with the SO₂ concentration of 330 µg/m³ in Chongqing and 100 µg/m³ in Beijing in 1994. In some Chinese cities, the levels reported from "residential" locations exceed those from "commercial" regions of the city and are comparable with the levels in industrial zones. This may reflect the impact of combustion of sulphur-containing coal for domestic heating and cooking.

High levels of SO₂ may also be seen in other developing countries, especially in those with cold winters, as illustrated by the report from Nepal (Sharma 1997). Daily mean concentration of SO₂ was in the range 273 - 350 µg/m³ in residential areas of Kathmandu during September - December 1993. In monitoring sites close to main roads, the reported range is 310-875 µg/m³, reflecting the influence of emissions from

traffic. More than half of the vehicles registered in the city are equipped with two-stroke engines and many are old and ill maintained.

In most of the cities with data allowing trend assessment a decline in mean annual SO_2 concentration was seen over the 1990s. The most dramatic reduction of air pollution with SO_2 was reported from Mexico City, where the concentration in various residential areas dropped from 100-140 $\mu\text{g}/\text{m}^3$ in 1990-1991 to 32-37 $\mu\text{g}/\text{m}^3$ in 1995-1996. In the most polluted Chinese cities an annual means declined between 1% and 10%.

Suspended particulate matter

The most commonly monitored and reported indicator of this type of air pollution is the mass concentration of TSP. In most of the cities, the TSP annual mean concentration exceeds 100 $\mu\text{g}/\text{m}^3$, with the levels exceeding 300 $\mu\text{g}/\text{m}^3$ in several cities of China and India. There is no evidence of any overall systematic and significant change in TSP levels: the data from the 1990s show increasing as well as decreasing trends in a similar number of cities. The most visible relative decrease of TSP concentrations is shown by the data from Bangkok, but the progress is not steady there either. More consistent, though with a smaller relative rate, is the decrease in TSP concentration in Mexico City. The opposite tendency can be seen in some Chinese cities, with the most rapid increase of TSP concentration in Guangzhou (from less than 150 $\mu\text{g}/\text{m}^3$ in 1990-1992 to more than 300 $\mu\text{g}/\text{m}^3$ in more recent years).

In a limited number of cities reporting data to AMIS levels of PM_{10} are also measured. The most commonly registered annual average PM_{10} levels ranged from 50 - 100 $\mu\text{g}/\text{m}^3$ in the years 1995-1996. The highest concentrations, exceeding 250 $\mu\text{g}/\text{m}^3$, were observed in Calcutta and New Delhi. In most towns with high PM_{10} average in the last year, an increase in the pollutant concentration was seen over the 1990s. In most cases, this increase has occurred even when the decrease in TSP was reported. An opposite trend and a decrease in PM_{10} level were seen in the Central and Southern America cities. In Mexico City, the relative decrease in PM_{10} was faster than that of TSP.

This limited information on the size-specific particulate pollution allows a comparison of the mass concentration of TSP and PM_{10} . For most sites and years with data on both indicators, the PM_{10} to TSP ratio was in the range between 0.4-0.8. However, in a few cases, the ratio exceeded 1.0. This fact indicates that the measurements reported to AMIS might not have been done at the same locations and/or periods. In a southeastern part of Mexico City, the ratio remained between 0.25 and 0.32 in all years 1991-1996, while in the southwestern part of the city it was consistently between 0.44 and 0.55. More specific studies of the size distribution of airborne particles, conducted in the northern cities of China in the mid-1980s, indicate that some 70% of the mass concentration of TSP are due to the PM_{10} (Ning et al 1996). During the heating season, particles with diameter less than 2 μm were found to make some 30-50% of TSP. The elemental analysis of the particles confirmed that human activities are the main source of the fine fraction of particulate matter. Similar results were reported from Jakarta, where particles with diameter less than 7.2 μm contributed more than 80% of TSP (Zou et al 1997). Traffic-related compounds contributed significantly to the overall pollution mass, and especially to the fine particle fraction.

Nitrogen dioxide

In most of the cities reporting to AMIS the annual mean concentrations of NO_2 remain moderate or low, not exceeding 40 $\mu\text{g}/\text{m}^3$. However, in Mexico City and in Cape Town, the annual average of 70 $\mu\text{g}/\text{m}^3$ has been exceeded regularly in the 1990s. A paper based on data from centrally located monitors in Sao Paulo indicates annual mean of 240 $\mu\text{g}/\text{m}^3$ in 1990/91 (Saldiva et al. 1995). The trends vary between the cities, but a 5-10% annual increase in concentration of this pollutant was more common than a decrease.

The observed pattern is consistent with the volume of car traffic in each city. The highest pollution levels, and the increasing trends, are observed in the cities with high and increasing car traffic. In Southern Asia or in Latin America, this high NO₂ concentration combined with the intense UV radiation results in photochemical smog with high oxidant concentrations. It is illustrated by the analysis of temporal and spatial patterns of tropospheric O₃ in New Delhi (Singh et al 1997). The build-up of O₃ over the day is faster than scavenging of O₃ by the NO₂. In Mexico City, the mixture of high NO₂ emissions from gasoline combustion and intense UV radiation is the cause of the notorious photochemical smog in that city. According to the data reported to AMIS, the O₃ concentration exceeded a concentration of 120 µg/m³ in over 300 days a year in 1994-96, and the 95th percentile of maximum daily 1-hour average O₃ concentration was around 500 µg/m³. Some decrease was seen, however, in the annual mean O₃ concentration, indicating slow improvement of air quality in non-extreme days.

2.2.2 Factors affecting susceptibility to indoor air pollution

Indoor air pollutants usually differ in type and concentration from outdoor air pollutants. Indoor pollutants include environmental tobacco smoke, biological particles (such as pollen, mites, moulds, insects, microorganisms, pet allergens etc.), non-biological particles (such as smoke), VOC, NO_x, lead, radon, CO, asbestos, various synthetic chemicals and others. Degradation of indoor air quality has been associated with a range of health effects, including discomfort, irritation, chronic pathologies and various cancers.

With growing public concern about indoor air quality, action has been taken in many developed countries to characterize levels of indoor air pollutants, to improve ventilation and fuel emissions, and to reduce exposure to environmental tobacco smoke, biological contamination and radon among other actions. Even though there is considerable evidence that indoor air quality is a serious and widespread problem in many developing countries, the information and resources to control indoor air quality are often lacking (Ferrari et al. 1995). Management of indoor quality is discussed in section 6.2.

Perhaps the most important factor that causes qualitatively and quantitatively different exposures to air pollutants across different countries is that of indoor heating and cooking by solid fuel burning. This topic deserves special attention. The emissions, concentrations, exposures and health effects are discussed in detail in Chapter 4. On a global scale, biomass fuels (wood, crop residues, dung and grass) are used daily in about half the world's households as energy for cooking and/or heating. In China, for example, it has been estimated that coal burning results in particle concentrations up to 5000 µg/m³ in indoor living areas, whereas smoky houses in Nepal and Papua New Guinea have peak levels of 10 000 µg/m³ or more (Smith 1996). An unknown, but significant, proportion of this activity takes place in conditions where much of the airborne effluent is released into the living area. Therefore, some of the highest concentrations of particulate matter other pollutants occur in rural, indoor environments in developing countries.

Biomass smoke contains significant amounts of several important pollutants: CO, particles, HC and to a lesser extent, NO_x. However, biomass smoke also contains many organic compounds, including PAH, that are thought to be toxic, carcinogenic, mutagenic or otherwise of concern. Coal smoke contains all of these as well as additional pollutants, e.g. sulphur oxides and heavy metals such as lead. In many parts of the world these pollutants are released from stoves in poorly ventilated homes or in enclosed courtyards. Due to the high concentrations and the large populations involved, the total human exposure to many important air pollutants can be much higher in the homes of the poor in developing countries than in the outdoor air of cities in the developed world.

2.2.3 Meteorological factors

At increased altitude the partial pressure of oxygen falls and inhalation increases in compensation. For gaseous pollutants no increase in effects over those experienced at sea level would be expected as a result of

the increased inhalation, as the partial pressures of the pollutant gases will fall in line with that of oxygen.

For particles, on the other hand, increased inhalation volumes will lead to increased intake of airborne particles and perhaps changes in patterns of deposition. Differences in effects between those who have always lived at high altitude and those who have recently relocated there might be expected.

Temperature has a very significant effect on health and has been shown to be an important confounding factor when examining the effects of air pollutants. The relationship between ambient temperature and ill health is "U"- or "V"-shaped with excess daily deaths increasing in both cold and hot conditions. Local populations tend to be acclimatised to local conditions and cope better with changes in temperature than do immigrants from other countries. The effect of low temperatures in winter is more marked in countries with temperate climates, than in much colder countries. Inhaled volumes increase under hot conditions, and thus the intake of pollutants also increases. In addition, warm days encourage people to spend more time out-of-doors and so personal exposure patterns to pollutants may change. Of course, living in well-ventilated houses in warm weather, when doors and windows may be open, may decrease exposure to pollutants from indoor sources and increase exposure to outdoor sources.

Humidity is unlikely to have a significant effect on the toxicity of gaseous pollutants, and it may reduce the effects of some particles by permitting hygroscopic growth in particle size prior to inhalation, thus changing the patterns of deposition from smaller to larger airways in the lung.

2.2.4 Demographic factors

The age structure of populations differs markedly from country to country. Old people tend to show increased susceptibility to air pollution as a result of reduced functioning of physiological defence mechanisms, reduced physiological reserves and the increased prevalence of disease. Very young children may also be at increased risk due to incompletely developed defence mechanisms, higher ventilation rates per unit body mass and a tendency to spend more hours out of doors than adults.

2.2.5 Socio-economic factors

People with a poor standard of living suffer from nutritional deficiencies, from infectious diseases due to poor sanitation and overcrowding, and tend to be provided with a poor standard of medical care. Each of these factors may render individuals more susceptible to the effects of air pollution. A dietary lack of anti-oxidant factors may decrease defence mechanisms against oxidant pollutants such as O₃ and NO₂. Delayed clearance of particles in airways already damaged by infection is likely. In developing countries, poor air quality may be closely associated with the incidence of infectious diseases.

2.2.6 Effects of differing levels of disease in the population

Diseases which produce narrowing of the airways, a reduction in the area of the gas-exchange surface of the lung and an increased alteration of inhalation-perfusion ratios are likely to make the subject more susceptible to the effects of a range of air pollutants. Epidemiological studies have shown that patients suffering from asthma or chronic obstructive pulmonary disease suffer an increase in symptoms when levels of pollutants are raised (see Chapter 3). It should be noted that asthma is less common in developing than in developed countries. However, the prevalence of infectious disease in developing countries, including tuberculosis, may militate against the development of the IgE antibody response, which is characteristic of asthma.

2.2.7 Specific differences in prevalence levels of air pollutants

Concentrations of air pollutants vary greatly from country to country. In countries where indoor air pollution is common, due to cooking over open fires with poor ventilation, indoor exposure may be an important cause of damage to health especially among women. In other countries, including those of the Middle East, particle

concentrations in outdoor air are high due to wind-blown dust. In desert areas this dust contains a high proportion of silica, and silicotic nodules have been described in the lungs of residents. However, high concentrations of volcanic ash do not seem to be associated with acute effects on health. Specific examples of the levels of ambient urban air quality, and indoor air quality in various countries around the world are provided by the AMIS (WHO 1997b; WHO 1998b).

Countries burning brown coal (or lignite) for domestic heating are likely to experience high concentrations of smoke and SO₂. To these may be added the pollutants produced by motor vehicles. Leaded motor vehicle fuel is in use in many parts of the world and in these areas airborne lead particles make an important contribution to total lead intake both by inhalation and by ingestion.

2.3 Exposure to air pollutants

An ideal characterization of the distribution of human exposures would be based on direct measurements of each pollutant concentration in the breathing zone of each member of a representative cross section of the population of interest. At present, however, such a programme is technically impossible and probably impractical as well. Instead, ambient air quality measurements at central, fixed, air monitoring sites are widely used surrogates for population exposures, and are generally the only widely available quantitative resource that can be related to exposures. Personal monitors for exposure estimates could overcome some of the shortcomings of ambient air monitors, but they can be applied only in a small sample of the population.

There are many factors that can account for the substantial differences between the concentrations of pollutants measured at central sites and those in the breathing zone of residents of the community. Air pollutants emitted into outdoor air can be attenuated during infiltration into indoor air. This attenuation can be expected to be minimal for all pollutants of outdoor origin when barriers such as windows and doors are open or absent. In contrast, attenuation can be very large for tightly sealed buildings during times of maximal heating or cooling needs.

The attenuation of indoor air pollutant concentrations by removal to indoor surfaces is highly dependent on the physico-chemical characteristics of the pollutant. At one extreme is a chemically stable fine particle component such as sulphate ion, where indoor concentrations are typically 90% or more of outdoor concentrations. At the other extreme, indoor concentrations can be low for larger particles deposited by sedimentation in the relatively still air.

For a relatively non-reactive gas, such as CO, the indoor-outdoor concentration ratio is usually near unity in a home without indoor CO sources. However, indoor concentrations can be much higher than outdoor concentrations when there are sources such as burning cigarettes and open flames used for cooking or space heating. By contrast, chemically reactive gases, such as O₃ and SO₂ fairly rapidly diffuse to, and react with, interior surfaces. As a result, indoor-outdoor concentration ratios are typically much lower than unity.

Lead is the only classic air pollutant that can gain access to humans through indirect transport routes. Where leaded motor vehicle fuels are used, fine particle emission from vehicle exhausts can be inhaled. In addition, the particles that deposit on terrestrial surfaces can be ingested, either directly from soil in play yards, or after being carried indoors as a component of house dust. Furthermore, particulate lead deposited on plants or agricultural fields can be retained in food products and add to body burdens. Similar pathway considerations also apply to toxic air pollutants other than lead.

Humans engage in a variety of daily activities, and the concentrations of air contaminants in their breathing zone can vary substantially as they move through various microenvironments, each of which may be affected by different attenuation factors or increments from indoor sources. Furthermore, even a complete knowledge of the concentrations of all relevant pollutants in each microenvironment would

not provide an adequate basis for predicting physiological and pathological responses to their exposures.

Pollutant uptake could also be greatly affected by ventilation rate and pattern, entry of air via the nose or mouth, airway sizes (which exhibit great individual variability), past and current history of exposure to other toxicants (such as cigarette smoke), and prior disease histories and genetic predispositions. Many of these factors can be modelled and such models have been used for estimating dose distributions associated with ambient air concentrations.

Sulphur dioxide

SO₂ is a colourless pungent, irritating, water-soluble and reactive gas. Concentrations in ambient air in cities of developed countries have mostly decreased in the last two or three decades due to tighter emissions control, increased use of low sulphur fuels and industrial restructuring. Consequently, high ambient concentrations in earlier decades have been replaced by annual mean concentrations of about 20-40 µg/m³ in most cities in developed countries and daily means rarely exceed 125 µg/m³.

However the situation is more complex in developing countries. In cities, the annual mean concentrations of SO₂ in ambient air may range from very low levels up to 300 µg/m³ (WHO 1998b). Peak concentrations measured as ten-minute averages may exceed 2000 µg/m³ under conditions of poor atmospheric dispersion such as inversions (Section 2.2.2), or when emissions from a major source are brought to ground levels by certain atmospheric conditions. SO₂ can also reach high concentrations in air in some indoor environments through the use of sulphur containing fuels such as coal for heating and cooking (Section 4.2).

As it is highly reactive, SO₂ has a highly non-uniform dose distribution along the conductive airways of the respiratory tract. For low to moderate tidal volumes and nasal breathing, the penetration into the lungs is negligible. For larger tidal volumes and oral inhalation, doses of interest may extend into segmental bronchi. SO₂ can only reach the gas-exchange region of the lungs after sorption onto fine particles; and the available particle surface is limited except when very large mass concentrations of fine particles are present (WHO 1987; WHO 1994a).

Another special consideration for SO₂ is that there is a great variation in susceptibility to a bronchoconstrictive response. Persons having asthma or atopy can be about 10 times more responsive than healthy subjects.

Nitrogen dioxide

Ambient concentrations of NO₂ in air are variable. Natural background concentrations in ambient air can be less than 1 µg/m³ to more than 9 µg/m³. In ambient air in cities annual mean concentrations can range from 20-90 µg/m³, with hourly maximum concentrations from 75-1000 µg/m³ (WHO 1994a). Concentrations of NO₂ in indoor air can reach average concentrations of 200 µg/m³ over several days, with hourly maximum concentrations of 2000 µg/m³ where there are unvented gas heating appliances and poor ventilation (WHO 1994a).

NO₂ is a relatively water-insoluble gas and appreciable amounts of inhaled NO₂ can penetrate to, and elicit biological responses in, small lung airways. As with SO₂, there is much greater susceptibility to a bronchoconstrictive response in individuals with asthma.

Carbon monoxide

Natural ambient concentrations of CO range between 0.01-0.23 mg/m³ (WHO 1994a). In urban environments, mean concentrations over eight hours are usually less than 20 mg/m³, and one-hour peak levels are usually less than 60 mg/m³. Highest concentrations are usually measured near major roads, as

vehicles are the major source of CO. Concentrations of CO can be high in vehicles, underground car parks, road tunnels and in other indoor environments where combustion engines operate with inadequate ventilation. In these circumstances, mean concentrations of CO can reach up to 115 mg/m³ for several hours. In houses with unflued combustion heaters, peak CO concentrations can reach up to 60 mg/m³ (WHO 1994a).

CO exerts its toxic effects after binding with hemoglobin in the capillaries of the lungs. It is not removed in larger airways.

Ozone

Background concentrations of O₃ in remote and relatively unpolluted parts of the world are often in the range of 40 to 70 µg/m³ as a one-hour average. In cities and areas downwind of cities, maximum mean hourly concentrations can be as high as 300 to 400 µg/m³. High O₃ concentrations can persist for 8 to 12 hours per day for several days, when atmospheric conditions favour O₃ formation and poor dispersion conditions exist (Section 2.2.2). O₃ is normally at higher concentrations in ambient air outdoors than in indoor air.

O₃ is a relatively water-insoluble gas. It reacts and produces toxic effects on small airway surfaces. The dose-delivery is greatest in terminal and respiratory bronchioles. Unlike NO₂ and SO₂, there is very little difference in lung function responsiveness between asthmatics and healthy subjects. There is, however, a great variability in individual responsiveness that is not yet understood.

Particulate matter (PM)

Concentrations of particulate matter in air are highly variable. In some areas very high levels occur naturally due to wind-blown dust from arid soils. Human activities, such as fires, overgrazing, agricultural practices and mining, can increase particle concentrations in air in remote areas. In Western Europe and North America efforts to control emissions of particulate matter have generally resulted in lower levels of particles in ambient air. In many cities the annual average concentrations of PM₁₀ are in the range 20 to 50 µg/m³ for ambient air (WHO 19994a). However, annual average concentrations in some cities in Eastern Europe and in some developing countries can be above 100 µg/m³. Concentrations of PM_{2.5} are usually about 45 to 65% of the concentrations of PM₁₀.

Concentrations of particulate matter in indoor air can be extremely high when biomass fuels such as wood, crop residues and dung, or coal are used for cooking or heating. Indoor concentrations of up to 2000 to 5000 µg/m³ of total suspended particulate matter have been measured in some circumstances during cooking with biomass fuels in developing countries (Section 4.2).

Particle size is a critical factor in internal dose distribution. The location of initial deposition in the airways depends on particles size, with coarse particles being deposited in the upper respiratory tract and fine particles being transported to the lower respiratory tract. The rate of deposition in conductive airways also depends on particle size (see Section 2.1).

Lead

Levels of lead found in air, food, water and soil/dust vary widely throughout the world and depend on the degree of industrial development, urbanization and lifestyle factors. Ambient air levels over 10 µg/m³ have been reported in urban areas near smelters, whereas lead levels below 0.1 µg/m³ have been found in cities where leaded petrol is no longer used. In cities of developing countries traffic-related lead levels range between 0.3 and 1 µg/m³ with extreme annual mean values between 1.5-2 µg/m³.

Lead is inhaled as fine particles and deposited in the lungs. Since lead uptake by blood is dependent on deposition pattern and solubility (which is influenced by chemical form and particle size), total lead content is only a surrogate for the biologically effective dose. Furthermore, as noted in earlier sections, airborne lead can also reach humans indirectly via deposition on soil and vegetation, and through food chains.

Other air pollutants

In nearly all countries routine air quality monitoring programmes are concentrated almost exclusively on selected classic pollutants. Relatively few of the other air pollutants (considered in detail in Section 3.2) are routinely monitored, except in a few occupational environments. Data are sometimes collected on personal exposures to classic and other air pollutants, but seldom are there standardised protocols for sample collection and analysis, and data processing and storage. As a result, estimates for personal exposures are generally based on highly uncertain models and the assumptions built into them. In general, the situation with respect to ambient concentrations of other air pollutants considered in section 3.2 is characterized as described in the second columns of Tables 3.2 and 3.3 in that section.

2.4 Role of guidelines and standards

The purpose of these guidelines is to provide a basis for protecting public health from the adverse effects of air pollution and for eliminating, or reducing to a minimum, those air contaminants that are known to be, or are likely to be, hazardous to human health and well being (WHO 1987).

These *Guidelines* should provide background information for nations engaged in setting air quality standards, although their use is not restricted to this. The *Guidelines* are not intended to be standards. In moving from guidelines to standards, prevailing exposure levels and environmental, social, economic and cultural conditions in a nation or region should be taken into account (see Section 2.4.4). In certain circumstances there may be valid reasons to pursue policies, which will result in pollutant concentrations above or below the guideline values (WHO 1987).

2.4.1 The 1987 WHO *Air Quality Guidelines for Europe*

Already in 1958, WHO recognized that air pollution was a threat to the health and well-being of peoples throughout the world. As a consequence, WHO has taken its first steps to marshal the facts and to suggest procedures by which preventive and remedial action may be taken by its member countries, before serious harm is done to the health of their people (WHO 1958). In a forthcoming Technical Report, criteria for guidelines for air quality are described as tests, which permit the nature and magnitude of air pollution on man and the environment to be determined. Guidelines were defined as sets of concentrations and exposure times that are associated with specific effects of varying degrees of air pollution on man, animals, vegetation and on the environment in general (WHO 1964). In 1972, guidance as to the levels of ambient air pollutants that constitute hazards to health were first formulated for the "classic" compounds SO₂, SPM, CO and photochemical oxidants (WHO 1972). These attempts culminated in 1987 in the publication of the *Air Quality Guidelines for Europe* for a much extended set of air pollutants (WHO 1987).

In the *Air Quality Guidelines for Europe* (WHO 1987), relevant information on the pollutants was carefully considered during the process of establishing guideline values. It was noted that ideally, guideline values should represent concentrations of chemical compounds in air that would not pose any hazard to the human population. However, the realistic assessment of human health hazards necessitated a distinction between absolute safety and acceptable risk. To aim at achieving absolute safety, one would need to know the complete dose-response relationships in individuals in relation to all sources of exposure. Moreover, the type of toxic effect elicited by specific pollutants or their mixtures; the existence (or not) of "thresholds" for specified toxic effects; the significance of interactions; and the variation in

sensitivity and exposure levels within the human population would all have to be known. However, such comprehensive and conclusive data on environmental contaminants are not always available. Scientific judgement and consensus, therefore, play an important role in establishing acceptable levels of population exposure.

Criteria for endpoints other than carcinogenicity

For compounds reportedly without carcinogenic effects, or for which data on carcinogenicity were lacking or insufficient, the starting-point for the derivation of guideline values was to define the lowest concentration at which effects are observed in humans, animals and plants. The difference between the lowest level at which an effect is observed, and the level, at which no effect is observed, is among the factors included in judgements concerning the appropriate margin of protection. In the case of irritant and sensory effects on human, it was considered desirable where possible to determine the no-effect level.

Criteria for selection of a lowest-observed adverse-effect level (LOAEL)

The distinction between adverse and non-adverse effects was stated to pose considerable difficulty. The definition of an adverse effect was given as "any effect resulting in functional impairment and/or pathological lesions that may affect the performance of the whole organism, or which contributes to a reduced ability to respond to an additional challenge". Even with such a definition, a significant degree of subjectivity and uncertainty was found to be present. To resolve this difficulty, data were ranked in three categories: (i) Single observations, even of potential health concern, were not readily used as a basis for guideline values; (ii) A lowest-observed-effect level might result in pathological change, and therefore was considered a higher degree of health concern; (iii) A substantial change in the direction of pathological effects has had a major influence on guideline considerations.

Criteria for selection of uncertainty factors

The toxicology of pollutants, including the type of metabolites formed, variability in metabolism, or response in humans suggesting hypersusceptible groups, and the likelihood that the compound or its metabolites will accumulate in the body, was taken into account by uncertainty factors. Uncertainty factors were essentially determined through scientific judgement in consensus.

Criteria for selection of averaging times

As a chemical may cause acute, minor, reversible effects after brief exposure, and irreversible or incapacitating effects after prolonged exposure, expert judgement had to be applied, based on the weight of the evidence available. Generally, when short-term exposures lead to adverse effects, short-term averaging times were recommended. In other cases, exposure-response knowledge was sufficient to recommend a long-term average.

Criteria for consideration of sensory effects

Some of the substances selected for evaluation have malodorous properties at concentrations far below those at which toxic effects occur. Although odour annoyance cannot be regarded as an adverse health effect in a strict sense, it affects the quality of life. Therefore, odour threshold levels (detection threshold, recognition threshold, and nuisance threshold) for such chemicals have been indicated where relevant and used as a basis for separate guideline values.

Criteria for Carcinogenic Endpoint

Cancer risk assessment involves a qualitative assessment of how likely it is that an agent is a human carcinogen, and a quantitative assessment of the cancer rate the agent is likely to cause at given level and duration of exposure.

Quantitative assessment of carcinogenicity

The decision to consider a substance as a carcinogen is based on the classification criteria of the International Agency for Research on Cancer:

Group 1 – Proven human carcinogens.

Group 2 – Probable human carcinogens. This category is divided into two subgroups according to higher (Group 2A) and lower (Group 2B) degrees of evidence.

Group 3 – Unclassified chemicals

It was decided that for all chemicals not categorized in Groups 1 and 2A guidelines values based on non-carcinogenic health endpoints were to be given.

Quantitative assessment of carcinogenic potency

Quantitative risk assessment was found to include the extrapolation of risk from relatively high dose levels to relatively low dose levels. High dose levels are characteristic of animal experiments or occupational exposures, where cancer responses can be measured. Low dose levels are of concern in environmental protection, where such risks are too small to be measured directly, either in animal or epidemiological studies.

In the 1987 guidelines, the risk associated with lifetime exposure to a certain concentration of a carcinogen in the air has generally been estimated by linear extrapolation. The carcinogenic potency has been expressed as the incremental unit risk estimate. The incremental unit risk estimate of an air pollutant was defined as "the additional lifetime cancer risk occurring in a hypothetical population in which all individuals are exposed continuously from birth throughout their lifetimes to a concentration of $1 \mu\text{g}/\text{m}^3$ of the agent in the air they breathe".

Necessary assumptions for the average relative risk method were: (i) the response (measured as relative risk) is some function of cumulative dose or exposure; (ii) there is no threshold dose for carcinogens; (iii) the linear extrapolation of the dose-response curve towards zero gives an upper-bound conservative estimate of the true risk function, if the unknown (true) dose-response curve has a sigmoidal shape; (iv) there is constancy of the relative risk in the specific study situation.

Advantages and limitations of the method used in the 1987 guidelines were extensively discussed.

2.4.2 The development of the guideline setting process

During the development of the 1987 WHO *Guidelines*, emphasis was placed on specifying the guidelines in terms of a concentration and averaging time, which would define an exposure unlikely to produce adverse effects, even in the majority of those members of groups with increased sensitivity to the pollutant in question. Small changes, or so called physiological changes, for example in indices of lung function, were agreed to fall outside the definition of "adverse effects".

For many of the classic air pollutants the guidelines were based on controlled exposure studies, or on epidemiological studies which demonstrated a threshold of effect. Uncertainty factors, or protection factors, were applied to the published data to allow for more sensitive individuals who might not have been adequately represented in the studies. The guidelines were statements of levels of exposure at which, or below which, no adverse effects can be expected. This does not imply that as soon as a guideline is exceeded

adverse effects occur, but rather that the likelihood of such effects occurring would be increased. The guidelines have sometimes been misinterpreted as Lowest-Observed-Adverse-Effect Levels (LOAEL), which they are not.

Genotoxic carcinogens were treated differently: a Unit Risk was estimated from calculating the additional risk from a lifetime exposure to a unit concentration of the carcinogen. For a few pollutants, including O₃, the guideline was specified as a range of concentrations.

During the period between the publication of the 1987 *Guidelines* and their revision, a number of meetings were held to consider how the guidelines might be updated (WHO 1992a; WHO 1994a; WHO 1995a; WHO 1995b; WHO 1995c; WHO 1996a). A number of important decisions were made and these are detailed in the reports of the meetings. Among these, the desirability of providing guidance on the exposure-response relationship for as many pollutants as possible was stressed. This has been an important feature of the revised guidelines.

In the updated version of the *Air Quality Guidelines for Europe*, a similar approach was applied as in the 1987 air quality guidelines. However, total tolerable intakes were calculated for multimedia pollutants first, and then adequately partitioned among the different exposure routes. The term "protection" factor used in the 1987 guidelines was abandoned. Instead, uncertainty factors to account for the extrapolation from animal to man (alternatively, human equivalent concentrations were calculated), and to account for individual variability. Wherever information on inter- and intraspecies differences in pharmacokinetics was available, data-derived uncertainty factors were employed. Additional uncertainty factors were applied whenever necessary to account for the nature and severity of the observed effects and for the adequacy of the database. For most of the compounds considered, information on the dose/exposure-response relationship was provided, both to give policy makers clear guidelines on the possible impact of the pollutant at different exposure levels, and to permit an informed decision making process to take place. For some compounds, e.g. platinum, a guideline value was considered unnecessary as exposure through ambient air levels was considerably below the lowest level at which effects were seen. For other compounds, for example PM₁₀, no threshold of effect could be found and therefore no guideline value could be derived. Instead, exposure-effect information highlighting the public health impact of different pollutant levels was provided.

In the updating process for carcinogens, a more flexible approach than in the 1987 *Air Quality Guidelines* was applied. Although, as a default approach, low-dose risk extrapolation was conducted for groups 1 and 2A, and an uncertainty factor approach applied in the case of agents in groups 2B and 3, the mechanism of action was the determining factor for the method of assessment. Hence, it was decided that compounds classified under 1 or 2A could be assessed using uncertainty factors, if evidence for a non-threshold mechanism of carcinogenicity existed. By way of contrast, compounds classified under 2B could be assessed by low-dose extrapolation methods, if a non-threshold mechanism of carcinogenicity in animals was proven. Flexibility was also given in terms of the choice of the extrapolation model, depending on the available data (including data for PBPK modelling). The linearized multistage model was used as a default approach. Besides providing unit-risk estimates in cases where low-dose risk extrapolation was conducted, levels associated with excess cancer risk of 1:10 000, 1:100 000 and 1:1 000 000 were calculated.

In evaluating ecotoxic effects of major air pollutants, the effects of O₃, nitrogen-containing compounds and SO₂ on vegetation (crops, forests) were evaluated. Besides the deposition effects of nitrogen compounds, those of sulphates and total acidity were also evaluated. The principles applied were those developed by the Working Group on Effects under the Convention on Transboundary Air Pollution of the UNECE, and the evaluations were carried out jointly with that group. Critical levels and critical loads were derived. Critical levels are concentrations of pollutants in the atmosphere above which direct adverse effects on receptors such as plants, ecosystems or materials may occur. Critical loads represent

quantitative estimates of an exposure, in the form of deposition, to one or more pollutants, below which significant harmful effects on specified sensitive elements of the environment will not occur.

2.4.3 Exposure-response relationships

These guidelines place some emphasis on epidemiological data. Epidemiological studies are sometimes preferable to controlled exposure studies in that they provide information on responses in populations and on the effects of real exposures to pollutants and pollutant mixtures. However, the results of epidemiological studies are less easy to use than the results of controlled exposure studies in defining guidelines.

Most epidemiological studies relate responses to concentrations of pollutants, often measured at single fixed site monitors. These data tell us little about the exposure-response relationships of individuals but, rather, tell us about the concentration-response relationship of the population studied. This relationship depends upon the pattern of exposure of the population considered and thus the relationship may vary from country-to-country. When the results of time-series studies on the effects of particles in the USA and Europe were compared, only small differences were seen (Wilson and Spengler 1996). But whether the differences were, in fact, due to differences in exposure patterns, or to differences in the toxicity of the ambient particle aerosol, or differences in the particle indices that were measured, remains unknown. Differences in response to air pollution may occur between developed and developing countries.

For both particles and O₃ an assumption of linearity was made when defining the exposure-response relationships included in the revised guidelines. Extrapolation beyond the available data is unwise, since there is evidence to suggest the exposure-response relationship may become less steep as ambient levels of particles rise (Schwartz and Marcus 1990; Lippmann and Ito 1995). For O₃, the relationship at low concentrations may be concave upwards. These are important points to be considered if the guidelines are to be used in countries with levels of pollution different from the range covered by the guidelines.

2.4.4 Moving from guidelines to standards

An air quality standard is a description of a level of air quality that is adopted by a regulatory authority as enforceable. At its simplest, an air quality standard should be defined in terms of one or more concentrations and averaging times. In addition, other data should be added, including information on the form of exposure (e.g. outdoor), on monitoring which is relevant in assessing compliance with the standard, and on methods of data analysis, quality assurance and quality control.

In some countries the standard is further qualified by defining an acceptable level of attainment or compliance. Levels of attainment may be defined in terms of the fundamental units that define the standard. For example, if the unit defined by the standard is the day, then a requirement for 99% compliance allows the standard to be exceeded by three days a year. The cost of meeting any standard is likely to depend on the degree of compliance required. Consequently, it may be sensible to consider carefully the costs and benefits of different levels of compliance when deciding on the standard.

It is important to remember that the development of air quality standards is only a part of an adequate air quality management strategy (see Chapter 6). Legislation, identification of authorities responsible for enforcement of emission standards and penalties for exceedances are all also necessary. Emission standards may play an important role in the management strategy, especially if exceedance of air quality standards is used as a trigger for abatement measures. These may be needed at both the national and the local level.

Air quality standards are also important in informing the public about air quality. Used in this way they are a double-edged weapon as the public commonly assumes that once a standard is exceeded adverse effects on health will occur. This may not be the case, as discussed in Section 2.4.2.

2.4.5 Factors to be considered in setting an air quality standard

The process of setting standards is simplified when the WHO *Guidelines* provide a guideline value. In general, local review of the health effects database may be unnecessary. However, when published studies on associations between air pollutants and health effects in the local region are available, it is prudent for the authorities responsible for setting national standards to give them due consideration in their evaluation of the applicability of the WHO *Guidelines for Air Quality*. If no single value is offered but rather a Unit Risk estimate, or a concentration-response relationship is defined, then the following should be considered in setting standards:

- a. The nature of the effects indicated should be examined and decisions made as to whether they represent adverse health effects.
- b. Special populations at risk should be considered.

Sensitive populations or groups are defined here as those impaired by concurrent disease or other physiological limitations and those with specific characteristics that make the health consequences of exposure more significant (e.g. developmental phase in children). In addition, other groups may be judged to be at special risk because of their exposure patterns and because the effective dose for a given exposure may be increased, as in the case of children for example. The sensitive populations may vary between countries due to differences in the number of people with inadequate access to medical care, in the prevalence of certain endemic diseases, in the prevailing genetic factors, or in the prevalence of debilitating diseases or nutritional deficiencies. The regulator needs to decide which specific groups at risk should be protected by the standards.

These factors have been considered in the development of these guidelines and have been included when a guideline value has been offered.

The WHO Guideline for SPM was developed to address the health effects associated with exposures to particulate matter released into the ambient outdoor environment, as well as the secondary ambient particulate matter found in the atmosphere from gaseous precursors (e.g. sulphate, nitrate, and the organic products of photochemical reaction sequences). The exposures take place in the outdoor air and in indoor microenvironments following infiltration of the particles into occupied indoor spaces. The numerical effects relationships described in the *Guideline* were based on size-selective mass concentration data that were obtained from numerous, and generally consistent, study results for urban population in North and South America and Europe. However, the transfer of these relationships to other parts of the world should be conducted with caution for several reasons. These include:

1. The chemical composition of the particles may be substantially different in the nation developing the air quality standard, when compared with the regions in which the community studies were conducted and which contributed to the development of the guideline.

Mass concentration in selected particle size ranges (i.e. PM_{10} and/or $PM_{2.5}$) is, at best, a surrogate index for the biologically active components in the mixture. The mixture in the communities studied in the development of the guideline was dominated by primary and secondary effluents from motor vehicles, central station power generation, and space heating by natural gas and light oil combustion. The mixtures in communities in less developed countries may be different. They may be dominated by the effluents of inefficient combustion units and wind-blown soil, with quite different toxic properties from those in the studies used by WHO.

2. The particle concentration range may be substantially different.

The WHO response-concentration relationships for particulate matter are based on a linear model of response, which is a suitable approximation within the range of particle concentrations typically found in the studies used by WHO. However, it is well established that the coefficient tends to decrease toward the upper end of the concentration range. In addition, the slope

established for the lower concentrations cannot reliably be used to predict responses at the higher mass concentration levels that may be observed in urban areas in less developed countries.

3. The responsiveness of the population may be substantially different. The WHO response-concentration relationships were based on responses of populations that were mostly well nourished and who had access to modern health services. By contrast, the populations exposed to higher concentrations of particles in less developed countries are likely to have lower quality nutrition and health care. Alternatively, they may well be a hardy survivor population with fewer people in a fragile condition of health. It is currently unclear whether the responsiveness of the populations in other parts of the world differ from those studies in North and South America and Europe.

For these reasons, the WHO response-concentration relationships should be used with caution as predictors of health impacts in less developed countries. In particular, the relationships should not be extrapolated to concentrations beyond the ranges given in Figures 3.6 to 3.8.

2.4.6 Uncertainty factors

In development of these guidelines, the size of uncertainty factors applied to published data in deriving a guideline was considered to be a matter for expert judgement, rather than prescription (WHO 1987). Where the database was strong, smaller uncertainty factors were used than where the database was weak. Database strength depends upon the availability of published studies relevant to the circumstances of a country for which the guidelines are intended. In moving from guidelines to country-specific standards, the size of the uncertainty factors may require revision.

Impact assessment or risk assessment plays an important part in setting standards. This will depend on exposure and an assessment of population exposure will be required. In considering the appropriate form of exposure assessment needed attention should be paid to the database from which the guideline was derived.

Acceptability of risk varies from country to country and is in part dependent on social conditions, priorities and on the other risks to which a population is exposed. In some countries a risk that would be unacceptable elsewhere might be considered small.

2.4.7 Cost-benefit analysis and other factors

The costs of reducing levels of air pollution should be weighed against the benefits produced. Cost-benefit analysis is one way of formally setting out this process, and it uses money as a common currency for costs and benefits.

The concept is that pollutant concentrations are reduced at least until the associated costs and benefits are balanced: more strictly, emissions are reduced until the marginal costs and benefits are equal. While the cost of abatement measures may be relatively easy to quantify, this may not be the case when non-technical measures are employed. In any case, it is likely to be more difficult to assign monetary values to the benefits obtained. Some aspects of reduced morbidity, such as a reduction in the use of hospital facilities and drugs, are comparatively easy to cost; others such as reductions in premature deaths and symptoms are not. Applying monetary values based on a "willingness to pay" basis has been suggested, and has been accepted as appropriate by many health economists. This approach has been seen as preferable to one based only on such indices as loss of production, earnings or hospital expenses. Cost-benefit analysis is discussed in detail in Section 7.9.

In practice the strict theoretical precepts of cost-benefit analysis should be supplemented by broader social and economic considerations. This process is sometimes described as "Stakeholder Input". Stakeholders are defined as those who have an interest in the outcome of a decision making process. The aim is to ensure as far as possible social equity and fairness to all involved parties. An adequate and early involvement of all concerned stakeholders will increase the transparency of the process and is likely to increase the acceptability of the outcome.

Factors other than monetary concerns also need to be evaluated when considering the setting of national air quality standards. These include the technical capacity of a country to achieve and maintain an air quality within the desired standards; the social implications of adopting certain standards to ensure an equity of costs and benefits among the population; and environmental costs and benefits.

3. Health-based Guidelines

In this chapter the key air pollutants, also termed "classic" air pollutants - SO₂, NO₂, CO, O₃, SPM and lead - are briefly described with respect to health risk evaluations and recommended guideline values.

Particular emphasis is given to PM₁₀ and PM_{2.5}. The information available for a number of other air pollutants (including inorganic compounds, organic volatile components and certain indoor air pollutants such as radon) is also summarized and presented in a synoptic table. These sections are based upon papers prepared for the updating of the *Air Quality Guidelines for Europe* (WHO 1999a) and exposure information obtained from various regions. A third section considers factors, such as altitude, humidity, temperature, nutritional status, health status, vulnerability etc., that affect the actual health impact of air pollutants on the individual and vulnerable groups.

3.1 Key air pollutants

Sulphur dioxide

Short-period exposures (less than 24 hours)

Most information on the acute effects of SO₂ comes from controlled chamber experiments on volunteers exposed to SO₂ for periods ranging from a few minutes up to one hour (WHO 1999a). Acute responses occur within the first few minutes after commencement of inhalation. Further exposure does not increase effects. Effects include reductions in the mean forced expiratory volume over one second (FEV₁), increases in specific airway resistance (sRAW), and symptoms such as wheezing or shortness of breath.

These effects are enhanced by exercise that increases the volume of air inspired, as it allows SO₂ to penetrate further into the respiratory tract.

A wide range of sensitivity has been demonstrated, both among normal subjects and among those with asthma. People with asthma are the most sensitive group in the community. Continuous exposure-response relationships, without any clearly defined threshold, are evident. To develop a guideline value, the minimum concentrations associated with adverse effects in asthmatic patients exercising in chambers have been considered. An example of an exposure-response relationship for asthmatic patients is shown in Figure 3.1, expressed in terms of change in FEV₁ after a 15-minute exposure.

Exposure over a 24-hour period

Information on the effects of exposure averaged over a 24-hour period is derived mainly from epidemiological studies in which the effects of SO₂, SPM and other associated pollutants are considered.

Exacerbation of symptoms among panels of selected sensitive patients seems to arise in a consistent manner when the concentration of SO₂ exceeds 250 µg/m³ in the presence of SPM. Several more recent studies in Europe have involved mixed industrial and vehicular emissions now common in ambient air.

At low levels of exposure (mean annual levels below 50 µg/m³; daily levels usually not exceeding 125 µg/m³) effects on mortality (total, cardiovascular and respiratory) and on hospital emergency admissions for total respiratory causes and chronic obstructive pulmonary disease (COPD), have been consistently demonstrated. These results have been shown, in some instances, to persist when black smoke and SPM levels were controlled for, while in others no attempts have been made to separate the pollutant effects. In these studies no obvious threshold levels for SO₂ has been identified.

Long-term exposure

Earlier assessments examined findings on the prevalence of respiratory symptoms, respiratory illness frequencies, or differences in lung function values in localities with contrasting concentrations of SO₂ and SPM, using data from the coal-burning era in Europe. The lowest-observed-adverse-effect level of SO₂

was judged to be at an annual average of $100 \mu\text{g}/\text{m}^3$, when present with SPM. More recent studies related to industrial sources of SO_2 , or to the changed urban mixture of air pollutants, have shown adverse effects below this level. But a major difficulty in interpretation is that long-term effects are liable to be affected not only by current conditions, but also by the qualitatively and quantitatively different pollution of earlier years. However, cohort studies on differences in mortality between areas with contrasting pollution levels indicate that mortality is more closely associated with SPM, than with SO_2 .

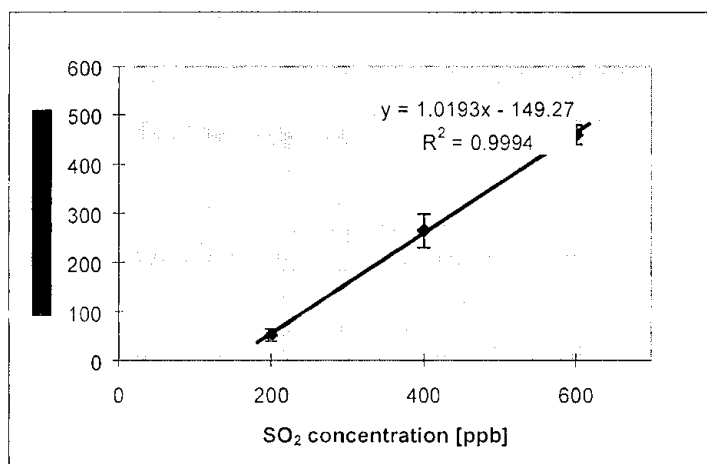


Figure 3.1 Mean change of FEV₁ in asthmatics with changing SO₂ concentrations

Guidelines

Based upon controlled studies with asthmatics exposed to SO_2 for short periods, it is recommended that a value of $500 \mu\text{g}/\text{m}^3$ (0.175 ppm) should not be exceeded over averaging periods of 10 minutes. Because exposure to sharp peaks depends on the nature of local sources, no single factor can be applied to estimate corresponding guideline values over longer periods, such as an hour. Day-to-day changes in mortality, morbidity, or lung function related to 24-hour average concentrations of SO_2 are necessarily based on epidemiological studies, in which people are in general exposed to a mixture of pollutants; and guideline values for SO_2 have previously been linked with corresponding values for SPM. This approach led to a previous guideline 24-hour average value of $125 \mu\text{g}/\text{m}^3$ (0.04 ppm) for SO_2 , after applying an uncertainty factor of two to the lowest-observed-adverse-effect level. In more recent studies, adverse effects with significant public health importance have been observed at much lower levels of exposure. However, there is still uncertainty as to whether SO_2 is the pollutant responsible for the observed adverse effects, or whether it is a surrogate for SPM with diameters below $10 \mu\text{m}$ or $2.5 \mu\text{m}$, or even for some other correlated substance. There is no basis for numerical changes of the 1987 guideline values for SO_2 and thus $125 \mu\text{g}/\text{m}^3$ for an averaging time of 24 hours and $50 \mu\text{g}/\text{m}^3$ as an annual mean are recommended. However, the current guideline values are no longer linked with SPM.

Nitrogen dioxide

Short-term exposure effects

Available data from animal toxicology experiments indicate that acute exposure to NO_2 concentrations of less than $1880 \mu\text{g}/\text{m}^3$ (1 ppm) rarely produce observable effects. Normal healthy humans, exposed at rest or with light exercise for less than two hours to concentrations above $4700 \mu\text{g}/\text{m}^3$ (2.5 ppm), experience pronounced decreases in pulmonary function; generally, normal subjects are not affected by concentrations less than $1880 \mu\text{g}/\text{m}^3$ (1.0 ppm). One study showed that the lung function of subjects with chronic obstructive pulmonary disease is slightly affected by a 3.75-hour exposure to $560 \mu\text{g}/\text{m}^3$ (0.3 ppm).

A wide range of findings in asthmatics has been reported. Asthmatics are likely to be the most sensitive subjects, although uncertainties exist in the health database. The lowest concentration causing effects on pulmonary function was reported from two laboratories that exposed mild asthmatics for 30-110 minutes to $565 \mu\text{g}/\text{m}^3$ (0.3ppm) NO_2 during intermittent exercise. However, neither of these laboratories was able to replicate these responses with a larger group of asthmatic subjects. One of these studies indicated that NO_2 can increase airway reactivity to cold air in asthmatic subjects. At lower concentrations, the pulmonary function of asthmatics was not changed significantly.

NO_2 increases bronchial reactivity, as measured by the response of normal and asthmatic subjects following exposure to pharmacological bronchoconstrictor agents, even at levels that do not affect pulmonary function directly in the absence of a bronchoconstrictor. Some, but not all, studies show increased responsiveness to bronchoconstrictors at NO_2 levels as low as $376\text{-}565 \mu\text{g}/\text{m}^3$ (0.2 to 0.3 ppm); in other studies, higher levels had no such effect. Because the actual mechanisms of effect are not fully defined and NO_2 studies with allergen challenges showed no effects at the lowest concentration tested ($188 \mu\text{g}/\text{m}^3$; 0.1 ppm), full evaluation of the health consequences of the increased responsiveness to bronchoconstrictors is not yet possible. Recent studies have shown an increased reactivity to natural allergens in the same concentration range.

The results of repetitive exposures of such individuals, or the impact of single exposures on more severe asthmatics, are not known.

Long-term exposure effects

Studies with animals have clearly shown that several weeks to months of exposure to NO_2 concentrations of less than $1880 \mu\text{g}/\text{m}^3$ (1ppm) causes a range of effects, primarily in the lung, but also in other organs such as the spleen and liver, and in blood. Both reversible and irreversible lung effects have been observed. Structural changes range from a change in cell type in the tracheobronchial and pulmonary regions (at a lowest reported level of $640 \mu\text{g}/\text{m}^3$), to emphysema-like effects. Biochemical changes often reflect cellular alterations, with the lowest effective NO_2 concentrations in several studies ranging from $380\text{-}750 \mu\text{g}/\text{m}^3$.

NO_2 levels of about $940 \mu\text{g}/\text{m}^3$ (0.5ppm) also increase susceptibility to bacterial and viral infection of the lung. There are no epidemiological studies that can be confidently used to quantify a long-term NO_2 exposure or concentration likely to be associated with the induction of unacceptable health risks in children or adults. Homes with gas cooking appliances have peak levels of NO_2 in the same range as levels causing effects in some animal and human clinical studies. Epidemiological studies evaluating the effects of NO_2 exposures in such homes have been conducted. In general, epidemiological studies of adults and infants (less than 2 years old) show no significant effect of the use of gas cooking appliances on respiratory illness; nor do the few available studies of infants and adults show any associations between pulmonary function changes and gas stove use. However, children 5-12 years old are estimated to have a 20% increased risk for respiratory symptoms and disease for each increase of $28 \mu\text{g}/\text{m}^3$ NO_2 (2-week average), where the weekly average concentrations are in the range of $15\text{-}128 \mu\text{g}/\text{m}^3$ or possibly higher. However, the observed effects cannot clearly be attributed to either the repeated short-term high level peak, or to long-term exposures in the range of the stated weekly averages (or possibly both).

The results of outdoor studies consistently indicate that children with long-term ambient NO_2 exposures exhibit increased respiratory symptoms that are of longer duration, and show a decrease in lung function.

However, outdoor NO_2 epidemiological studies, as with indoor studies, provide little evidence that long-term ambient NO_2 exposures are associated with health effects in adults. None of the available studies yields confident estimates of long-term exposure-effect levels, but available results most clearly suggest respiratory effects in children at annual average NO_2 concentrations in the range of $50\text{-}75 \mu\text{g}/\text{m}^3$ or higher.

Guidelines

Despite the large number of acute controlled exposure studies in humans, several which used multiple concentrations, there is no evidence for a clearly defined concentration-response relationship for NO₂ exposure. For acute exposures, only very high concentrations (>1,000 ppb; 1,990 µg/m³) affect healthy people. Based on small changes in lung function, often less than a 5% drop in FEV₁ with NO₂ exposure, and changes in airway responsiveness in studies on asthmatics and patients with chronic obstructive pulmonary disease, a range of 365-565 µg/m³ (0.20 to 0.30 ppm) is a clear lowest-observed-effect-level.

A 50% margin of safety is proposed because of the reported statistically significant increase in response to a bronchoconstrictor with exposure to 188 µg/m³, and because of a meta-analysis suggesting changes in airway responsiveness below 365 µg/m³. However, the significance of the response at 188 µg/m³ has been questioned on the basis of an inappropriate statistical analysis and a failure to replicate the findings.

Based on these human clinical data, a one-hour guideline of 200 µg/m³ is proposed. At double this recommended guideline (400 µg/m³), there is evidence to suggest possible small effects in pulmonary function of asthmatics. Should the asthmatic be exposed either simultaneously or sequentially to NO₂ and an aero-allergen, the risk of an exaggerated response to the allergen is increased.

Although there is no particular study or set of studies that clearly supports selection of a specific numerical value for an annual average guideline, there is need to protect the public from chronic NO₂ exposures. Based on the studies reviewed, it is not currently possible to select a well-supported value; but a previous review on NO₂ recommended an annual value of 40 µg/m³ (WHO 1997c). In the absence of support for an alternative value, this figure is recognized as an air quality guideline.

Carbon monoxide

CO diffuses rapidly across alveolar, capillary and placental membranes. Approximately 80-90 % of the absorbed CO binds with hemoglobin to form carboxyhemoglobin (COHb), which is a specific biomarker of exposure in blood. The affinity of hemoglobin for CO is 200-250 times that for oxygen. During exposure to a fixed concentration of CO, the COHb concentration increases rapidly at the onset of exposure, starts to level off after 3 hours, and reaches a steady-state after 6-8 hours of exposure. It is noted that the elimination half-life in the fetus is much longer than in the pregnant mother.

The binding of CO with hemoglobin to form COHb reduces the oxygen-carrying capacity of the blood and impairs the release of oxygen from hemoglobin. These are the main causes of tissue hypoxia produced by CO at low exposure levels. At higher concentrations, the rest of the absorbed CO binds with other heme proteins such as myoglobin and with cytochrome oxidase and cytochrome P-450. The toxic effects of CO first become evident in organs and tissues with high oxygen consumption, such as the brain, heart, exercising skeletal muscle and the developing fetus.

Severe hypoxia due to acute CO poisoning may cause both reversible, short-lasting, neurological deficits and severe, often delayed, neurological damage. The neurobehavioural effects include impaired coordination, tracking, driving ability, vigilance and cognitive performance at COHb levels as low as 5.1-8.2%.

In apparently healthy subjects, the maximal exercise performance decreases at COHb levels as low as 5%. The regression between the percentage decrease in maximal oxygen consumption and the percentage increase in COHb concentration appears to be linear, with a fall in oxygen consumption of approximately 1% for each 1% rise in COHb level above 4%.

In controlled studies involving patients with documented coronary artery disease, mean pre-exposure COHb levels of 2.9-5.9% (corresponding to post-exercise COHb levels of 2.0-5.2%) have been associated with a significant shortening in the time to onset of angina, with increased electrocardiographic changes

and with impaired left ventricular function during exercise. In addition, ventricular arrhythmias may be increased significantly at the higher range of mean post-exercise COHb levels. Epidemiological and clinical data indicate that CO from smoking and environmental or occupational exposures may contribute to cardiovascular mortality and to the early course of myocardial infarction. Current data from epidemiological studies and experimental animal studies indicate that common environmental exposures to CO in the developed world would not have atherogenic effects on humans (WHO 1999a).

During pregnancy, endogenous production of CO is increased so that maternal COHb levels are usually about 20% higher than the non-pregnant values. At steady-state, the fetal COHb levels are as much as 10-15% higher than the maternal COHb levels. There is a well-established and probably causal relationship between maternal smoking and low birth weight at fetal COHb levels of 2-10%. In addition, maternal smoking seems to be associated with a dose-dependent increase in perinatal deaths and with behavioural effects in infants and young children.

Guidelines

Endogenous production of CO results in COHb levels of 0.4-0.7% in healthy subjects. During pregnancy, elevated maternal COHb levels of 0.7-2.5% have been reported, mainly due to increased endogenous production. The COHb levels in non-smoking general populations are usually 0.5-1.5% due to endogenous production and environmental exposures. Non-smoking people in certain occupations (car drivers, policemen, traffic wardens, garage and tunnel workers, firemen etc.) can have long-term COHb levels up to 5%, and heavy cigarette smokers have COHb levels up to 10% (WHO 1999a). Well-trained subjects engaging in heavy exercise in polluted indoor environments can increase their COHb levels quickly up to 10-20%. Epidemic CO poisonings in indoor ice arenas have been reported.

To protect non-smoking, middle-aged and elderly population groups with documented or latent coronary artery disease from acute ischemic heart attacks, and to protect fetuses of non-smoking pregnant mothers from untoward hypoxic effects, a COHb level of 2.5% should not be exceeded.

The guideline values (ppm values rounded), and periods of time-weighted average exposures, have been determined in such a way that the COHb level of 2.5% is not exceeded, even when a normal subject engages in light or moderate exercise. The guideline values for CO are 100 mg/m³ (90 ppm) for 15 minutes, 60 mg/m³ (50 ppm) for 30 minutes, 30 mg/m³ (25 ppm) for 1 hour, and 10 mg/m³ (10 ppm) for 8 hours.

Ozone and other photochemical oxidants

O₃ toxicity occurs in a continuum in which higher concentrations, longer exposure duration, and greater activity levels during exposure cause greater effects. Short-term acute effects include pulmonary function changes, increased airway responsiveness and airway inflammation, and other symptoms. These health effects are statistically significant at 160 µg/m³ (0.08 ppm) for 6.6 hour exposures in a group of healthy exercising adults, with the most sensitive subjects experiencing a more than 10% functional decrease within 4-5 hours. Controlled exposure of heavily exercising adults, or children to an O₃ concentration of 240 µg/m³ (0.12 ppm) for 2 hours, also produced decreases in pulmonary function. There is no question that substantial acute adverse effects occur during exercise with one hour exposure to concentrations of 500 µg/m³ or higher, particularly in susceptible individuals or subgroups.

Field studies in children, adolescents, and young adults have indicated that pulmonary function decrease can occur as a result of short term exposure to O₃ concentrations in the range 120-240 µg/m³ and higher. Mobile laboratory studies have observed changes in pulmonary function in children or asthmatics exposed to O₃ concentrations of 280-340 µg/m³ (0.14-0.17 ppm) for several hours. Respiratory symptoms, especially coughing, have been associated with O₃ concentrations as low as 300 µg/m³ (0.15

ppm). O₃ exposure has also been reported to be associated with increased respiratory hospital admissions and exacerbation of asthma. The effects are observed with exposures to ambient O₃ (and co-pollutants) and with controlled exposures to O₃ alone. This demonstrates that the functional and symptomatic responses can be attributed primarily to O₃.

A number of studies evaluating animals (rats and monkeys) exposed to O₃ for a few hours or days have shown alterations in the respiratory tract, in which the lowest-observed-effect levels were in the range of 160-400 µg/m³ (0.08-0.2 ppm). These included the potentiation of bacterial lung infections, inflammation, morphological alterations in the lung, increases in the function of lung enzymes active in oxidant defenses, and increases in collagen content. Long-term exposure to O₃ in the range of 240-500 µg/m³ (0.12 to 0.25 ppm) causes morphological changes in the epithelium and interstitium of the centri-acinar region of the lung, including fibrotic changes.

Guidelines

Establishing guidelines for ambient O₃ concentrations is complicated by the fact that detectable responses occur at, or close to, the upper bounds of background concentrations. Thus it is not possible to base the guidelines on a no-observed-adverse-effect level (NOAEL) or LOAEL. At O₃ levels of 200 µg/m³ and lower (for 1-8 hour exposure periods), there are statistically significant decreases in lung function, airway inflammatory changes, exacerbation of respiratory symptoms, and symptomatic and functional exacerbation of asthma in susceptible people during exercise. Functional changes and symptoms, as well as increased hospital admissions for respiratory causes, are also observed in population studies.

To select a guideline, one must accept the premise that some detectable functional responses are of little or no health concern, and that too few people may respond to the effects of O₃ exposure to warrant designation as a group needing protection from exposure to ambient O₃. In the case of respiratory function responses, a judgement could be made that O₃-related reductions of FEV₁ at, for example, less than 10% were of no clinical concern. The balance of evidence indicates that reductions of FEV₁ of more than 10% occurred at O₃ levels of 160 µg/m³ and higher. It is generally accepted that the exposure duration to O₃ is important in controlling the response and that exposures to raised concentrations for periods of eight hours are not unlikely. On this basis, a guideline value for ambient air of 120 µg/m³ for a maximum period of eight hours per day has been established as a level at which acute effects on public health are likely to be small.

For those public health authorities that cannot accept such levels of health risk, an alternative is to explicitly select some other level of acceptable exposure and associated risk using the dose response relationships given in Figures 3.2-3.5. These figures, which are based on corresponding tables in the *Air Quality Guidelines for Europe* (WHO 1999a), summarize the ambient O₃ concentrations that are associated with levels of responses among population subgroups. Although chronic exposure to O₃ may cause effects, quantitative information from humans is inadequate for estimating the degree of protection from chronic effects offered by these *Guidelines*. In any case, the O₃ concentration at which any adverse health outcome is expected will vary with the duration of the exposure and with the volume of air inhaled during the exposure. As there is a strong correlation in field studies between the one-hour and eight-hour O₃ concentration and hospital admissions (Figure 3.5), the reduction in health risk associated with decreasing one-hour or eight-hour O₃ levels should be very similar.

Thus, the amount of time spent outdoors and the typical level of activity are factors which should be considered in risk evaluation. Figures 3.2 and 3.5 summarize the O₃ levels at which two representative adverse health outcomes, based on controlled exposure experiments, may be expected. The dose-response relationships in these figures represent expert judgment based on the collective evidence from numerous studies and linear extrapolation in a few cases where data were limited. Interestingly, these dose-response relationships appear to be non linear.

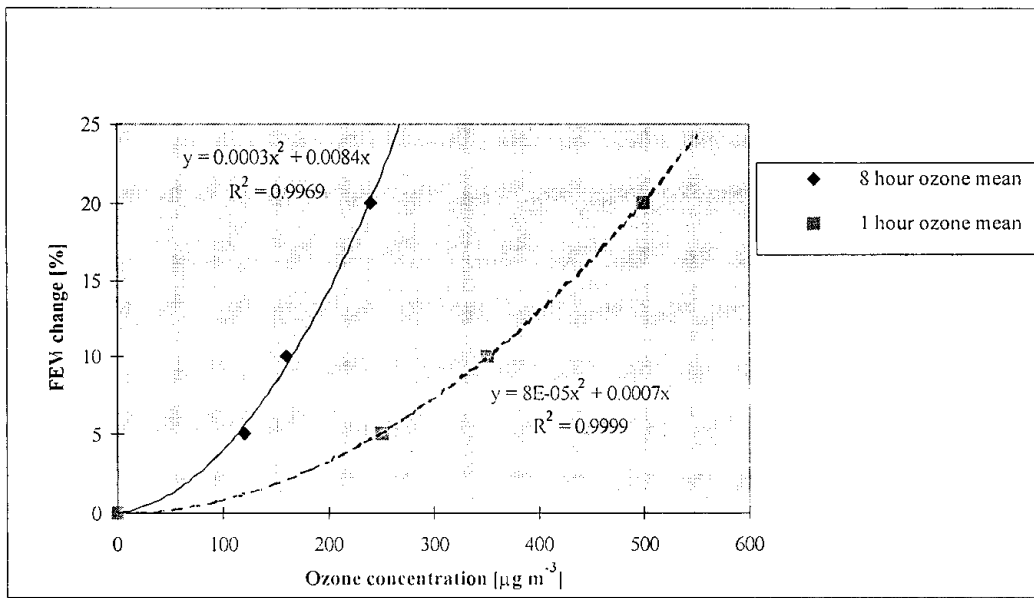


Figure 3.2. Change in FEV₁ as a function of O₃ concentration in the most sensitive 10% of active young adults and children.

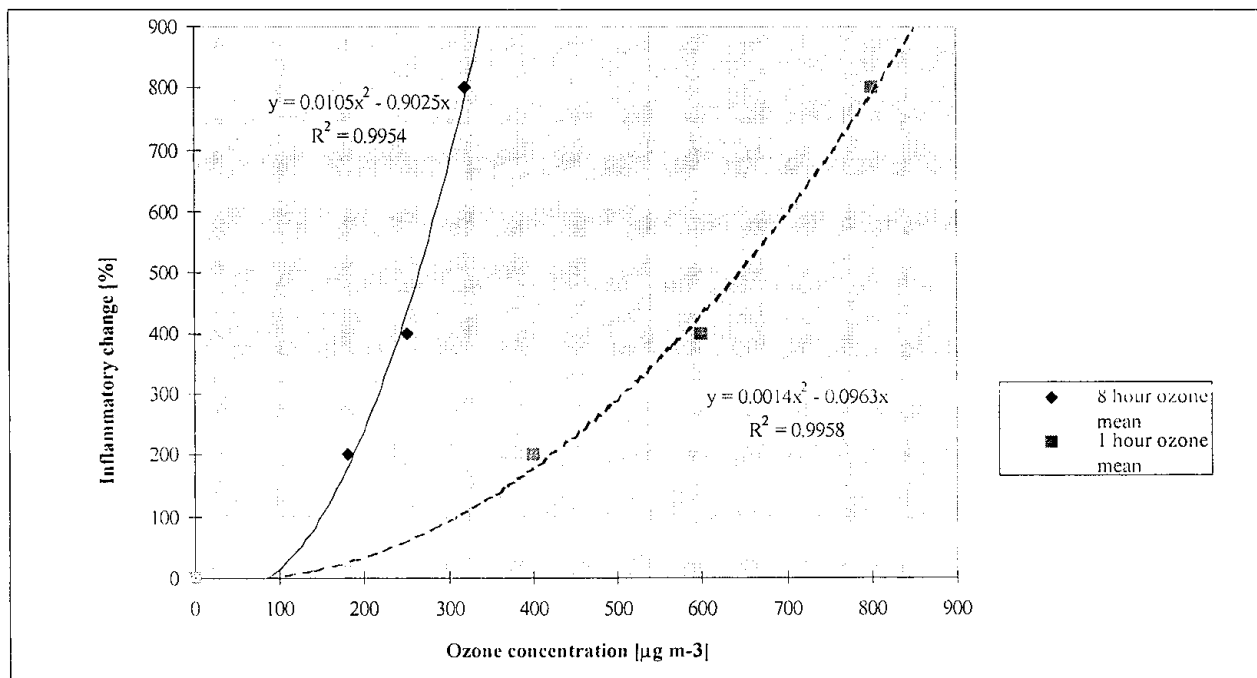


Figure 3.3. Inflammatory change (neutrophil influx in lungs of healthy young adults exercising outdoors at more than 40l/min expiratory volume in the lung) as a function of O₃ concentration.

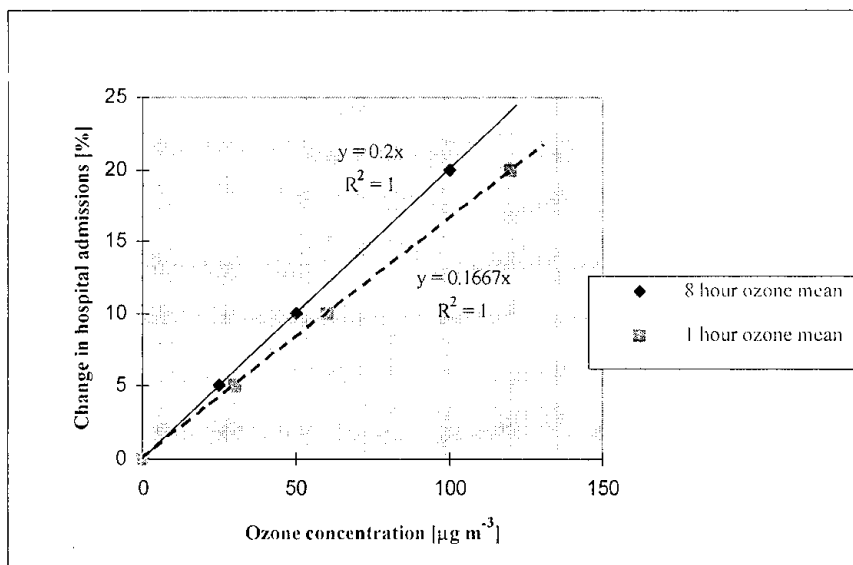


Figure 3.4. Increase in hospital admissions for respiratory conditions as a function of O_3 concentration.

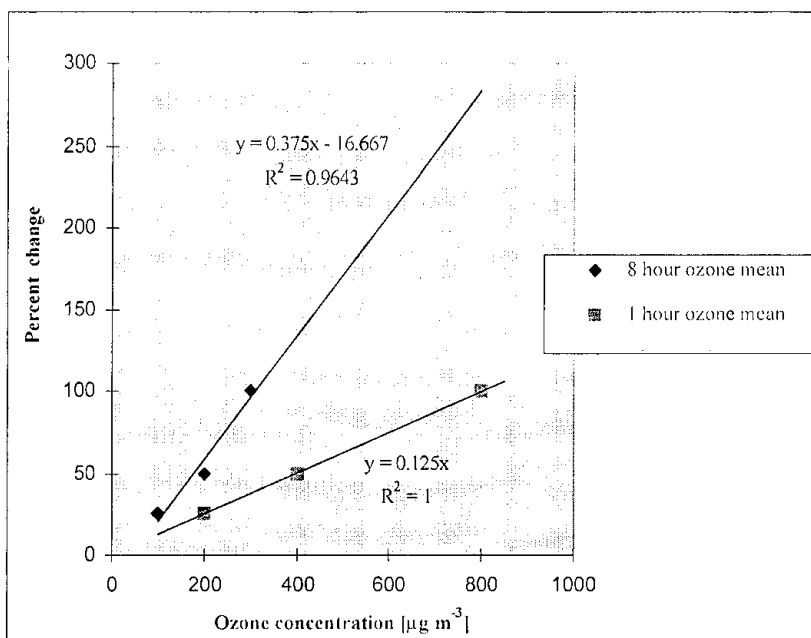


Figure 3.5. Change in symptom exacerbation among adults and asthmatics as a function of O_3 concentration.

Epidemiological data show relationships between changes in various health outcomes and changes in the peak daily ambient O_3 concentration. Two examples of such relationships are shown in Figures 3.4 and 3.5. Short-term increases in levels of ambient O_3 are associated both with increased hospital admissions with a respiratory diagnosis, and with respiratory symptom exacerbation in healthy people and asthmatics. These observations may be used to quantify the expected improvements in health outcomes that may be associated with a lower ambient O_3 concentration. The dose-response relationships presented in Figures 3.4 and 3.5 assume a linear relationship between O_3 concentration and health outcome. However, uncertainties exist

concerning the forms of these relationships and it is unclear whether similar response slopes can be expected at widely different ambient O₃ levels. In the event that such relationships are curvilinear (i.e., concave upwards), the benefits of lowering the O₃ concentration are likely to be greater when the average ambient level is higher. Conversely, if the ambient O₃ concentration is already low, the benefits of lowering the concentration may be less than would be suggested by these figures. Another important area of uncertainty is the degree to which other pollutants influence these relationships.

The previous WHO guidelines (WHO 1987) included a one-hour guideline value of 150-200 µg/m³ for O₃. Although recent research does not indicate that this guideline would necessarily be erroneous, the 8-hour guideline would protect against acute one-hour exposures in this range and thus it is concluded that a one-hour guideline value would not be necessary. The health problems of greatest concern are increased hospital admissions, exacerbation of asthma, inflammatory changes in the lung and structural alterations in the lung. These are more appropriately addressed by a guideline value which limits average daily exposure, and consequently inhaled dose and dose rate, rather than addressing the rare short duration deterioration of air quality that may be associated with unusual meteorological conditions.

A guideline for PAN is not warranted at present, as it does not seem to pose a significant health problem at levels that are observed in the environment.

Suspended particulate matter

Health effects of SPM in humans depend on particle size and concentration, and can fluctuate with daily fluctuations in PM₁₀ or PM_{2.5} levels. They include acute effects such as increased daily mortality, increased rates of hospital admissions for exacerbation of respiratory disease, fluctuations in the prevalence of bronchodilator use and cough and peak flow reductions. Long-term effects of SPM refer also to mortality and respiratory morbidity, but only few studies on the long-term effects of SPM exist. Air pollution by particulate matter has been considered to be primarily an urban phenomenon, but it is now clear that in many areas of developed countries, urban-rural differences in PM₁₀ are small or even absent, indicating that PM exposure is widespread. This is not to imply that exposure to primary, combustion-related PM may not be higher in urban areas.

A variety of methods exist to measure different fractions of particulate matter in air, with different health significance (see Section 2.1.1). This evaluation has tended to focus on studies in which PM exposure was expressed as PM₁₀ and PM_{2.5}. Health effect studies conducted with various TSP and BS as exposure indicators have provided valuable additional information. However, they are less suitable for deriving exposure-response relationships for PM because TSP includes particles that are too large to be inhaled, or because the health significance of particle opacity as measured by the Black Smoke method is uncertain. Methods for measuring particle concentrations are discussed in section 5.7.

The current time-series epidemiological studies are unable to define a threshold below which no effects occur. Recent studies suggest that even at low levels of PM (less than 100 µg/m³), short-term exposure is associated with health effects. At low levels of PM₁₀ (0 - 100 µg/m³), the short-term exposure-response curve fits a straight line reasonably well (Figures 3.6 to 3.8). However, there are indications from several studies that at higher levels of exposure (several hundreds of µg/m³ of PM₁₀), at least for effects on mortality, the curve is flatter than at low levels of exposure. This is discussed later in this section.

Although many studies have obtained acute effect estimates for PM₁₀ that are reasonably consistent, this does not imply that particle composition or size distribution within the PM₁₀ fraction is unimportant. Limited evidence from studies on dust storms indicates that such PM₁₀ particles are much less toxic than those associated with combustion sources. Recent studies in which PM₁₀ size fractions and/or constituents have been measured suggest that the observed effects of PM₁₀ are largely associated with fine particles and

not with the coarse fraction (PM_{10} minus $PM_{2.5}$). In some areas strong aerosol acidity or sulphate may be the cause of the effects associated with $PM_{2.5}$.

Evidence is also emerging that long-term exposure to low concentrations of PM in air is associated with mortality and other chronic effects, such as increased rates of bronchitis and reduced lung function. Two cohort studies conducted in the U.S.A. suggest that life expectancy may be 2-3 years shorter in communities with high PM than in communities with low PM. This is consistent with earlier cross-sectional studies, which compared age-adjusted mortality rates across a range of long-term average PM concentrations. The results showed that long-term average exposures to low PM levels, starting at about $10 \mu\text{g}/\text{m}^3$ of fine particulate matter, were associated with a reduction in life expectancy. Whilst such observations require further corroboration, preferably also from other areas in the world, these new studies suggest that the public health implications of PM exposure may be large.

Figures 3.6-3.8 show summary estimates of the relative increase in various health parameters as a function of PM concentration. These figures are based on data reported in studies in which PM_{10} and/or $PM_{2.5}$ have been measured. They were not inferred from other measures such as Coefficient of Haze, Black Smoke or SPM. The database for parameters other than PM_{10} is still limited, so the evaluation of health effects, especially the short-term effects, is largely expressed in terms of PM_{10} . However, future regulations and monitoring activities should give emphasis to the ultrafine and fine fractions in addition to, or even instead of, PM_{10} .

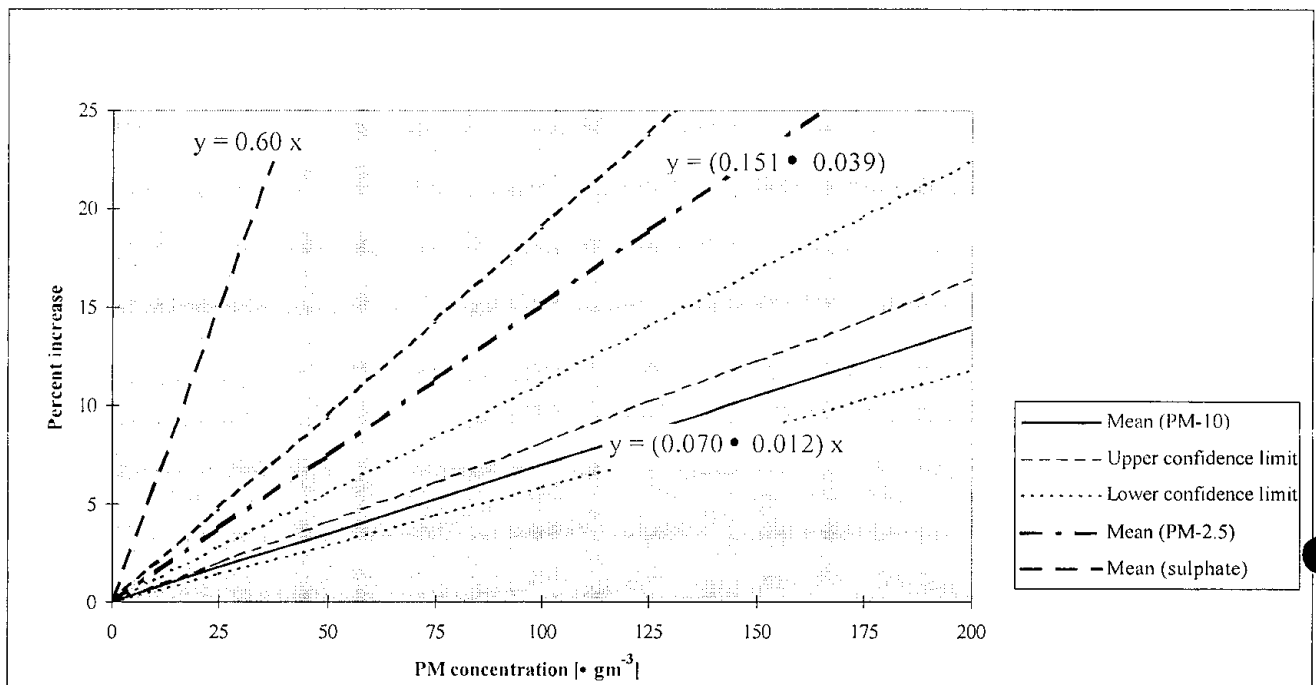


Figure 3.6. Increase in daily mortality as a function of PM concentration.

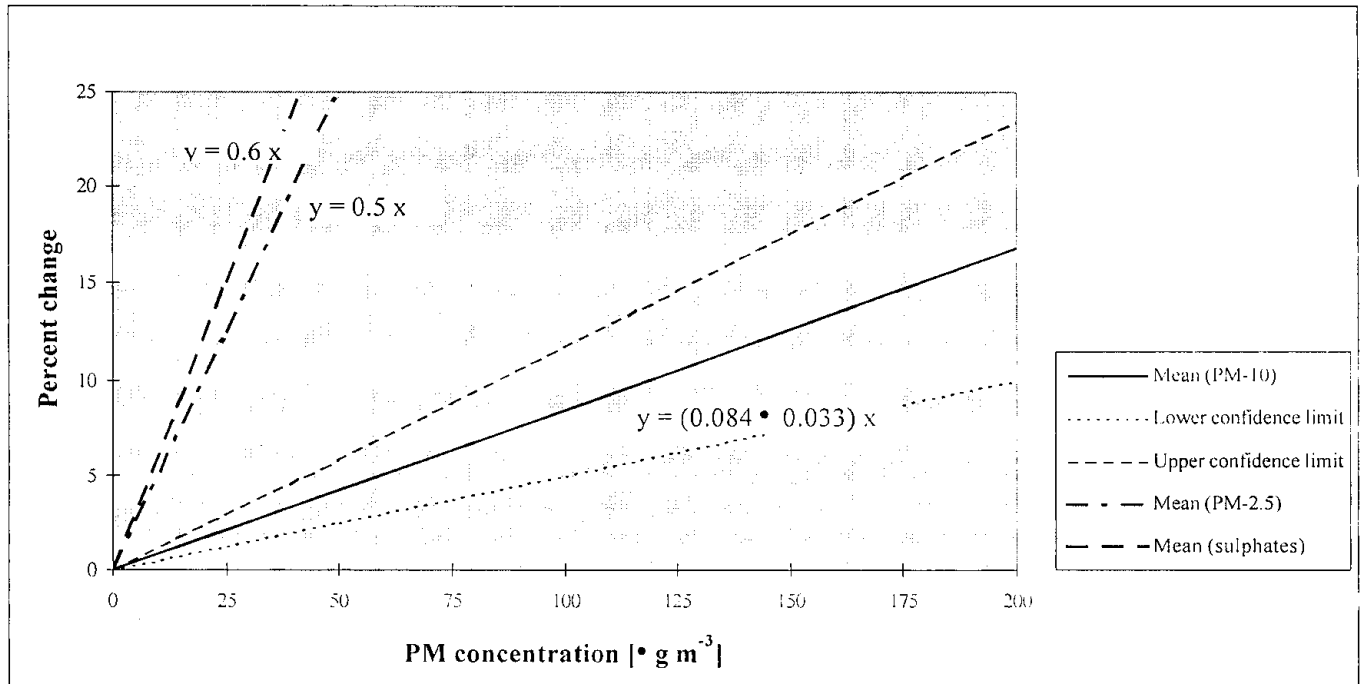


Figure 3.7. Percent change in hospital admissions assigned to PM_{10} , $PM_{2.5}$ and sulphates.

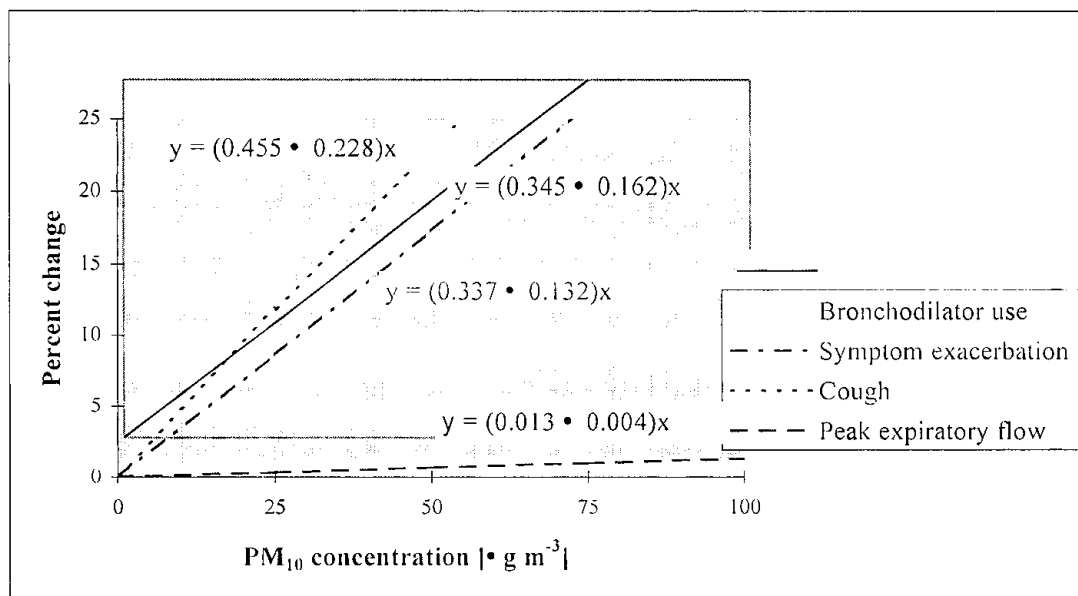


Figure 3.8. Change in health endpoints as a function of PM_{10} concentration.

The following issues should be considered when using these graphs:

(1) The graphs should not be used for PM_{10} concentrations below $20 \mu\text{g}/\text{m}^3$, or above $200 \mu\text{g}/\text{m}^3$; or for $PM_{2.5}$ concentrations below $10 \mu\text{g}/\text{m}^3$, or above $100 \mu\text{g}/\text{m}^3$. This caution is required as mean 24-hour concentrations outside of the quoted ranges were not used for the risk assessment, and extrapolations beyond them would be invalid.

(2) The areas close to the straight lines in Figures 3.6–3.8 should be considered as ‘shaded’ areas representing uncertainty, indicated by the 95% confidence intervals (CI).

- (3) There is a fundamental difference between the guidelines for PM_{10} or $PM_{2.5}$ and the guideline values for respirable particulate matter derived in the WHO *Air Quality Guidelines for Europe* (WHO 1987). The guidelines for PM_{10} and $PM_{2.5}$ are relationships between a health endpoint and the PM concentration. The percent change is related to the risk of health effects occurring. In consequence, when deriving an air quality standard for PM_{10} or $PM_{2.5}$ using these relationships, it has to be decided which curve should be used and the risk has to be fixed. This is a new situation with respect to the derivation of air quality standard from an air quality guideline value, in which a risk is assumed without it being explicitly stated.
- (4) Figures 3.6-3.8 can be used with caution to estimate how many subjects would be affected over a short period of time with increased PM levels, for a population of a given size, mortality and morbidity characteristics. There is need for caution because of variation in results between studies for some effects.
- (5) With information on the average number of deaths and the average number of hospital admissions due to respiratory illness in a particular population, the trendlines in Figures 3.6 and 3.7 allow an estimation of the number of subjects that would be affected by an episode of PM_{10} , or $PM_{2.5}$. Similarly, with information on the number of asthmatics using bronchodilators, or experiencing asthma symptoms on a particular day, the trendlines in Figure 3.8 allow an estimate of the expected number of affected subjects. An instructive example is explained in the *Air Quality Guidelines for Europe* (WHO 1999a).
- (6) There is little current information to quantify the reduction in life expectancy associated with daily mortality increases related to PM exposure. If effects are restricted to subjects in poor health, effects on age at death may be relatively small.

Guidelines

Evidence from epidemiological studies consistently points to associations between short-term exposure to PM and adverse effects on human health, even at low levels of PM commonly encountered in developed countries. The database does not, however, enable the derivation of specific guideline values at present. Most of the information currently available comes from studies in which particles in air have been measured as PM_{10} . There is now also an increasing body of information on $PM_{2.5}$, and the most recent studies show that, in general, $PM_{2.5}$ is a better predictor of health effects than PM_{10} . Evidence is also emerging that constituents of $PM_{2.5}$, such as sulphates and strongly acidic particles, are sometimes better predictors of health effects than $PM_{2.5}$.

Many studies relate day-to-day variations in PM to day-to-day variations in health parameters. They provide quantitative estimates of effects of PM that are generally consistent. The available information does not allow a judgement to be made of concentrations below which no effects would be expected. For this reason, no guideline value for short-term average concentrations is recommended. Risk managers are referred to the risk estimates provided in the Figures 3.6-3.8 for guidance in setting standards for PM.

There is less information on the long-term effects of PM on health. Some studies have suggested that long-term exposure to PM is associated with reduced survival, and a reduction of life expectancy in the order of 2-3 years. Other recent studies have shown that the prevalence of bronchitis symptoms in children, and of reduced lung function in both children and adults, are associated with PM exposure. For this reason, no guideline value for long-term average concentrations is recommended. Risk managers are referred to the risk estimates provided in Figures 3.6-3.8 for guidance regarding standards for PM.

Lead

The level of lead in blood is the best available indicator of current and recent past environmental exposure and, with stable exposures, may also be a reasonably good indicator of lead body-burden. The biological effects of lead can therefore be related to blood lead levels as an indicator of internal exposure. The relationship between blood lead concentrations and exposure to lead in air exhibits downward curvilinearity where the range of exposures is sufficiently large. At low levels of exposure the deviation from linearity is negligible and linear models of the relationship between intake and blood lead levels are satisfactory approximations.

The LOAEL for hematological and neurological effects of lead in adults and children can be summarized as follows. Frank anemia is exhibited in adults at blood lead levels above 800 $\mu\text{g/l}$, and in children above about 700 $\mu\text{g/l}$. Hemoglobin production is reduced in adults at blood lead levels above 500 $\mu\text{g/l}$ and in children above 250-300 $\mu\text{g/l}$. The presence of lead in the blood also inhibits delta-aminolaevulinic acid dehydrase (ALAD), an enzyme involved in heme biosynthesis, resulting in an accumulation of its substrate, ALA, in blood, plasma and urine (WHO 1987). Urinary ALA and coproporphyrin are elevated in both adults and children above blood lead levels of about 400 $\mu\text{g/l}$. Erythrocyte protoporphyrin is found to increase in male adults at blood lead levels above 200-300 $\mu\text{g/l}$, and in female adults and children above 150-200 $\mu\text{g/l}$. A reduction in vitamin D₃ occurs in children at blood lead levels above 100-150 $\mu\text{g/l}$. Consequently, inhibition of ALAD in adults and children is likely to occur at blood lead levels of about 100 $\mu\text{g/l}$. However, because of its uncertain biological significance for the functional reserve capacity of the heme biosynthetic system, ALAD inhibition is not treated as an adverse effect here. Encephalopathic signs and symptoms appear not to occur in adults at lead concentrations in blood below 1000-1200 $\mu\text{g/l}$, and in children below 800-1000 $\mu\text{g/l}$.

Cognitive effects in lead workers have not been observed at blood lead levels below 500 $\mu\text{g/l}$, although reductions in nerve conduction velocity were found at concentrations as low as 300 $\mu\text{g/l}$. Elevation of free erythrocyte protoporphyrin has been observed at blood lead levels of 200-300 $\mu\text{g/l}$. Central nervous system effects, as assessed by neurobehavioural endpoints, appear to occur in children at levels below 200 $\mu\text{g/l}$. Consistent effects have been reported for global measures of cognitive functioning, such as the psychometric intelligence quotient, at blood lead levels between 100-150 $\mu\text{g/l}$. Some epidemiological studies have indicated effects such as hearing impairment at blood lead levels below 100 $\mu\text{g/l}$. Animal studies provide qualitative support for the claim that lead is a causative agent for hearing impairment.

Guidelines

The guidelines for lead in air are based on the effects of lead in blood. Critical effects to be considered in the adult organism include elevation of free erythrocyte protoporphyrin, whereas for children cognitive deficits, hearing impairment and disturbed vitamin D metabolism are taken as the decisive effects. All of these effects are considered adverse. A critical level of lead in blood is 100 $\mu\text{g/l}$. It should be stressed that all of these values are based on population studies yielding group averages, and apply to the individual child only in a probabilistic manner.

For the derivation of a guideline value the following arguments have been considered:

1. Currently measured "baseline" blood lead levels of minimal anthropogenic origin are probably between 10-30 $\mu\text{g/l}$.
2. Various international expert groups have determined that the earliest adverse effects of lead in populations of young children begin at 100-150 $\mu\text{g/l}$. Although it cannot be excluded that population

effects may occur below this range, it is prudent to derive a guideline value based on the lowest value of this range (100 µg/l).

3. It can be assumed that inhalation of airborne lead is a significant route of exposure for adults (including pregnant women), but it is of less significance for young children, for whom other pathways of exposure such as ingestion are generally more important than inhalation.
4. It appears that 1 µg Pb/m³ of air directly contributes approximately 19 µg Pb/l of blood in children and about 16 µg Pb/l of blood in adults, although it is accepted that the relative contribution of lead in air is less significant in children than in adults. These values are approximations, recognizing that the relationships are curvilinear in nature and will apply principally at lower blood lead levels.
5. It must be taken into account that in typical situations an increase of lead in air also contributes to increased lead uptake by indirect environmental pathways. To correct for uptake by other routes, it is assumed that 1 µg Pb/m³ in air would contribute to 50 µg Pb/l in blood.
6. It is recommended that efforts should be undertaken to ensure that at least 98% of an exposed population, including pre-school children, should have blood lead levels that do not exceed 100 µg/l. In this case, the median level of lead in blood would not exceed 54 µg/l. On this basis, the annual average concentration of lead in air should not exceed 0.5 µg/m³, corresponding to 25 µg/l of lead in blood. This proposal is based on the assumption that the upper limit of nonanthropogenic blood lead is 30 µg/l. These estimates are assumed to also protect adults.
7. To prevent further increases of lead in soils, and the consequent increases in exposure of future generations, the levels of lead in air should be kept as low as possible.

As both direct and indirect exposure of young children to lead in air occurs, the guidelines for lead in air should be accompanied by other preventive measures. These should specifically take the form of monitoring the lead content of dust and soils arising from the fallout of lead in air. The normal hand-to-mouth behaviour of children necessitates that dust and soil be defined as potentially serious sources of exposure. A specific monitoring value is not recommended. Some data indicate that lead fallout in excess of 250 µg m⁻²/day will increase blood lead levels.

In summary, the WHO guideline values for the "classic" air pollutants are provided in Table 3.1.

Table 3.1. WHO guideline values for the "classical" air pollutants (WHO 1999a)

Compound	Annual ambient air concentration [$\mu\text{g}/\text{m}^3$]	Health endpoint	Observed effect level [$\mu\text{g}/\text{m}^3$]	Uncertainty factor	Guideline Value [$\mu\text{g}/\text{m}^3$]	Averaging time
Carbon monoxide	500-7000	Critical level of COHb < 2.5%	n.a.	n.a.	100 000	15 minutes
					60 000	30 minutes
					30 000	1 hour
					10 000	8 hours
Lead	0.01-2	Critical level of Pb in blood < 25 μg Pb/l	n.a.	n.a.	0.5	1 year
Nitrogen dioxide	10-150	Slight changes in lung function in asthmatics	365-565	0.5	200	1 hour
					40	1 year
Ozone	10-100	Respiratory function responses	n.a.	n.a.	120	8 hours
Sulphur dioxide	5-400	Changes in lung function in asthmatics	1000	2	500	10 minutes
		Exacerbations of respiratory symptoms in sensitive individuals	250	2	125	24 hours
			100	2	50	1 year

n.a. not applicable

3.2 Other air pollutants

This section briefly describes the health-based guidelines for airborne inorganic and organic compounds for non-carcinogenic and carcinogenic health endpoints. Also some compounds relevant for indoor air pollution will be covered. In the process of revising and updating the WHO *Air Quality Guidelines for Europe* and the *Environmental Health Criteria* series, no guideline value and no risk-concentration relationship could be derived for several compounds. The compounds are fluorides and platinum for non-carcinogenic endpoints and 1,3 butadiene and cadmium^{VI} for carcinogenic health endpoints.

Guidelines based on noncarcinogenic health endpoints

In the updated and revised document of the WHO *Air Quality Guidelines for Europe* (WHO 1999a) the following compounds with noncarcinogenic endpoints were considered: cadmium, dichloromethane, fluorides, HCHO, manganese, mercury, styrene, tetrachloroethylene, and toluene.

Data for CS₂ and H₂S were not revised, and the original guidelines (WHO 1987) are still applicable.

In addition, some compounds were not considered in the process of updating and revising the *Air Quality Guidelines for Europe*. The guidelines for these compounds were taken from the published documents of the *Environmental Health Criteria* series (EHC) of the International Programme for Chemical Safety and the Concise International Chemical Assessment Documents (CICAD) of the Inter-Organization programme for the sound Management of Chemicals. For non-carcinogenic health endpoints these

include the compounds: acetaldehyde (EHC 167, WHO 1995d); acetone (EHC 207, WHO 1998c); acrolein (EHC 127, WHO 1992b); acrylic acid (EHC 191, WHO 1997d); 2-butoxyethanol (CICAD 10, WHO 1998d); carbon tetrachloride (EHC 208, WHO 1999b); chloroform (EHC 163, WHO 1994b); cresol (EHC 128, WHO 1995e); 1,4-dichlorobenzene, monochlorobenzene, and trichlorobenzene (EHC 128, WHO 1991a); di-n-butyl phthalate (EHC 189, WHO 1997e); diesel exhaust (EHC 171, WHO 1996b); 2-ethoxyethanol, 2-ethoxyethanolacetate, and methoxyethanol (EHC 115, WHO 1990a); ethylbenzene (EHC 186, WHO 1996c); hexachlorocyclopentadiene (EHC 120, WHO 1991b); isophorone (EHC 174, WHO 1995f); methanol (EHC 196, WHO 1997f); methyl bromide (EHC 166, WHO 1995g); methylmethacrylate (CICAD 4, WHO 1998e); propanols (EHC 102, WHO 1990b; EHC 103, WHO 1990c); 1,1,1,2-tetrafluoroethane (CICAD 11, WHO 1998f); and xylenes (EHC 190, WHO 1997g).

The starting point for the air quality guidelines for non-carcinogenic air pollutants from the Environmental Health Criteria documents were the concepts of NOEL, NOAEL, LOEL and LOAEL (WHO 1987; WHO 1994c). Uncertainty factors were applied to these values to derive the guidelines. These uncertainty factors take into account intraspecies variation, interspecies variation, quality of data, and extrapolations from LOAEL to NOAEL and from subchronic to chronic effects. Examples for such factors and their application in deriving the guidelines are given in EHC 170 (WHO 1994c). For interspecies (extrapolation from animal to human) variation, usually a factor of 10 was applied. For intraspecies variation a factor of 5–10 was used. For use of an effect level rather than a no-effect level a factor of 2–10 was also applied, depending on the quality of the data. It was usually assumed that an uncertainty factor of 1000, based on interspecies variation (factor of 10), intraspecies variation (factor of 10) and LOAEL to NOAEL extrapolation (factor of 10), also accounted for variations in exposure time and the limitations of the database. If occupational data were the basis of a guideline derivation, a factor accounting for the number of hours per week divided by the number of working hours was applied. The choice of uncertainty factors was subject to individual expertise and judgement.

Some general considerations have to be considered in deriving guideline values in the Environmental Health Criteria (EHC) documents and in their interpretation and use:

A consistent methodology has been used in the derivation of quantitative guideline values for human exposures to chemical substances present in food, drinking-water, air and other media by *ad hoc* IPCS Task Groups (of varying membership) reviewing and evaluating data and finalizing EHC monographs on various chemicals. This approach embodies the concept that, to the extent possible, guidance values for the protection of human health should reflect consideration of total exposure to the substance whether present in air, water, soil, food or other media. Guideline values should be derived for a clearly defined exposure scenario, based on the data for the reference man (as defined in Appendix 4 of WHO 1994c), and therefore might not represent national or local circumstances.

The precision of the guidance values is dependent upon the validity and reliability of the available data. Frequently, there are sources of uncertainty in the derivation of TIs and in their allocation as a basis for guideline values, so that the resulting values represent a best estimate based on the available data at the time. The description of the derivation of guideline values clearly indicates the nature and sources of uncertainty and the manner in which they have been taken into account in the derivation. The numerical values of guideline values should reflect the precision present in their derivation; usually guideline values are given to only one significant figure.

Establishing tolerable intakes (TIs comprising tolerable daily intakes (TDIs) or acceptable daily intakes (ADIs), in units mg/(kg bw d) or µg/(kg bw d), bw bodyweight) is central to the determination of guidance values. A TDI or ADI is defined as an estimate of the intake of a substance over a lifetime that is considered to be without appreciable health risk. It may have

different units depending upon the route of administration upon which it is based and is generally expressed on a daily or weekly basis. Though not strictly an "intake", TIs for inhalation are generally expressed as airborne concentrations (i.e. μg or mg per m^3).

Two areas are critical in the methodology for the derivation of guidance values for human exposures to chemical substances in the environment:

Development of a tolerable intake on the basis of interpretation of the available data on toxicity. For practical purposes, toxic effects are considered to be of two types, threshold and non-threshold. For substances where the critical effect is considered to have a threshold (including non-genotoxic carcinogenesis for which there is adequate mechanistic data), a TI is developed usually on the basis of a NOAEL.

Allocation of the proportions of the tolerable intake to various media. Development on available information, the development of guidance values for compounds present in more than one environmental medium will require the allocation of proportions of the TI to various media (for example, air, food and water). For the derivation of guidance values, the allocation will be based on information on relative exposure via different routes.

Media exposure allocations of TIs for the derivation of guidance values in EHC monographs are based on relative exposure by different routes for a given scenario. Though this is suggested as a practical approach, the use of allocations based on exposure in different media does not preclude the development of more stringent limits. It is also important to recognize that the proportions of total intake from media may vary, based on circumstances. Site- or context-specific guideline values better suited to local circumstances and conditions could be developed from TIs presented in the EHC in situations where relevant data on exposure are available, and particularly where there are other significant sources of exposure to a chemical substance (e.g., in the vicinity of a waste site). Regulatory authorities may also take control to develop risk management strategies appropriate for local circumstances, although the ultimate objective of control should be reduction of exposure from all sources to less than the TIs. In addition, where data on organoleptic thresholds are included in EHC monographs, these can also be considered by relevant authorities in the development of limits.

Polychlorinated dibenzodioxins (PCDDs), polychlorinated dibenzofurans (PCDFs) and polychlorinated biphenyls (PCBs) constitute a group of persistent environmental chemicals. A number of dioxin or furan congeners, as well as some co-planar PCBs have been shown to exert a number of toxic responses similar to those of 2,3,7,8-tetrachlorodibenzo-p-dioxin (TCDD), the most toxic dioxin. These effects include dermal toxicity, immunotoxicity, reproductive effects and teratogenicity, endocrine disruption and carcinogenicity. For dioxin-like compounds a TDI was derived in units of toxicity equivalent (TEQ) uptakes (WHO 1998k), which is supposed to represent a tolerable daily intake for life-time exposure. Occasional short-term excursions above the TDI would have no health consequences provided that the averaged intake over long periods is not exceeded. It was stressed that the upper range of the TDI of 4 pg TEQ/kg bw should be considered a maximal tolerable intake on a provisional basis and that the ultimate goal is to reduce human intake levels below 1 pg TEQ/kg bw/day.

The air quality guidelines for non-carcinogenic pollutants can only be applied if the averaging times are specified. The averaging time associated with a guideline value depends on the type of effects that are caused by short-term exposure producing acute effects, or long-term exposure producing chronic effects. Typical averaging times are 30 minutes for odorous pollutants, 24 hours to 1 week for acute exposures and 1 year for chronic health effects. The decision on the averaging time for a guideline needs careful screening of the toxicological and epidemiological findings and expertise in judging the results. As a consequence, the choice of an averaging time can be subjective, as is the choice of an uncertainty factor.

The air quality guidelines for compounds with non-carcinogenic health endpoints are summarized in Table 3.2.

Table 3.2. Guidelines for air quality: compounds with non-carcinogenic health endpoints

Compound	Average ambient air concentration [$\mu\text{g}/\text{m}^3$]	Health endpoint	Observed effect level [$\mu\text{g}/\text{m}^3$]	Uncertainty factor	Guideline Value (GV) or Tolerable Concentration (TC) [$\mu\text{g}/\text{m}^3$]	Averaging time	Source
Acetaldehyde	5	Irritancy in humans Carcinogenicity related irritation in rats	45 (NOEL) 275 (NOEL)	20 1000	2 000 (TC) 50 (TC)	24 hours 1 year	WHO 1995d EHC 167
Acetone	0.5-125	Odour annoyance	240 (OT)	n.a.	n.p.	-	WHO 1998c EHC 207
Acrolein	15	Eye irritation in humans Odour annoyance (Odour threshold)	0.13 0.07	n.p. n.a.	50 (GV) -	30 min 30 min	WHO 1992b EHC 127 WHO 1992b EHC 127
Acrylic acid	No data	Nasal lesions in mice	15 (LOAEL)	50	54 (GV)	1 year	WHO 1997d EHC 191
2-Butoxyethanol	0.1-15	Haematotoxicity in rats	242 (NOAEL)	10	13100 (TC)	1 week	WHO 1998d CICAD 10
Cadmium	$(0.1-20) \cdot 10^{-3}$	Renal effects in the population	n.a.	n.a.	5×10^{-3} (GV)	1 year	WHO 1999a
Carbon disulphide	10-1500	Functional CNS changes in workers Odour annoyance	10 (LOAEL) 0.2 (OT)	100 n.a.	100 (GV) 20 (GV)	24 hours 30 min	WHO 1987 WHO 1987
Carbon Tetrachloride	0.5-1	Hepatotoxicity in rats	6.1 (NOAEL)	1000	6.1 (TC)	1 year	WHO 1999b EHC 208
1,4 Dichlorobenzene	0.2-3.5	Increase in organ weight and urinary proteins	450 (NOEL)	500	1.34 (TC)	1 year	WHO 1991a EHC 128
Dichloromethane	< 5	COHb formation in normal subjects		n.a.	3000 (GV)	24 hours	WHO 1999a
Diesel exhaust	1.0 - 10.0	Chronic alveolar inflammation in humans Chronic alveolar inflammation in rats	0.139 (NOAEL)* 0.23 (NOAEL)*	25 100	5.6 (GV) 2.3 (GV)	1 year 1 year	WHO 1996b EHC 171

* For diesel exhaust two approaches were applied, which based on a NOAEL of 0.41 $\mu\text{g}/\text{m}^3$ in rats. The corresponding levels were converted to a continuous exposure scenario. n.a. not applicable; n.p. not provided.

Table 3.2 Guidelines for air quality: compounds with non-carcinogenic health endpoints (cont.)

Compound	Average Concentration [$\mu\text{g}/\text{m}^3$]	Health endpoint	Observed effect level [$\mu\text{g}/\text{m}^3$]	Uncertainty factor	Guideline Value (GV) or Tolerance Concentration (TC) [$\mu\text{g}/\text{m}^3$]	Averaging time	Source
2-Ethoxyethanol	No data	Developmental effects in rats	37 (NOEL)	n.p.	n.p.	1 year	WHO 1990a EHC 115
2-Ethoxyethylacetate	No data	Developmental effects in rats	170 (NOEL)	n.p.	n.p.		WHO 1990a EHC 115
Ethylbenzene	1-100	Increase of organ weight	2150 (NOEL)	100	22 000 (GV)	1 year	WHO 1996c EHC 186
Fluorides	0.5 - 3	Effects on livestock	n.a.	n.a.	1 (GV)	1 year	WHO 1999a
Formaldehyde	$(1-20) \cdot 10^{-3}$	Nose, throat irritation in humans	0.1 (NOAEL)	n.a.	100 (GV)	30 min	WHO 1999a
Hexachlorocyclopentadiene	No data	Inhalation effects in rats	0.45 (NOEL)	n.p.	n.p.	1 year	WHO 1991b EHC 120
Hydrogen sulphide	0.15	Eye irritation in humans Odour annoyance	15 (LOAEL) $(0.2-2.0) \times 10^{-3}$ (OT)	100 n.a.	150 (GV) 7 (GV)	24 hrs 30 min	WHO 1987 WHO 1987
Isophorone	No data	Odour annoyance	1.14 (OT)	n.a.	-	30 min	WHO 1995f EHC 174
Manganese	0.01 - 0.07	Neurotoxic effects in workers	0.03 (NOAEL)	200	0.15 (GV)	1 year	WHO 1999a
Mercury, inorganic	$(2-10) \cdot 10^{-3}$	Renal tubular effects in humans	0.020 (LOAEL)	20	1 (GV)	1 year	WHO 1999a
2-Methoxyethanol	No data	Developmental toxicity in rats	31 (NOEL)	n.p.	n.p.		WHO 1990a EHC 115
Methyl bromide	0.05-0.8	Reduction in fertility index in rats	12 (NOEL)	n.p.	n.p.		WHO 1995g EHC 166
Methyl Methacrylate	2.4×10^{-1}	Degenerate changes in olfactory epithelium in rodents	102.5 (NOEL)	100	200 (TC)	1 year	WHO 1998e CICA1
Monochlorobenzene	0.2-3.5	Decreased food intake, increased organ weight, lesions and changes in blood parameters	341 (LOAEL)	1000	71 (TC)	1 year	WHO 1991a EHC 120

n.a. not applicable; n.p. not provided.

Table 3.2 Guidelines for air quality: compounds with non-carcinogenic health endpoints (cont.)

Compound	Average ambient air concentration [$\mu\text{g}/\text{m}^3$]	Health endpoint	Observed effect level [$\mu\text{g}/\text{m}^3$]	Uncertainty factor	Guideline Value (GV) or Tolerance concentration (TC) [$\mu\text{g}/\text{m}^3$]	Averaging time	Source
1-Propanol	0.05	Reproduction in pregnant rats	9001 (NOEL)	n.p.	n.p.		WHO 1990b EHC 102
2-Propanol	1500-35000	Developmental toxicity in rats	9001 (LOEL)	n.p.	n.p.		WHO 1990c EHC 103
Styrene	1.0-20.0	Neurological effects in workers Odour annoyance	107 (LOAEL) 0.07 (OT)	40 n.a.	260 (GV) 7 GV	1 week 30 minutes	WHO 1999a WHO 1987
Tetrachloroethylene	1-5	Kidney effects in workers Odour annoyance	102 (LOAEL) 8	400 n.a.	250 (GV) 8000 (GV)	24 hours 30 minutes	WHO 1999a WHO 1987
1,1,1,2-Tetrafluoroethane	No data	Development toxicity in animals	41700 (NOAEL)	n.p.	n.p.		WHO 1998f CICAD 11
Toluene	5-150	Effects on CNS in workers Odour annoyance	332 (LOAEL) 1 (OT)	1260 n.a.	260 (GV) 1000 (GV)	1 week 30 minutes	WHO 1999a WHO 1987
1,3,5-Trichlorobenzene	0.5-0.8	Metaplasia and hyperplasia of respiratory epithelium in rats	100 (NOEL)	500	36 (TC)	1 year	WHO 1991a EHC 128
1,2,4-Trichlorobenzene	0.02-0.05	Increase in urinary porphyrins in rats	22.3 (NOAEL)	500	8 (TC)	1 year	WHO 1991a EHC 128
Vanadium	0.05-0.2	Respiratory effects in workers	0.02 (LOAEL)	20	1 (GV)	24 hours	WHO 1987
Xylenes	1-100	CNS effects in human volunteers Neurotoxicity in rats Odour annoyance	304 (NOAEL) 870 (LOAEL) 4.35 (OT)	60 1000 n.a.	4800 (GV) 870 (GV) -	24 hours 1 year 30 minutes	WHO 1997g EHC 190 WHO 1997g EHC 190 WHO 1997g EHC 190

n.a. not applicable; n.p. not provided.

Table 3.2 Guidelines for air quality: compounds with non-carcinogenic health endpoints (cont.)

Compound	Average ambient air concentration [$\mu\text{g}/\text{m}^3$]	Health endpoint	Observed effect level [mg/kg bw d]	Uncertainty factor	Tolerable Daily Intake (TDI or ADI) [$\mu\text{g}/\text{kg}$ bw d]	Averaging Time (over lifetime)	Source
Chloroform	0.3-10	Hepatotoxicity in beagles	15 (LOEL)	1000	15 (TDI)	24 hours	WHO 1994b EHC 163
Cresol	1-10	Reduced body weight and tremors in mice	50 (LOAEL)	300	170 (ADI)	24 hours	WHO 1995e EHC 168
Di-n-butyl Phthalate	(3-80) $\cdot 10^{-3}$	Developmental/Reproductive toxicity	66 (LOAEL)	1000	66 (ADI)	24 hours	WHO 1997e EHC 189
Dioxin-like compounds	n.p.	Neurobehavioural effects/ Endometriosis in monkey offspring Decreased sperm count/immune suppression/increase genital malformations in rat offspring	Estimated human daily intake [pg/kg bw d] 14-37 (1.OAEL)*	10	[TEQ/ kg bw d] 1-4 (TDI)	24 hours	WHO 1998k

* Estimated from the maternal body burden of exposed rats and monkeys by applying a factor of 2.

Additional air pollutants were considered for which it was not possible to derive guideline values. For non-carcinogenic health endpoints these compounds include dioxins, fluorides, platinum and other compounds, for which the existing information can be extracted from the EHC series compiled in Appendix 4.

Guidelines based on carcinogenic health endpoints

In the revision of the WHO *Air Quality Guidelines for Europe* (WHO 1999a) the following compounds with carcinogenic endpoints were considered: arsenic, benzene, chromium (VI), man-made vitreous fibres, nickel, PAH, radon, trichloroethylene, and toluene. The data for acrylonitrile and vinylchloride were not revised and updated and the original guidelines are still applicable (WHO 1987). Additional carcinogenic compounds, for which unit risks could be derived from the EHC series publications, are included in the guidelines. These include acetaldehyde (EHC 167, WHO 1995d); bis(chloromethyl)ether (EHC 201, WHO 1998h); 1,2-dichloroethane (CICAD 1, WHO 1998g); diesel exhaust (EHC 171, WHO 1996b); selected non-heterocyclic PAH (EHC 202, WHO 1998i); and 1,1,2,2-tetrachloroethane (CICAD 3, WHO 1998j).

In addition, for some carcinogenic compounds, such as 1,3 butadiene and cadmium, guidelines could not be derived. Existing information on these compounds can be taken from WHO 1999a and, for other compounds, from the published documents of the *Environmental Health Criteria* series compiled in Appendix 4.

Table 3.3 Guidelines for air pollutants with carcinogenic health endpoints

Compound	Average ambient air concentration [$\mu\text{g}/\text{m}^3$]	Health endpoint	Unit risk [$\mu\text{g}/\text{m}^3$] ⁻¹	IARC classification	Source
Acetaldehyde	5	Nasal tumours in rats	$(1.5-9) \times 10^{-7}$	2B	WHO 1995d EHC 167
Acrylonitrile	0.01 - 10	Lung cancer in workers	2×10^{-5}	2A	WHO 1987
Arsenic	$(1 - 30) \cdot 10^{-3}$	Lung cancer in exposed humans	1.5×10^{-3}	1	WHO 1999a
Benzene	5.0 - 20.0	Leukemia in exposed workers	$(4.4-7.5) \times 10^{-6}$	1	WHO 1999a
Benzo[a]pyrene		Lung cancer in humans	8.7×10^{-2}	1	WHO 1999a
Bis(chloromethyl)ether	No data	Epitheliomas in rats	8.3×10^{-3}	1	WHO 1998h EHC 201
Chloroform	0.3-10	Kidney tumours in rats	4.2×10^{-7}	2B	WHO 1994b EHC 163
Chromium ^{VI}	$(5-200) \cdot 10^{-3}$	Lung cancer in exposed workers	$(1.1-13) \times 10^{-2}$	1	WHO 1999a
1,2-Dichloroethane	0.07 - 4	Tumour formation in rodents	$(0.5-2.8) \times 10^{-6}$	2B	WHO 1998g CICAD 1
Diesel exhaust	1.0 - 10.0	Lung cancer in rats	$(1.6-7.1) \times 10^{-5}$	2A	WHO 1996b EHC 171

Table 3.3 Guidelines for air pollutants with carcinogenic health endpoints (cont.)

Compound	Average ambient air concentration [$\mu\text{g}/\text{m}^3$]	Health endpoint	Unit risk [$\mu\text{g}/\text{m}^3\text{y}^{-1}$]	IARC classification	Source
ETS	1-10	Lung cancer in exposed humans	10^{-3}		WHO 1999a
Nickel	1-180	Lung cancer in exposed humans	3.8×10^{-4}	1	WHO 1999a
PAH (BaP)	$(1-10) \cdot 10^{-3}$	Lung cancer in exposed humans	8.7×10^{-2}	1	WHO 1999a
1,1,2,2-Tetrachloroethane	0.1 - 0.7	Hepatocellular carcinomas in mice	$(0.6-3.0) \times 10^{-6}$	3	WHO 1998j CICAD 3
Trichloroethylene	1 -10	Cell tumours in testes of rats	4.3×10^{-7}	2A	WHO 1999a
Vinylchloride	0.1 - 10	Hemangiosarcoma in exposed workers Liver cancer in exposed workers	1×10^{-6}	1	WHO 1987

For the compounds noted in Table 3.3 estimation of the unit risks is described in the references quoted. Unit risks for mixtures such as petrol exhaust, roofing tar, smokeless and smoky coal, and wood smoke can, in principle, be estimated from the potencies of these mixtures and the unit risk of benzo[a]pyrene (BaP) by use of the formula:

$$UR_{\text{mixture}} = (\text{potency of mixture})/(\text{potency of "coke oven top"}) \times UR_{\text{BaP}} \times (\text{content of BaP in mixture}).$$

In this relationship the potencies of the mixture and the potency of "coke oven top" are taken from Table A.I.17 of EHC 202 (WHO 1998i); UR_{mixture} denotes the unit risk of the mixture and UR_{BaP} that of BaP; the unit of the content of BaP in the mixture is microgram per gram of mixture. Table 3.4 reflects the relative potencies of the mixtures, which defined as the potencies of the mixtures divided by the potency of "coke oven top" (see EHC 202, WHO 1998i).

Table 3.4. Relative potencies of certain mixtures

Mixture	Relative potency of mixture
Petrol exhaust	0.736
Roofing tar	0.145
Smokeless coal	0.368
Smoky coal	1.026
Wood smoke	0.759

For example, the BaP content of wood smoke has been estimated to range between 1 and 29 [mg BaP/g of mixture] (Ward 1999). Inserting all quantities into the above equation leads to a unit risk for wood smoke in the range of $(0.07-1.9) \times 10^{-7} [\mu\text{g}/\text{m}^3]^{-1}$. If the BaP content of other mixtures are known the unit risk can be estimated in a similar way.

Using the potencies of other non-heterocyclic polycyclic hydrocarbons relative to BaP (see Table A.I.9 of EHC 202, WHO 1998i), unit risks can also be given as a rough estimate for these compounds by using of the formula (results are given in Table 3.5)

$$UR_{\text{compound}} = (\text{potency of compound})/(\text{potency of BaP}) \times UR_{\text{BaP}}$$

Table 3.5. Estimate of unit risks for several polycyclic aromatic hydrocarbons

Compound	Relative potency range compared to BaP	Unit risk $[\mu\text{g}/\text{m}^3]^{-1}$
Anthanthrene	0.28 - 0.32	$(2.4 - 2.8) \times 10^{-2}$
Benz[a]anthracene	0.014 - 0.145	$(1.2 - 13) \times 10^{-4}$
Benzo[a]pyrene	1	8.7×10^{-2}
Benzo[b]fluoranthene	0.1 - 0.141	$(0.87 - 1.2) \times 10^{-2}$
Benzo[j]fluoranthene	0.045 - 0.1	$(0.4 - 0.87) \times 10^{-2}$
Benzo[k]fluoranthene	0.01 - 0.1	$(8.7 - 87) \times 10^{-4}$

Chrysene	0.001 - 0.1	$(8.7 - 870) \times 10^{-5}$
Cyclopenta[<i>cd</i>]pyrene	0.012 - 0.1	$(1 - 8.7) \times 10^{-3}$
Dibenzo[<i>a,e</i>]pyrene	1	8.7×10^{-2}
Dibenz[<i>a,c</i>]anthracene	0.1	8.7×10^{-3}
Dibenz[<i>a,h</i>]anthracene	0.89 - 5	$(7.7 - 43.5) \times 10^{-2}$
Dibenzo[<i>a,l</i>]pyrene	100	8.7×10^{-0}
Dibenzo[<i>a,e</i>]fluoranthene	1	8.7×10^{-2}
Dibenzo[<i>a,h</i>]pyrene	1 - 1.2	$(8.7 - 10.4) \times 10^{-2}$
Dibenzo[<i>a,i</i>]pyrene	0.1	8.7×10^{-3}
Fluoranthene	0.001 - 0.01	$(8.7 - 87) \times 10^{-5}$
Indeno[<i>1,2,3,-cd</i>]pyrene	0.067 - 0.232	$(5.8 - 20.2) \times 10^{-3}$

Air quality guidelines for man-made vitreous fibres and radon were also revised. Man-made vitreous fibre (MMVF) concentrations have been measured in only a few studies and have been found to average about 340 fibres per cubic metre (F/m^3) in ambient air and 570 F/m^3 in indoor air. Maximum values were 2400 F/m^3 in ambient air and 5600 F/m^3 in indoor air. Several types of refractory ceramic fibres were found to be carcinogenic in inhalation studies in animals. The IARC classified ceramic fibres as possibly carcinogenic to humans (Group 2B). From inhalation studies in animals, the unit risk for lung tumours for a lifetime exposure to 1000 F/m^3 was estimated to be 10^{-6} per fibre/ m^3 for fibres of length below 5 μm .

Radon is another indoor air pollutant known to cause lung cancer in humans. Average indoor concentrations range between 20 and 200 Bq/ m^3 . A study of lung cancer in workers showed a linear increase in lung cancer in response to increases in estimated radon exposure (Pershagen et al. 1994). Figure 3.9 shows the estimated proportion of lung cancers that can be attributed to residential radon. This figure can be used to assess the risk of radon exposure.

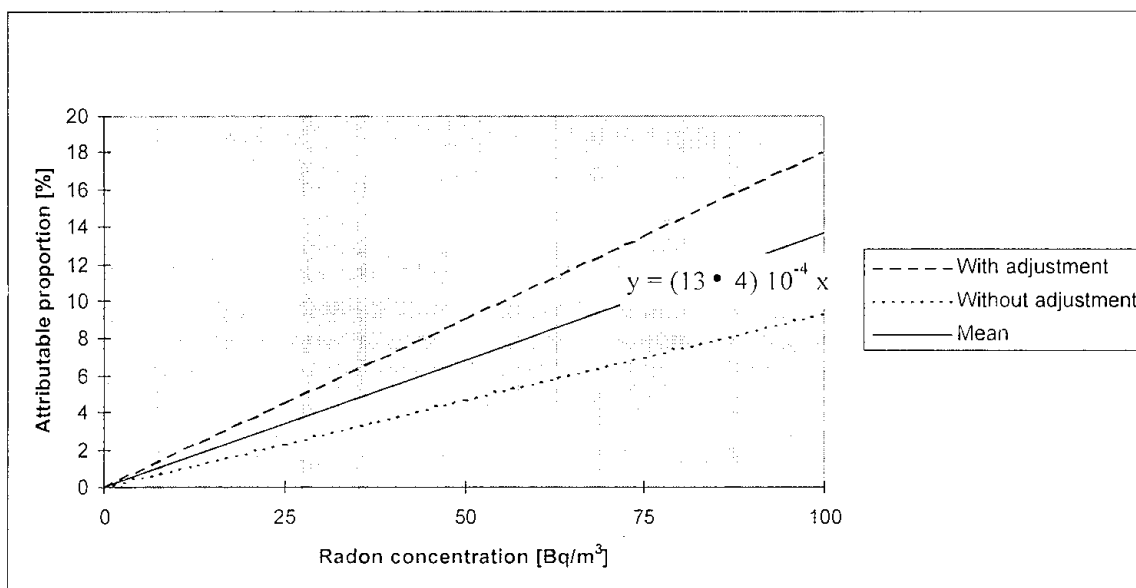


Figure 3.9. The proportion of lung cancers attributable to radon exposure.

3.3 Classical air pollutants: applicability of WHO *Air Quality Guidelines for Europe* on a world-wide scale

In the derivation of the WHO *Air Quality Guidelines for Europe*, assumptions were made for some compounds, which may not be applicable in some parts of the world. For some, but not all, pollutants the importance of different routes of exposure may vary from country to country. It should be understood that if such factors were to be taken into account then different guidelines could be derived. It is important that regulatory authorities should answer the following question before adapting for local use a guideline from the *Air Quality Guidelines for Europe*: Do local circumstances give cause to doubt the likely validity of the guideline set out in the WHO *Air Quality Guidelines* as a basis for setting local guidelines or standards? For a number of pollutants a unit risk assessment has been provided. These assessments are also dependent upon considerations of the comparative importance of different routes of exposure.

3.4 Studies of Effects of Air Pollutants on Health in WHO Regions

As discussed above, the effects of air pollutants on health vary depending on several factors. These include the level of exposure and the susceptibility of the exposed population. The susceptibility of the population is affected by factors such as the numbers of young children and older people, as well as the proportion of people suffering from asthma and other chronic respiratory conditions. Epidemiological studies reflect this variation in sensitivity by showing different associations between levels of exposure and health effects for different subpopulations. In addition, sources and patterns of exposure, e.g. indoor and outdoor exposures, are likely to differ substantially from region to region. In part this is dependent upon weather conditions.

These factors and the variation in response-concentration relationships are powerful arguments for health studies being undertaken in the different WHO Regions on the effects of air pollutants. It could be a mistake to simply adopt response-concentration relationships derived from Western European or North American studies for general use.

No general review drawing together the results of epidemiological studies on air pollution across the WHO Regions has been published. Regions differ significantly in terms of the number of studies undertaken and in the quality of those studies. Many, perhaps most, studies are done with the intention of characterising the local problem and quantifying the effects of air pollution on health. Preliminary studies to assess whether there is a problem are common.

Recent developments in our understanding of the effects of air pollutants on health suggest that, at least for particulate matter and O₃, all levels of exposure above zero are associated with effects on health. That pollutants such as sulphur and NO₂ should be regarded as no-threshold compounds seems toxicologically implausible, although such a conclusion is difficult to avoid given the current time-series data.

Sulphur dioxide

Latin America

Few epidemiological studies conducted in Latin America have investigated the effect of SO₂ on health. In a study conducted in Chile close to an industrial area where SO₂ annual means ranged from 101-145 µg/m³, and maximum daily averages from 405-1230 µg/m³, an increase of 50 µg/m³ in the SO₂ daily mean value was related to a 4% increase in cough frequency (95% CI: 1-7%), a 3% increase in phlegm production (95% CI: 0-6%) and a 4% increase in wheeze occurrence (95% CI: 0-11%), with a one-day lag among children with chronic respiratory symptoms (Sanchez-Cortez 1997). A significant change in evening peak flow measurements was also observed. No effects were observed in children without chronic respiratory symptoms. In this study, health effects were observed at levels lower than 125 µg/m³ (the WHO guideline) among susceptible children. However, SO₂ may have interacted with PM₁₀ levels, which ranged from 5 to 125 µg/m³ in this study.

In the same study, when areas with different long-term ambient levels of SO₂ were compared (70 µg/m³ vs. 130 µg/m³ annual mean over 3 years), the prevalence of chronic respiratory symptoms was higher in the area with the higher SO₂ annual means (30% vs. 14% for chronic cough and 14.3% vs. 6.1% for wheezing). The differences were statistically significant (Sanchez-Cortez 1997). PM₁₀ annual means were low in both areas.

Mediterranean Region

Few studies have investigated the effects of air pollution on health in the Eastern Mediterranean region. In one study of residents of the Shoubra El-Kheima industrial area of Egypt results showed that 37.4% of the examined sample (4730 subjects) suffered from chronic obstructive pulmonary diseases (COPD) and the prevalence increased with age (El-Samara et al. 1984). This study found that 1478 students (out of the studied group of 6380 students) were suffering from COPD. A strong positive correlation was recorded between PM₁₀ level and incidence of asthma.

Western Pacific Region

Japan

An epidemiological survey in Japan from 1981 to 1983 involved schoolchildren aged 6-12 years (Nitta et al. 1993; Ono et al. 1990; Nakai et al. 1995). Annual mean concentrations in urban areas ranged from 26.8-30.9 µg/m³ SO₂. Suburban area levels ranged from 20.5-23.9 µg/m³ and background levels from 13.3-22.9 µg/m³. Comparison of the effect of SO₂ on human health in the different areas showed that the prevalence of asthmatic symptoms, of chest congestion and of phlegm significantly correlated with annual mean levels of SO₂.

China

Epidemiological investigations in China show short-term exposure to 280 $\mu\text{g}/\text{m}^3$ SO_2 was correlated with apparent effects on the health of traffic police, whose respiratory function was reduced by 29-64%, and whose incidence of chronic rhinitis and pharyngitis was raised by 30-90%, compared with the control group (BMEPB 1980). Where the annual average air concentration of SO_2 was 260 $\mu\text{g}/\text{m}^3$, secondary and elementary school students had a much higher incidence of chronic respiratory diseases than in less polluted areas. For example, the incidence of tonsil suppuration was increased 5.1-fold, simple rhinitis by 1.1-fold and nose engorgement by 0.9-fold (BMEPB 1980). Under long exposure to an annual average of 175 $\mu\text{g}/\text{m}^3$ SO_2 (with 550 $\mu\text{g}/\text{m}^3$ particulate matter also present), the three-year average mortality from pulmonary heart disease and respiratory diseases in the community was twice that of the control group (GMEPB 1980).

A study was conducted on the influence of SO_2 pollution on lung function of children and women (Chen et al. 1993). It found that at annual average concentration of 140 $\mu\text{g}/\text{m}^3$ (with 150 $\mu\text{g}/\text{m}^3$ particulate matter), SO_2 is associated with lower levels of lung function in children at the ages of 10-12, with major decreases in FVC and FEV_1 . For each 60 $\mu\text{g}/\text{m}^3$ increment in annual average concentration of SO_2 , there was an average 99 ml drop in the children's FVC and a 70 ml drop in FEV_1 . The FVC of women was decreased by 57 ml under the same conditions. In addition, it was found that SO_2 can affect women's non-specific immunity in parts of their respiratory passages, lowering their average concentration of saliva lysozyme by 5.6 $\mu\text{g}/\text{ml}$ and specific immunoglobuline by 32 $\mu\text{g}/\text{ml}$ (Chen et al. 1995).

South East Asia

The results of epidemiological studies in India indicate that adverse health effects can be associated with ambient air SO_2 at an annual average concentration of 40 $\mu\text{g}/\text{m}^3$. Interpretation of these findings is complicated by the high co-existing particle levels, as well as by a number of additional local factors. These include high indoor and occupational exposure to air pollutants, below average health conditions and poor nutritional status, unsafe water supply, poor general hygiene etc.

A study of 4129 community residents of three areas of Bombay, representing three grades of air pollution conditions (based on secondary data), and a fourth area 40 km away towards the south-east as a control, found:

- i. Higher morbidity in the two more polluted areas for breathing problems, cough and common colds. The city's residents in the polluted zone were the healthiest, even in comparison to rural populations. Other symptoms related to pollution were headache, eye irritation, chest pain, skin lesions and intermittent cough.
- ii. In the urban low pollution area there was a larger prevalence of cardiac complaints.

Table 3.6. Standardised prevalence of selected diseases in Bombay (after Kamat and Doshi 1987)

Disease	Urban SO_2 levels			
	Low (<50 $\mu\text{g}/\text{m}^3$)	Intermediate (51-100 $\mu\text{g}/\text{m}^3$)	High (>100 $\mu\text{g}/\text{m}^3$)	Rural (control)
Dyspnea	3.2	6.0	7.3	5.5
Chronic cough	1.7	2.7	5.1	3.3
Intermittent cough	0.4	5.8	15.6	3.7
Frequent colds	12.1	20.8	18.0	11.0
Chronic bronchitis	2.3	4.5	4.5	5.0
Cardiac disorders	8.2	4.3	6.8	2.7

A study (Kamat et al. 1992) of 4 comparable communities in central and north-eastern Bombay (2 each) among randomly matched 349 subjects in 1988-1989, along with ambient SO₂, NO₂ and SPM air monitoring was carried out in Parel, Maravali, Deonar and Dadar. Air pollutant levels in winter were higher particularly for SO₂ in Parel (up to 584 µg/m³) and Maravali; Deonar showed lower pollution. Clinical respiratory symptoms were higher in Parel and Maravali (cough 12% and 11.2%, dyspnea 17% and 13.3% respectively). Cardiac problems were commoner in Parel (11.0%). Maravali had a high prevalence for headache and eye irritation (9.5%). Those using kerosene suffered more than those using gas (22.2% as compared to 9.2%) Lung functions (FVC, FEV₁) were lowest in Parel for males and in Maravali for females. Expiratory flow rates were lower at Dadar, followed by Maravali. Despite lower SO₂ pollution, symptoms in Maravali residents were comparable to those in Parel. It was conjectured that this may be due to added effect of diesel exhausts (NO₂, SPM) or other unmeasured chemicals.

Nitrogen dioxide

Latin

There are few data from Latin America on the impact of outdoor sources of NO₂ exposure on health. As in many Latin American cities, NO₂ levels are usually low (WHO 1998b). However, in a preliminary study conducted in Sao Paulo, Brazil (Saldiva et al. 1995), a 75 µg/m³ increase in NO₂ was related to a 30% increase in mortality for respiratory illness among children less than five years old.

In Mexico City, a time-series study of hospital emergency visits among children less than 15 years of age found NO₂ daily levels correlated with upper respiratory illnesses (Tellez-Rojo et al. 1999). Stronger associations were observed during the winter months, when NO₂ levels ranged from 40-160 µg/m³ (mean 90 µg/m³), and O₃ levels from 82-740 µg/m³ (mean 368 µg/m³). The correlation coefficient between pollutants and illness was 0.44. The highest indicated effect of NO₂ was observed with a two-day lag.

A 56 µg/m³ increase in daily NO₂ ambient concentration was associated with a 39% increase in upper respiratory illnesses (95% CI: 28-51%). However, given the mixture of contaminants, and the general low NO₂ levels observed in this study, it is not possible to ascertain that NO₂ is the contaminant responsible for the observed effects.

Western Pacific Region

Japan

From 1992 to 1995, the Japanese Environment Agency surveyed the health effects of air pollutants in about 15 000 schoolchildren (EA 1997). The results showed that the prevalence of asthmatic symptoms was higher at NO₂ levels above 37.6 µg/m³ than below this level. In general, however, the levels of NO₂ in Japan are not high enough to demonstrate a clear cause-effect relationship between the prevalence of asthmatic symptoms and NO₂ concentration. But neither are they low enough to rule out a causal relationship.

A survey of respiratory symptoms as a function of distance from roads with heavy traffic showed that the prevalence rate of respiratory symptoms, such as chronic cough and wheezing, was higher in residents nearer roads (Nitta et al. 1993; Ono et al. 1990). When there were no indoor NO₂ sources except for gas cooking stoves, both indoor and individual levels of NO₂ were attributable primarily to automobile exhaust (Nakai et al. 1995).

It has been reported that an interaction between air pollution, especially NO₂, and high temperature, may synergistically increase lung cancer mortality rates, since regional differences in age-adjusted lung cancer rates were explained by an interaction between NO₂ and temperature (Choi et al. 1997).

China

In recent years, epidemiological studies examined NO₂ concentrations in kitchens of 160 city dwellers, as well as urine hydroxyproline (HOP) levels of individuals after 24-hour exposures. The results showed that in liquid petroleum gas (LPG) -fuelled kitchens, NO₂ peak concentrations can reach 990-1,809 µg/m³ at the moment of ignition, 17-37.5 -fold higher than the daily average concentration of 50 µg/m³ (background concentration). Also, the urine HOP levels of individuals cooking in LPG-fuelled kitchens were higher than those cooking in coal fuelled kitchens (Zhang Jinhiang et al. 1996). In contrast, NO₂ exposures produced by burning coal was significantly higher than those resulting from the burning of LPG.

A survey in four cities showed that the daily average value of indoor NO₂ concentration was 53 µg/m³, and elevated levels of SO₂, CO and TSP were recorded. Studies of primary school students aged 10-15 years residing in this environment showed 30-70% suffer from coughing, and 7-40% suffer from phlegm; and the incidence of tonsillitis and hyperplasia of retropharyngeal lymph folliculi are 7-17% and 15-16%, respectively. In addition, effects on immunity indices (such as PHA skin test and saliva lysozyme) were also observed (Wang Jin et al. 1989; Qin Yuhui et al. 1990).

Studies on 60 healthy Beijing children aged 9-11 years, and exposed to NO₂ at a daily average level of 70-110 µg/m³, with the peak values of 150-260 µg/m³ for two months, reported a negative correlation between NO₂ concentration and peak expiratory flow rates (PEFR). The results indicate that increased NO₂ level could affect children's respiratory function, aggravate air duct blocking and subsequently reduce PEFR (Wang Lihua et al. 1994). Long-term exposure to 50-100 µg/m³ NO₂ may significantly affect children's respiratory and immunity systems; and it may have similar effects on sensitive adults.

Australia

Morgan et al. (1998) examined the effects of outdoor air pollutants on daily hospital admissions in Sydney, Australia. A time-series analysis of counts of daily hospital admissions and outdoor air pollutants (1990-1994) showed that an increase in the daily maximum 1-hour concentration of NO₂ from the 10th to the 90th percentile was associated with an increase of 5.29% (95% CI: 1.07% to 9.68%) in childhood asthma admissions and 4.60% (95% CI: -0.17% to 9.61%) in COPD admissions. A similar increase in daily maximum 1-hour particle concentration was associated with an increase of 3.01% (95% CI: -0.38% to 6.52%) in COPD admissions. An increase from the 10th to the 90th percentile in daily maximum 1-hour NO₂ was associated with an increase of 6.71% (95% CI: 4.25% to 9.23%) in heart disease admissions among those 65 years and older. Increases in heart disease, COPD and childhood asthma were associated with increased NO₂ levels.

Carbon monoxide

Mediterranean Region

In Cairo, CO concentrations greater than the WHO *Guidelines for Air Quality* values were recorded in streets having moderate-to-heavy traffic densities in residential areas and in the city centre (Nasralla 1997). These concentrations resulted in high levels of COHb in the blood of traffic policemen, sometimes reaching more than 10%. This study also found a significant direct relationship between ischemic heart disease and COHb level in Cairo traffic policemen (Salem 1990).

*Western Pacific Region*China

Chinese middle-school students residing in a relatively low-pollution district of Shenyang, and undergraduate students studying at a relatively low-pollution district of Beijing, had average blood COHb concentrations of 0.8 % and 0.5 % respectively. Research on the effect of indoor CO on children aged 8-13 years showed that for rooms with individual heating the average CO content was 12.4 mg/m^3 and the COHb blood levels in these children was 4.17%. In rooms with central heating, the CO concentration was 6.4 mg/m^3 and the COHb levels in was 1.79% (Liu Jifang et al. 1992). This study also showed that in individually heated rooms the children's saliva lysozyme exhibited lower activity than that in centrally heated rooms; and immunoglobulin G content of the former is less than that of the latter. This phenomenon suggests that CO pollution could result in hyp immunity for children (Liu Jifang et al. 1992).

Ozone and other photochemical oxidants*Latin*

Several studies conducted in Mexico City have illustrated the association of acute peak daily O_3 concentration with respiratory health. A study conducted among children reported both acute and subacute effects of O_3 on lung functions (Castillejos et al. 1992). A $106 \text{ } \mu\text{g/m}^3$ rise in the mean 48-hour O_3 levels was associated with a decrease of 2% in FEV_1 , and a 7.4% decrease in the forced expiratory flow FEF_{25-75} . A greater decrease in these parameters was observed in children with chronic cough, chronic phlegm or wheeze. In another study, conducted among school children from Mexico City, that compared quintiles of O_3 concentration, a decrease of 1.43% in FVC and 2.85% in FEV_1 was reported in the highest quintile of O_3 concentration ($364\text{-}730 \text{ } \mu\text{g/m}^3$) (Castillejos et al. 1995). This change in FEV_1 is less than that predicted by Figure 3.2.

In a study conducted among pre-school children, an increase in school absenteeism for respiratory illnesses was observed among children exposed to higher O_3 concentrations (Romieu et al. 1992). Children exposed for two consecutive days to peak daily O_3 levels above $260 \text{ } \mu\text{g/m}^3$ had a 20% increase in risk of respiratory illness. For children exposed for 2 consecutive days to high O_3 levels (above $260 \text{ } \mu\text{g/m}^3$) and the previous day were exposed to low temperature, the risk of respiratory illness reached 40%. It is important to note that in Mexico City, and in some areas of Sao Paulo, levels of $260 \text{ } \mu\text{g/m}^3$ are frequently reached on several consecutive days.

O_3 exposure has also been related to emergency department visits for acute upper respiratory illness among children in Mexico City. An increase of $100 \text{ } \mu\text{g/m}^3$ in the 1-hour daily maximum was related to a 10% increase (95% CI: 7-13%) in upper respiratory illnesses during winter time. An increase of $100 \text{ } \mu\text{g/m}^3$ in the 1-hour daily maximum during 5 consecutive days was related to a 30% increase in upper respiratory illnesses (95% CI: 23-37%) (Tellez-Rojo et al. 1997). In this study a non-linear effect was observed in relation to O_3 levels. The upper respiratory illnesses increased linearly from $160\text{-}300 \text{ } \mu\text{g/m}^3$ and then tended to level off. A further increase in risk was observed at levels close to $440 \text{ } \mu\text{g/m}^3$. Effects at low concentrations of O_3 could not be studied.

Asthmatic children may be more susceptible than others to the effects of O_3 exposure. Studies conducted in Mexico City have shown that asthma-related emergency department visits increased 43% (95% CI: 24-66%) for an increase of 50 ppb in the daily 1-hour maximum O_3 level, with a 1-day lag (Romieu et al. 1995). In this study, peak O_3 concentrations ranged from $20\text{-}500 \text{ } \mu\text{g/m}^3$, with a mean of $180 \text{ } \mu\text{g/m}^3$.

In panels of asthmatic children, O_3 exposure has been related to a decrease in peak expiratory flow rate and an increase in respiratory symptoms (Romieu et al. 1996; Romieu et al. 1997). In general an increase

of $100 \mu\text{g}/\text{m}^3$ of daily peak O_3 concentrations led to an 11% increase (95% CI: 5-19%) of lower respiratory symptoms and a significant decrease in peak expiratory flow rate.

The decreased respiratory function observed among children exposed to O_3 in Mexico City seems to be smaller than that observed in children who are not chronically exposed to high levels of O_3 , suggesting the existence of a phenomenon of "tolerance". This finding supports studies showing that repetitive exposures tend to produce smaller responses (Hackney et al. 1997; Folinsbee 1991). The potential adverse effect of such "tolerance", or functional adaptation, is not known, but the absence of a protective response to O_3 exposure (bronchoconstriction) could lead to a higher exposure of children and therefore a more severe long-term effect. Experimental studies in animals and humans have shown that O_3 increases airway permeability and particle clearance, causes airway inflammation and a decrease in bacterial capacity, causes structural alteration in the lung and accelerate ageing of the lung (Lippmann 1989; and Section 3.1).

Western Pacific Region

China

An investigation has been conducted in China on the effect of short-term O_3 exposure on lung function for male non-smokers. During the test, volunteers undertook a moderate amount of exercise at intervals; and parameters of vital capacity were monitored. The study data showed that under the condition of short-term exposure $180 \pm 40 \mu\text{g}/\text{m}^3$ is the threshold concentration for acute lung dysfunction; and $100 \mu\text{g}/\text{m}^3$ is the threshold concentration for general malaise (Fang Qisheng et al. 1991).

Australia

A time-series analysis of counts of daily hospital admissions and outdoor air pollutants in Sydney (Morgan et al. 1998) found that an increase in the daily maximum 1-hour O_3 concentration was associated with a 2.45% (95% CI: -0.37, 5.35) increase in heart disease admissions among those 65 years and older.

A study of daily mortality in the Brisbane region (Simpson et al. 1997) indicated that O_3 levels (maximum daily O_3 levels were about $240 \mu\text{g}/\text{m}^3$) were significantly associated with total daily mortality. There was little evidence of interaction between the O_3 effects (mainly in summer) and particles or with SO_2 and NO_2 . The associations between O_3 and daily mortality were significant only for individuals who were older than 65 years of age. Positive associations were also found with cardiovascular disease categories and the regression coefficients, when significant, were higher than those for total mortality. The results indicated a possible threshold for O_3 levels.

Suspended Particulate Matter

Latin America

Evaluation of the effects of short-term exposure on morbidity and mortality

Various studies in Latin America have assessed the effect of particulate matter pollution on health. These included mortality studies, and studies of the health effects of particulate matter on respiratory symptoms and functions among children and adults. Studies related to the effects of particulate matter pollution on mortality have been conducted in Brazil, Chile and Mexico. An increase of $10 \mu\text{g}/\text{m}^3$ PM_{10} in Sao Paulo was related to an increase in daily mortality of 3% among adults older than 65 years of age (Saldiva et al. 1995). In Chile, a 0.8% increase (95% CI: 0.6-1.2%) in daily mortality was reported for an increase

of $10 \mu\text{g}/\text{m}^3$ PM_{10} (Ostro et al. 1999). In Mexico, a 0.5% increase (95% CI: 0.3-0.7%) in daily mortality was found for a similar increase in daily TSP (Borja-Aburto et al. 1997). These results are concordant with similar studies conducted in other parts of the world (Pope et al. 1995).

Studies conducted to determine the impact of particulate matter pollution on respiratory emergencies and medical visits have also suggested a positive association (Molina Esquivel et al. 1989; Ara-Seebla 1990; Arranda et al. 1994). In a study conducted in Santiago, Chile, respiratory-related emergency visits were related to ambient levels of PM_{10} and $\text{PM}_{2.5}$ during the winter months. In this study, PM_{10} levels ranged from 16-270 $\mu\text{g}/\text{m}^3$ and $\text{PM}_{2.5}$ levels from 10-156 $\mu\text{g}/\text{m}^3$. It was observed that an increase of 63.5 $\mu\text{g}/\text{m}^3$ in PM_{10} (1 quartile of the distribution) was related to a 2% increase (95% CI: 0.5-3.4%) in respiratory-related emergency department visits, with a 2-day lag during the winter months. A 36.5 $\mu\text{g}/\text{m}^3$ in $\text{PM}_{2.5}$ was related to a 2.2% increase in the number of emergency department visits for acute respiratory illnesses (95% CI: 0.9-3.6%) with a 2-day lag. A similar increase in $\text{PM}_{2.5}$ was related to a 5.4% increase in the risk of acute pneumonia (95% CI: 1.9-5.6%) with a 3-day lag, and to a 3.7% increase in the risk of upper respiratory illnesses (95% CI: 1.9-5.6%) with a 2-day lag during winter (Ilabaca Marileo 1996). In this study, the $\text{PM}_{2.5}$ daily mean ranged from 10-156 $\mu\text{g}/\text{m}^3$, and the relation appeared to be linear over the range of concentration studied.

The dose-response curves of this study, for emergency department visits of patients with severe and not-so-severe respiratory diseases related to PM_{10} and $\text{PM}_{2.5}$, had smaller slopes than those provided in the WHO *Guidelines* (Figure 3.7). In fact, for PM_{10} the slope fell below the lower confidence limit provided. For $\text{PM}_{2.5}$, the slope was considerably smaller than that shown in the WHO *Guidelines*. However, when the relationship of $\text{PM}_{2.5}$ with pneumonia-related emergency department visits, a severe respiratory illness, was considered, the slope was larger and above the upper limit of the PM_{10} effect predicted by the WHO *Guidelines*.

Results from a panel study conducted in Puchucavi, Chile, indicated an increase of 5% in cough (95% CI: 1-10%) among children with chronic respiratory symptoms was associated with an increase of 30 $\mu\text{g}/\text{m}^3$ in the 24-hour average levels of PM_{10} (Sanchez-Cortez 1997).

Studies conducted in Mexico among asthmatic children have documented an increase in respiratory symptoms and a decrease in lung function related to exposure to PM_{10} . During the study, daily PM_{10} ambient levels ranged from 29-363 $\mu\text{g}/\text{m}^3$, with a mean of 167 $\mu\text{g}/\text{m}^3$, and daily $\text{PM}_{2.5}$ levels ranged from 23-177 $\mu\text{g}/\text{m}^3$, with a mean of 86 $\mu\text{g}/\text{m}^3$. The results suggested that an increase of 10 $\mu\text{g}/\text{m}^3$ in PM_{10} levels was associated with a 4% increase in minor respiratory symptoms, and a 0.35% decrease in peak expiratory flow rate (Romieu et al. 1996). In the same study, an increase of 10 $\mu\text{g}/\text{m}^3$ in the $\text{PM}_{2.5}$ daily mean level was associated with an 8% increase (95% CI: 3-14%) in the incidence of symptoms in the lower respiratory tract. It is important to note that results of this study suggest a synergistic effect of PM_{10} and O_3 exposure on the incidence of symptoms in the lower respiratory tract among these children.

Evaluation of the effects of long-term exposure on mortality and morbidity.

Few studies have investigated the long-term health effects of particulate matter in Latin America. In a study conducted in Rio de Janeiro, an association was found between the annual average TSP levels in different districts of the city and mortality for pneumonia among infants (Penna and Duchade 1991). For each 10 $\mu\text{g}/\text{m}^3$ increase in TSP, the infant mortality from pneumonia was estimated to increase by 2.2 per 10,000 population.

Studies conducted in Cubatao, Brazil, have documented the decrease in pulmonary functions among children chronically exposed to high particle levels (Hofmeister 1987; Spektor et al. 1991). Children residing in the most polluted areas had lower pulmonary functions. Studies conducted in Chile (SERPLAC 1989; Arranda et al. 1993) reported a higher incidence of respiratory symptoms and lower

pulmonary functions in children resident in Santiago than in a control city. The results suggested an association between cough, nocturnal respiratory symptoms and hoarseness, and PM_{10} levels. However, these studies do not provide sufficient data to quantitatively evaluate the risk.

Mediterranean Region

A study showed a significant increase of chest diseases occurred in schoolchildren living in Kafr El-Elwe (a residential settlement close to a cement company) and Helwan City, as compared with those living in Shebin El-Kom, a more rural area (Hussein 1988; Nasralla 1992). It was found that 29.2% of schoolchildren in the first two settlements have obstructive lung diseases compared to only 9% in Shebin El-Kom. Furthermore, the high rate of mortality due to chest and cardiovascular diseases among the population of Helwan and Maadi was related to the prevalence of high concentrations of suspended particles and SO_2 in the atmosphere (Hussein 1988; Nasralla 1992).

Western Pacific Region

Japan

An epidemiological survey of schoolchildren in Japan showed that the prevalence of asthmatic symptoms, and congestion in chest and phlegm, was significantly correlated with levels of SPM (Nitta et al. 1993; Ono et al. 1990; Nakai et al. 1995). The annual mean concentrations of SPM in urban, suburban and background areas were $45.1-52.7 \mu\text{g}/\text{m}^3$, $36.5-43.3 \mu\text{g}/\text{m}^3$ and $27.8-32.4 \mu\text{g}/\text{m}^3$, respectively. The Japanese Environment Agency surveyed the health effects of air pollutants in about 15,000 schoolchildren (EA 1997). The results revealed a correlation between the prevalence of asthmatic symptoms and SPM at annual mean levels of $25-57 \mu\text{g}/\text{m}^3$ SPM. An epidemiological study in 185 schoolchildren (Shima and Adachi 1996) has shown that children with high IgE levels appear to be particularly susceptible to the effects of automobile exhaust at annual average concentrations of SPM of about $34 \mu\text{g}/\text{m}^3$.

A study of the morbidity of allergic rhinitis based on Japan National Health Insurance records showed a three-fold increase in the rate of allergic rhinitis (AR) over 10 years (Miyao et al. 1993). Additionally, results suggested possible correlations between the morbidity of AR and the mean yearly levels of the pollutant components SPM and NO_2 .

China

Epidemiological studies in China show that under long-term exposure, there is a correlation between particle concentrations and mortality from lung cancer. An investigation based on data for 50 million people in 26 cities showed that the average PM_{10} pollution in urban districts and in control districts were $460 \mu\text{g}/\text{m}^3$ and $220 \mu\text{g}/\text{m}^3$, respectively, and the corresponding average mortality from lung cancer was 14.0% and 7.0% (He Xingzhou et al. 1984; Fang Qisheng et al. 1991). The incidence of respiratory diseases, mainly chronic broncho-pneumonia and emphysema, with symptoms of coughing and dyspnea, increased with increasing particle level. Every $100 \mu\text{g}/\text{m}^3$ increase in TSP concentration led to a 6.75% increase in the incidence of chronic broncho-pneumonia in this coal-burning area. The results showed that exposure to $200 \mu\text{g}/\text{m}^3$ of TSP can cause upper-respiratory diseases in children; and that $290-470 \mu\text{g}/\text{m}^3$ of TSP significantly depressed immune functions in children. TSP concentrations less than $160 \mu\text{g}/\text{m}^3$ had no obvious effect on the incidence of respiratory tract diseases. Another study found that organic extracts from TSP of different sizes had different strengths of mutagenic effects. The smaller the particle, the stronger its mutagenic effects (Li Xiuyun et al. 1992).

Exposure to TSP (with the daily-average concentration below $150 \mu\text{g}/\text{m}^3$) produced an increased frequency of attacks of asthma in some asthma patients. The lung function of children was reduced after short-term exposure to TSP concentrations over $250 \mu\text{g}/\text{m}^3$. When TSP concentration were higher than

750 $\mu\text{g}/\text{m}^3$, middle-aged and old people, people with respiratory disease, and cardiovascular patients exhibited higher mortality (Li Xiuyun et al. 1992).

Australia

In Sydney, a time-series analysis of counts of daily hospital admissions and outdoor air pollutants (Morgan et al. 1998) showed that an increase in daily maximum 1-hour particle concentration was associated with an increase of 3.01% (95% CI: -0.38% to 6.52%) in hospital admissions for chronic obstructive pulmonary disease. An increase from the 10th to the 90th percentile in daily mean particle concentrations was associated with an increase in heart disease admissions among those 65 years and older of 2.82% (95% CI: 0.90 to 4.77), respectively.

A study of daily mortality in the Brisbane region (Simpson et al. 1997) indicated that the associations between total daily mortality and particle levels that were found in the United States and other countries might also be applicable in Brisbane. The associations between particulate matter and daily mortality were significant only for individuals who were older than 65 years of age; positive associations were also found with cardiovascular disease categories. And the regression coefficients, when significant, were higher than those for total mortality. The results did not indicate a threshold for particle levels.

Africa

A paucity of data exists in Africa about health effects associated with exposure to specific air pollutants. However, numerous studies in South Africa have indicated associations between a variety of respiratory symptoms and air pollution in urban, industrial and informal settlement areas. For example, high prevalence rates for respiratory illness were found in a residential suburb within an industrial area, relative to a suburb further away. Similarly, when compared with areas using cleaner fuel, raised levels of respiratory effects have been identified in informal settlements, where coal and wood were commonly used for domestic purposes (Opperman et al. 1993; Terblanche et al. 1992; Terblanche et al. 1993).

Lead

Latin America

Lead is transported to the fetus across the placenta since there is no metabolic barrier to fetal lead uptake. Parental exposure to lead produces toxic effects on the human fetus including reductions in gestational age, birthweight and mental development. A study conducted in Mexico has shown that the concentration of lead in the bone of a mother was significantly related to low birthweight (Gonzalez-Cossio et al. 1997).

The central nervous system is the primary target organ for lead toxicity in children (Needleman and Galsonis 1990), as discussed in Section 3.3. In agreement with these findings a study, conducted in Mexico City among schoolchildren from low-to-medium social status and aged 9-12 years, showed a strong negative correlation between blood lead level, and intellectual coefficients and teacher grading. There was no evidence of a threshold level (Muñoz et al. 1993).

The intensity of vehicular traffic, as a surrogate for exposure to ambient air lead, has been related to blood lead levels. In a study conducted in Mexico, children residing near a road with high traffic volumes had significantly higher levels of lead in blood than did children residing in a residential neighbourhood with smaller traffic volumes (Romieu et al. 1992). In another study conducted in Mexico among two hundred children younger than five years of age, the concentration of lead in ambient air was a significant predictor of blood lead levels (Romieu et al. 1995). The concentration of lead in ambient air (24-hour

average) ranged from 0.20-0.52 $\mu\text{g}/\text{m}^3$. The correlation coefficient between lead in the blood and lead in ambient air was 0.30. It was estimated that for each increase of 1.5 $\mu\text{g}/\text{m}^3$ of lead in ambient air, the concentration of lead in blood would increase by 1 $\mu\text{g}/\text{dl}$.

Africa

Studies conducted in Johannesburg indicated that approximately 60% of children have blood lead levels exceeding 10 $\mu\text{g}/\text{dl}$. Children from an informal settlement group, where coal was largely used for cooking purposes, had significantly higher blood lead levels than their inner city and suburban counterparts. In Cape Town, about 13% of coloured pre-school and first-grade children had blood lead levels above 25 $\mu\text{g}/\text{dl}$ (Deveaux et al. 1986; von Schirnding 1989; von Schirnding et al. 1991).

4. Indoor Air Quality

Most people spend a large of their time indoors, which makes indoor spaces important microenvironments when addressing risks from air pollution. Most of a person's daily exposure to many air pollutants comes through inhalation of indoor air, both because of the amount of time spent indoors and because of the higher pollution levels indoors. The air quality inside buildings is affected by many factors. In an effort to conserve energy, modern building design has favoured tighter structures with lower rates of ventilation. By contrast, in some areas of the world only natural ventilation is used; in other areas mechanical ventilation is common. Factors that can have a negative effect on health and comfort in buildings range from chemical and biological pollutants, to occupant perceptions of specific stresses such as temperature, humidity, artificial light, noise and vibration.

Although there is a tendency to use similar types of construction all over the world, especially for office buildings, indoor problems are often different in developed countries when compared with less developed countries. While in the former most of the problems arise from low ventilation rates and the presence of products and materials that emit a large variety of compounds, the inhabitants of many less developed countries face problems related to pollutants generated by human activities, in particular by combustion processes.

If health effects of air pollution are being considered, it does not matter if a pollutant is inhaled by breathing outdoor or indoor air. However, outdoor air has a different pollutant composition than that found in indoor air. Traffic-generated emissions are an example of outdoor air pollution; indoors, pollution sources include tobacco smoke and combustion products generated with biomass-fuelled stoves. Not all of these compositions have been taken into account in developing the air quality guidelines, and they may not be applicable under all circumstances, so care should be taken to avoid misinterpretation.

4.1 Indoor air pollution in developed countries

4.1.1 Important indoor air pollutants and their sources

Important sources of chemical indoor pollutants include outdoor air, the human body and human activities; emissions from building materials, furnishings and appliances and use of consumer products. Microbial contamination is mostly related to the presence of humidity. The heating, ventilating and air conditioning system can also act as a pollutant source, especially when it is not properly maintained. For example, improper care of filters can lead to re-emission of particulate contaminants. Biological contamination can proliferate in moist components of the system and be distributed throughout the building.

Indoor air pollutants can be classified in different ways. One approach is to divide them into chemical, physical and biological agents. Another approach is to classify them according to their origin. The origin of a particle has an important impact on its composition, which may include chemical and biological agents besides the physical nature of the particle itself. For example, combustion-generated tobacco smoke contains a complex mixture of pollutants.

The sources of indoor air pollution and the principal pollutants, grouped by outdoor and indoor origin, are summarized in Table 4.1. This is not a complete listing of all sources of indoor air pollutants, as there is continuous air exchange between indoors and outdoors, and most pollutants present in the outdoor air are also found indoors. Moreover, indoor sources may lead to an accumulation of some compounds that are rarely present in the ambient air. The most important compounds in indoor air environments include SPM, SO₂, NO_x, CO, photochemical oxidants and

lead. In developed countries, pollutant concentrations indoors are similar to those outdoors, with the ratio of indoor to outdoor concentration falling in the range 0.7-1.3. Concentrations of combustion products in indoor air can be substantially higher than those outdoors when heating and cooking appliances are used. This is particularly true in developing countries where ovens and braziers are used with imperfect kitchen and stove designs.

Table 4.1. - Principal pollutants and sources of indoor air pollution, grouped by origin

Principal pollutants	Sources, predominantly outdoor
SO ₂ , SPM/RSP	Fuel combustion, smelters
O ₃	Photochemical reactions
Pollens	Trees, grass, weeds, plants
Pb, Mn	Automobiles
Pb, Cd	Industrial emissions
VOC, PAH	Petrochemical solvents, vaporization of unburned fuels
Principal pollutants	Sources both indoor and outdoor
NO _x , CO	Fuel burning
CO ₂	Fuel burning, metabolic activity
SPM & RSP	Environmental tobacco smoke, resuspension, condensation of vapours and combustion products
Water vapour	Biological activity, combustion, evaporation
VOC	Volatilization, fuel burning, paint, metabolic action, pesticides, insecticides, fungicides
Spore	Fungi, moulds
Principal pollutants	Sources, predominantly indoor
Radon	Soil, building construction materials, water
HCHO	Insulation, furnishing, environmental tobacco smoke
Asbestos	Fire-retardant, insulation
NH ₃	Cleaning products, metabolic activity
PAH, Arsenic, Nicotine, Acrolein	Environmental tobacco smoke
VOC	Adhesives, solvents, cooking, cosmetics
Mercury	Fungicides, paints, spills or breakage of mercury-containing products
Aerosols	Consumer products, house dust
Allergens	House dust, animal dander
Viable organisms	Infections

Adapted from Suess 1992; WHO 1995i.

4.1.2 Concentrations of indoor air pollutants

Indoor concentrations of air pollutants are influenced by outdoor levels, indoor sources, the rate of exchange between indoor and outdoor air, and the characteristics and furnishings of buildings. Indoor concentrations of air pollutants are subject to geographical, seasonal and diurnal variations.

In developed countries indoor levels of NO₂ for example, are affected by gas heaters and cooking ranges (used in 20-80% of houses in some countries). In five European countries, the average NO₂ concentrations (over 2-7 days) were in the range of 20-40 µg/m³ in living rooms and 40-70 µg/m³ in kitchens, for dwellings with gas equipment and 10-20 µg/m³ in dwellings without gas equipment. These values may be doubled in rooms facing streets with heavy motor traffic. These exposure levels may have an effect on respiratory function, as discussed in Chapter 3. People may be exposed to higher NO₂ levels

under certain circumstances, such as in dwellings equipped with unvented cooking ranges. In addition, short-term measurements reveal NO_2 concentrations that may be five-fold higher than those averaged over several days. Peak values of up to $3800 \mu\text{g}/\text{m}^3$ for 1 minute have been measured in the Netherlands in kitchens with unvented gas cooking ranges (ECA 1989; Seifert 1993).

In general, average short-term CO concentrations at kerbside locations in developed countries are about $60 \text{ mg}/\text{m}^3$ for 30 minutes or $30 \text{ mg}/\text{m}^3$ for 1 hour. In kitchens with gas stoves, short-term values of up to $15 \text{ mg}/\text{m}^3$ have been measured. High values were also measured in bars and pubs, where smoking is common, with average concentrations of $10\text{-}20 \text{ mg}/\text{m}^3$ and peak levels up to $30 \text{ mg}/\text{m}^3$ (Seifert 1993).

In five developed European countries HCHO concentrations in indoor air were reported to range from $9\text{-}70 \mu\text{g}/\text{m}^3$. Higher values are occasionally encountered, especially in dwellings with urea-formaldehyde foam insulation (ECA 1990).

In general, average indoor levels of radon are $20\text{-}70 \text{ Bq}/\text{m}^3$ (ECA 1995), although they may be ten times higher in certain areas.

Exposure to environmental tobacco smoke is an important factor in indoor air quality assessment. The particle and vapour phases of environmental tobacco smoke are complex mixtures of several thousand chemicals, including known carcinogens such as nitrosamines and benzene. One of the most commonly used indicators of environmental pollution by tobacco smoke is the concentration of PM_{10} . This is 2-3 times higher in houses with smokers than in other houses (Schwartz and Zeger 1990). Nicotine is present in the vapour phase, with concentrations of up to $10 \mu\text{g}/\text{m}^3$ in houses with smokers. Data from nine European countries revealed that 33-66% of households had at least one smoker. The proportion of children with mothers smoking at home varied from 20-50%, and the proportion of children with fathers smoking at home ranged from 41-57%. Tobacco smoke, and particularly the exposure of children, is therefore a major problem for indoor air quality and environmental health.

4.1.3 Health effects and symptoms

Most indoor air pollutants directly affect the respiratory and cardiovascular systems, and have been discussed in detail in Chapter 3. In this section, health effects of indoor air pollutants not discussed in Chapter 3 will be summarized.

The direct human health effects of indoor air pollution on the respiratory system vary according to both the intensity and the duration of exposure, and also with the health status of the population exposed. Certain parts of the population may be greater risk, for example, the very young and elderly, those already suffering from respiratory disease, hyper-responders and people exercising.

The active and passive inhalation of tobacco smoke can lead to reduced pulmonary function, to an increased incidence of respiratory symptoms and infections, and to an increased incidence of lung cancer.

Inhalation of infectious microorganisms discharged by people and animals is a primary mechanism of contagion for most acute respiratory infections. In indoor environments characterized by reduced ventilation and increased use of untreated recirculated air concentrations of microorganisms may increase.

Outdoor allergens, house dust mites, and moulds in indoor environments of high humidity can cause allergic asthma (reversible narrowing of lower airways), allergic rhinoconjunctivitis in children and young adults, and recurrent bouts of pneumonitis or milder attacks of breathlessness.

The main acute effects of HCHO include odour perception and irritation of eyes, nose and throat. Discomfort, lacrimation, sneezing, coughing, nausea and dyspnea have also been observed, depending on the HCHO concentration.

Health effects reported for VOC range from sensory irritation to behavioural, neurotoxic, hepatotoxic and genotoxic effects. Concentrations at which identified health effects occur are usually much greater than those measured in indoor air. Exposure to mixtures of VOC may be an important cause of Sick Building Syndrome (SBS).

Asbestos and other mineral fibres may be a cause of an increased incidence of lung cancer. Acute exposure to asbestos and glass fibres can cause severe skin irritation.

More complex health effects are SBS and Building Related Illnesses (BRI). SBS is the occurrence of specific symptoms with unspecified aetiology, and are experienced by people while working or living in a particular building, but which disappear after they leave it. Symptoms include mucous membrane, skin and eye irritation, chest tightness, fatigue, headache, malaise, lethargy, lack of concentration, odour annoyance and influenza symptoms. SBS usually cannot be attributed to excessive exposure to known contaminant or to a defective ventilation system. A number of factors may be involved:

- Physical factors, including temperature, relative humidity, ventilation rate, artificial light, noise and vibration,
- Chemical factors, including environmental tobacco smoke, HCHO, VOC, pesticides, odorous compounds, CO, CO₂, NO₂ and O₃.
- Biological and psychological factors.

It is assumed that the interaction of several factors, involving different reaction mechanisms, cause the syndrome, but there is yet no clear evidence of any exposure-effect relationship.

BRI is an illness related to indoor exposures to biological and chemical substances (e.g. fungi, bacteria, endotoxins, mycotoxins, radon, CO, HCHO). It is experienced by some people working or living in a particular building and it does not disappear after leaving it. Illnesses include respiratory tract infections and diseases, legionnaires' disease, cardiovascular diseases and lung cancer.

4.2 Indoor Air Quality in Less-Developed Countries

Air quality in buildings in developing countries can have similar problems to those found in developed countries, particularly in the large modern urban areas in developing countries. As smoking rates in developing countries increase, exposure to environmental tobacco smoke can also be expected to increase. In addition, some hazardous materials, particularly pesticides, are becoming so widely used in developing countries that there may be higher indoor exposures than in developed countries.

There can be significant and widespread indoor exposures to many of the classical air pollutants, specifically sulphur dioxide, particulate matter, carbon monoxide, and nitrogen dioxide, in developing countries. A particular issue for developing countries is exposure to emissions from cooking and heating which may produce the highest air pollution exposures to many pollutants.

Today about half the population of the world continues to rely for cooking and associated space heating on simple household stoves using unprocessed solid fuels that have high emission factors for a range of health-damaging air pollutants. This section briefly summarizes what is known about the emissions, exposures, and health effects. Possible ways of managing the problems are discussed in Chapter 6.

4.2.1 Emissions

Although part of human experience since the first controlled use of fire, air pollution from simple open combustion of biomass has been scientifically characterized only in the last two decades, largely due to rising concerns about woodsmoke pollution in developed countries. Studies have shown high emission factors for many important pollutants, including respirable particulate matter, carbon monoxide, polycyclic aromatic hydrocarbons, such as benzo-a-pyrene, and volatile organic compounds, such as formaldehyde and benzene. Biomass fuels emit hundreds of chemicals during small-scale combustion, such as in household cooking or heating stoves (Smith 1987).

By comparison to modern cooking fuels, such as kerosene and gas, unprocessed solid fuels produce 10-100 times more respirable particulate matter per meal as the result of low (combustion and heat-transfer) efficiencies. Although biomass makes up only 10-15% of total human fuel use, compared to modern fuels a much larger fraction is burned indoors, since nearly one-half of humanity cooks and/or heats with simple stoves burning traditional biomass fuels (WHO 1997a).

Household use of coal is common in China and Eastern Europe. In Eastern Europe, coal is used mainly for heating in devices and emissions are vented outdoors, a process usually resulting in less human exposure than from using coal for cooking.

4.2.2 Concentrations

It is not known what fraction of biomass-burning households cook indoors on unvented stoves, although it is clear that many hundreds of millions do so during some or all seasons of the year. There is also little information about the ventilation rates in the many thousands of housing types in developing countries or countries in transition.

Unfortunately, relatively little monitoring has been done in these indoor environments and none of it has been done in a way to provide statistically valid samples of large populations. The results that have been obtained, nevertheless, are striking. Table 4.1, for example, lists results for particulate matter in indoor air obtained in a number of indoor air quality studies. Other classical pollutants also reach significant levels in these circumstances.

Important non-classical pollutants, such as formaldehyde, polycyclic aromatic hydrocarbons, benzene, and 1,3-butadiene also have been found to reach levels much higher than any but occupational settings in developing countries. In some areas of China and India, household coal use leads to high indoor concentrations of fluorine and arsenic with consequent health effects.

4.2.3 Exposures

Population exposure to an air pollutant is defined here as the simple combination of the concentration of the pollutant in air being inhaled, the duration of time over which it is inhaled, and the number of people exposed. As half the households in the world use solid fuels on a daily basis and it is activities such as cooking that generate most indoor emissions, there is a confluence of emissions, people, and time in places which may have relatively little ventilation. Consequently, globally there are high levels of indoor exposure to emissions from solid fuels (Smith 1993).

These high exposures are suggested by the data on personal exposure concentrations experienced by women during cooking over solid fuel stoves listed in Table 4.2.

4.2.4 Health Effects

Relatively few studies have been conducted to determine the health effects of indoor exposures to air pollutants in developing countries. Enough data has become available in recent years, however, to obtain some preliminary information on the type and very approximate magnitude of effects (Chen et al. 1990).

The following categorizes some major categories of effects where there is reasonable evidence from smoking studies, urban air studies, and multiple studies of solid-fuel use in developing countries. Also listed, where known, are the apparent odds ratios comparing the risk of these diseases between people living in houses using unvented biomass fuel and similar households not using such fuels. All the odds ratios reported here are statistically significant results, mostly of multivariate analyses in which a number of potentially confounding variables were included:

Acute respiratory infections in children: This is the chief cause of ill-health in the world and strongly associated with indoor use of solid fuels for cooking in a number of studies in Asia and Africa (OR = 2 - 6) (e.g., Pandey et al. 1989; Collings et al. 1990; Mtango et al. 1992; O'Dempsey et al. 1996).

Chronic obstructive pulmonary disease: This has been shown to be strongly associated with use of solid fuels in non-smoking women often along with *cor pulmonale* in studies from Latin America, South Asia and Saudi Arabia (OR = 3.4-15) (e.g., Dennis 1996; Dossing et al. 1994; Pandey 1984; Sandoval et al. 1993; Albalak et al. 1999)

Lung cancer: Lung cancer has been shown in many Chinese studies to be statistically associated with use of coal for cooking and heating, but not biomass fuels (OR = 3-9) (Smith and Liu 1994; Shields et al. 1995).

There is some evidence from studies of solid-fuel use in developing countries indicating a relationship between adverse pregnancy outcomes, the third most important category of ill-health in the world, and smoke exposure. After multivariate analyses, stillbirth has been associated with biomass fuel use by pregnant women in one Indian study (OR = 1.5) (Mavalankar et al. 1991) and with low birth-weight in Guatemala (Boy et al. 1999). After multivariate analyses, TB and blindness (cataracts) have been shown to be related to use of biomass fuels in two national and two local studies in India (Mishra et al. 1999a; Gupta et al. 1997; Mishra et al. 1999b; Mohan et al. 1989). Unfortunately all these studies relied on the type of stove or fuel as the indicator of pollution. More studies are needed that measure concentrations and exposures to indoor air pollutants so that exposure-response relationships can be more firmly determined.

4.2.5 Application of Air Quality Guidelines to Indoor Air Pollutant Exposure

The magnitude and population distribution of indoor air pollution exposure from unvented solid fuel use tends to differ from the outdoor urban air pollution exposures that have been the basis of most of the health effects research cited in Chapter 3. In many situations, for example, exposure levels may be high during cooking periods, with relatively low exposures between cooking periods.

Classical Gaseous Pollutants

All of the classical gaseous pollutants except ozone can be found in indoor solid fuel smoke and these can be a health concern in households with poor ventilation. Although there have been relatively few measurements of gaseous pollutants in developing countries, emissions estimates from solid fuel burning suggest that levels exceeding the air quality guidelines may be widespread in developing countries (WHO 1992c; WHO 1997a).

Particulate matter

The WHO air quality guidelines and most other particulate matter standards do not specify the chemical composition of particles. However, the health effects may vary with differences in particle compositions (see Section 2.4). Most of the epidemiological studies used to derive the air quality guidelines for particulate matter were conducted in cities where fossil-fuel particulate matter dominated and some even had significant contributions from coal burning, sometimes at household scale. Thus, it is important to consider the chemical composition of indoor air particulate matter when considering health effects of emissions from solid fuel combustion.

Very high concentrations of particles in indoor air can occur, sometimes for short duration, such as during cooking over solid fuel fires in rooms with poor ventilation. As discussed in Section 2.4, extrapolations of the air quality guidelines health impacts slope for particulate matter beyond $150 \mu\text{g}/\text{m}^3 \text{PM}_{10}$ must be done with extreme care because there may be a flattening of the exposure/response slope at higher exposure concentrations.

Although some epidemiological studies of particle air pollution were conducted in cities with significant emissions from woodsmoke during some seasons, there is insufficient information to consider the applicability of the new air quality guideline for particulate matter to biomass smoke. Many researchers believe that the chemical composition of fresh biomass smoke from open fires is too different from the aged fossil-fuel particulate matter upon which most of the epidemiological studies have been based to make such an extrapolation with current knowledge. At this stage, no judgment can be made about whether biomass particulate matter is less or more unhealthy than the same exposure concentration of urban outdoor particulate matter, but only that they may induce a different response because of their different composition. Thus, even though it is clear from the existing epidemiological literature that significant ill-effects do occur, it is not possible at this point to be confident about the precise exposure-response relationships.

Tobacco smoke is a fresh biomass smoke, which has been studied far more than any other pollutant mixture. In the form of ETS, it is associated with adverse health impacts in adults and children at particle concentrations similar to those at which the epidemiological studies of health effects of outdoor particulate matter have been conducted (Section 3.4). Even though it is not clear whether particulate matter is the best single measure by which to characterize ETS, the large health impact at concentrations commonly found leads to the conclusion that no level above zero could be considered acceptable (see Section 3.4). It should also be kept in mind that exposure to ETS and other air pollutants can act synergistically to produce adverse health effects (WHO 1999c).

There are similarities between ETS and biomass smoke from stoves, as hundreds of the organic compounds they both contain are similar. This supports evidence that exposure to biomass smoke from open stoves causes considerable human ill-health world wide. Nevertheless, until more evidence becomes available from studies done in biomass-using households, it is considered prudent not to extrapolate the guidelines described for particulate matter in section 3.1 to higher PM concentrations but rather use a conservative approach or alternatively apply the 1987 Air Quality Guidelines for particulate matter (WHO 1987).

Table 4.1. Indoor particle air pollution from biomass combustion in developing countries: partial list of studies measuring area concentrations (Smith 1996).

Country	Year of publication	Description of sample	Concentration [$\mu\text{g}/\text{m}^3$]
Papua New Guinea	1968	n=9, overnight, floor level	5200
	1974	n=6, overnight, sitting level	1300
Kenya	1971/2	n=8, overnight, highlands/lowlands	4000/800
		1988	n=64, 24 h,
		thatched/iron roof	1300/1500 (R)
India	1982	n=64, 30 min, wood/dung/charcoal	15,800/18,300/5500
	1988	n=390, cooking, 0.7m/ceiling	4000/21,000
	1992	n=145, cooking/non-cooking/living	5600/820/630
	1994	n=61, 24 h, ag-resid/wood	2800/2000 (I)
	1995	n=50, breakfast/lunch/dinner	850/1250/1460 (I)
	1996	n=136, urban, cooking/sleeping	2860/880 (I)
Nepal	1986	n=17, 2 h	4400 (I)
China	1986	n=64	2570
	1987	n=4, 8 h	10,900 (I)
	1988	n=9, 2 houses, 12 h	2900
	1988	n=12, 4 houses, dung	3000 (I)
	1990	15 houses, dung, winter/summer	1670/830 (I)
	1991	straw, avg summer-winter, kitchen/living room/dung	1650/610/1570 (I)
	1991	1-story/2-story houses	80/170
	1993	4 kitchens	1060 (I)
Gambia	1988	n=36, 24 h, dry/wet season	2000/2100 (I)
Zimbabwe	1990	n=40, 2 h	1300 (I)
Brazil	1992	n=11, 2-3 h, trad/impr	1100/90 (I)
Guatemala	1993	n=44, 24 h, trad/impr	1200/530 (I)
	1996	n=18, 24 h, trad/impr	720/190 (I), 520/90 (R)
	1996	n=43, 24 h, trad/impr	870/150 (R)
South Africa	1993	n=20, 12 h, kitchen/bedroom	1720/1020
Mexico	1995	n=31, 9 h	335 (R)/439 (I)

(Woodfuel, rural, and TSP unless otherwise stated; I=inhalable=cutoff at approx. 10mm; R=respirable=cutoff at 5mm or smaller; Trad/impr=traditional open stove compared to improved stove with flue)

Table 4.2. Indoor particle air pollution from biomass combustion in developing countries: partial list of studies of individual breathing area concentrations (women during cooking, unless otherwise stated) (Smith 1996).

Country	Year of publication	Description of sample	Concentration [$\mu\text{g}/\text{m}^3$]
India	1983	n=65, 4 villages	6800
	1987	n=165, 8 villages	3700
	1987	n=44, 2 villages	3600
	1988	n=129, 5 villages	4700
	1991	n=95, winter/summer/monsoon	6800/5400/4800
	1996	n=40, two urban slums, infants, 24 h	400/520 (I)
Nepal	1986	n=49, 2 villages	2000
	1990	n=40, trad/impr	8200/3000
Zambia	1992	n=184, 4 h, urban, wood/charcoal	470/210 (R)
Ghana	1993	n=143, 3 h, urban, wood/charcoal	590/340 (R)
South Africa	1993	n=15, 12 h, children, winter/summer	2370/290

(Woodfuel, rural, and TSP unless otherwise stated; I=inhalable=cutoff at approx. 10mm; R=respirable=cutoff at 5mm or smaller; Trad/impr=traditional open stove compared to improved stove with flue)

Table 4.3. Particle concentrations and exposures in the eight major global microenvironments (Smith 1996).

Region	Concentrations		Exposures		
	Indoor ($\mu\text{g}/\text{m}^3$)	Outdoor ($\mu\text{g}/\text{m}^3$)	Indoor (%)	Outdoor (%)	TOTAL (%)
<u>Developed</u>					
Urban	100	70	7	1	7
Rural	80	40	2	0	2
<u>Developing</u>					
Urban	250	280	25	9	34
Rural	400	70	52	5	57
		TOTAL (%)	== 86	14	100

Note: Population exposures expressed as a percentage of the world total. Here exposure is defined to equal to the number of people exposed multiplied by the duration of exposure and the concentration breathed during that time.

5. Ambient Air Quality Monitoring and Assessment

5.1 Assessment tools and functions

This chapter reviews some of the methodologies and systems used for the assessment of ambient air quality, with particular reference to the requirement for population exposure assessment and for determining compliance with standards or guidelines. The pollutants considered in detail are, SO₂, NO₂, CO, O₃, SPM and lead. These have a variety of potentially acute and chronic population health impacts, discussed in Chapter 3. Accordingly, the evaluation of air quality against guidelines may need to consider a range of time scales for effects, ranging from 10 minutes (SO₂) to one year (NO₂, SO₂, lead).

The three main air quality assessment tools are:

- ambient monitoring
- models
- emission inventories/measurement

The ultimate purpose of monitoring is not merely to collect data, but to provide the information necessary for scientists, policy makers and planners to make informed decisions on managing and improving the environment. Monitoring fulfils a central role in this process, providing the necessary sound scientific basis for policy and strategy development, objective setting, compliance measurement against targets and enforcement action (Figure 5.1).

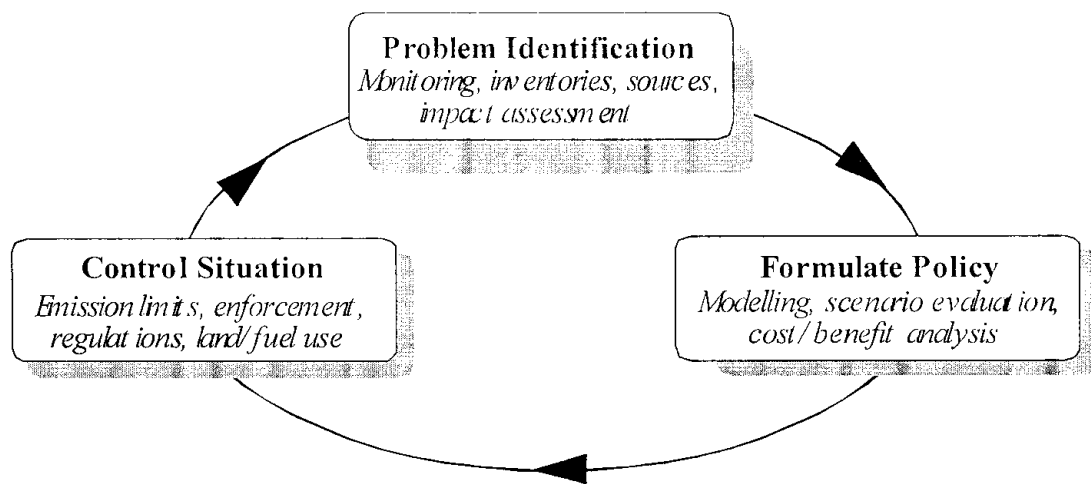


Figure 5.1. The Role of Monitoring in Air Quality Management

However, the limitations of monitoring should be recognized. In many circumstances, measurements alone may be insufficient -or impractical- for the purpose of fully defining population exposure in a city or country. No monitoring programme, however well funded and designed, can hope to comprehensively quantify patterns of air pollution in both space and time. At best, monitoring provides an incomplete - but useful - picture of current environmental quality. Monitoring therefore often needs to be used in conjunction with other objective assessment techniques, including modelling, emission measurement and inventories, interpolation and mapping. These are discussed in greater detail in Chapter 6.

Conversely, reliance on modelling alone is not recommended. Although models can provide a powerful tool for interpolation, prediction, and optimization of control strategies, they depend on the availability of reliable emission data. A complete inventory for a city or country may need to include emissions from

point, area and mobile sources; in some circumstances, assessment of pollutants transported into the area under study may also need to be considered. It is important, also, that the models utilized are appropriate to local conditions, sources and topography, as well as being selected for compatibility with available emission and meteorological datasets.

Inventories will, for the most part, be estimated using emission factors appropriate to the various source sectors (verified by measurement), and used in conjunction with surrogate statistics such as population density, fuel use, vehicle kilometres or industrial throughput. Emission measurements will usually only be available for large industrial point sources, or from representative vehicle types under standardized driving conditions.

All three assessment tools are interdependent in scope and application. Accordingly, monitoring, modelling and emission assessments should be regarded as complementary components in any integrated approach to exposure assessment or determining compliance against air quality criteria. Thus, for a reasonably complete picture of population exposure, ambient monitoring data will need to be supplemented by corresponding information from microenvironment and individual exposure surveys. This chapter focuses on ambient monitoring techniques and systems. Historically, these have provided most of the data used for exposure assessment. Recent publications have dealt in some detail with microenvironment and individual exposure monitoring (WHO 1999a). These issues are discussed in Chapter 4.

5.2 Monitoring objectives

The first step in designing or implementing any monitoring system is to define its overall objectives. Setting diffuse, overly restrictive or ambitious monitoring objectives will result in cost-ineffective programmes with poor data utility. In such circumstances, it will not be possible to make optimal use of the available manpower and resources. Thus it is vital that clear, realistic and achievable monitoring objectives be set. This enables appropriate Data Quality Objectives (DQOs) to be defined (Box 5.2). In turn, this makes it possible for a targeted and cost-effective Quality Assurance Programme (QAP) to be developed. Overall requirements for such a programme are addressed in outline in section 5.3. A clear definition of overall monitoring objectives and DQOs is therefore essential to enable networks to be optimally designed, priority pollutants and measurement methods to be selected, and data management/reporting requirements to be identified (Figure 5. 2).

The relationships between the data collected and the information to be derived from it must be taken into account when a monitoring programme is planned. This emphasizes the need for users and potential users of the data to be involved in the planning of surveys, not only to ensure that they are appropriate to their needs, but also to justify the resource commitment. It should be recognized that monitoring networks are invariably designed for a variety of functions. These may include policy and strategy development, local or national planning, measurement against international standards, identification/quantification of risk and public awareness. Typical monitoring functions are summarized in Box 5.1. Every monitoring survey or network is therefore different, being influenced by a unique mix of local/national issues and objectives.

Box 5.1 - Key Monitoring Objectives

- Determining population exposure and health impact assessment.
- Informing the public about air quality and raising awareness.
- Identifying threats to natural ecosystems.
- Determining compliance with national or international standards.
- Providing objective inputs to Air Quality Management, traffic and land-use planning.
- Source apportionment and identification.
- Policy development and prioritisation of management actions.
- Development/validation of management tools (models, Geographical Information Systems etc.).
- Assessing point or area source impacts.
- Trend qualification, to identify future problems or progress against management/control targets.

Box 5.2 - Data Quality Objectives

The essential requirements to be met by measurements, if overall monitoring objectives are to be achieved.

- Measurement accuracy and precision.
- Traceability to metrology standards.
- Temporal completeness (data capture).
- Spatial representativeness and coverage.
- Consistency - from site to site and over time.
- International comparability/harmonization.

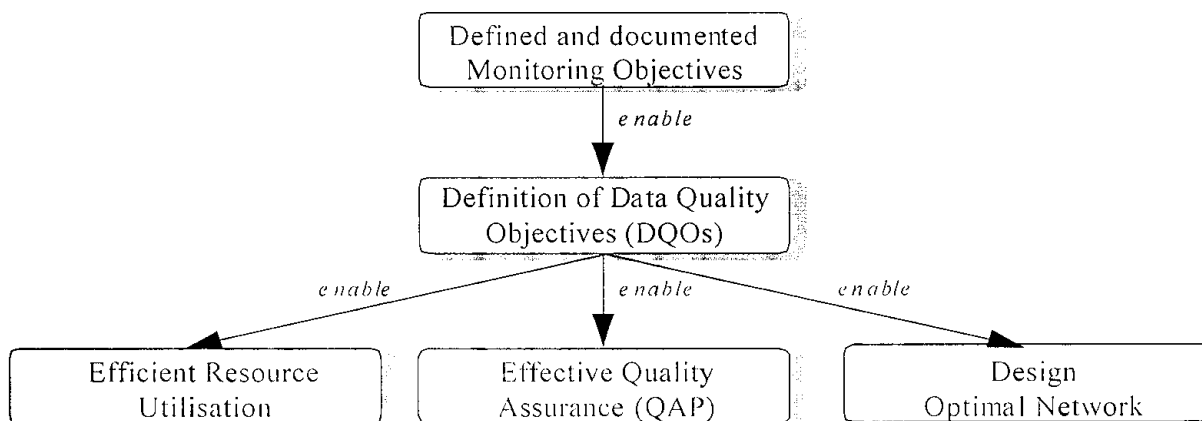


Figure 5.2 The Importance of Objective Setting

5.3 Quality assurance and quality control (QA/QC)

Quality assurance and control (QA/QC) is an essential part of any air monitoring system. It is a programme of activities that ensures that measurements meet defined and appropriate standards of quality, with a stated level of confidence. It should be emphasized that the function of QA/QC is not to achieve the highest possible data quality. This is an unrealistic objective, which cannot be achieved under practical resource constraints. Rather, it is a set of activities, which ensures that measurements comply

with the specific DQOs for the monitoring programme. In other words, QA/QC ensures that data are fit for the purpose. Major QA/QC objectives are summarized in Box 5.3, whilst the functional components of a QA/QC programme are identified in Box 5.4.

Quality assurance activities cover all pre-measurement phases of monitoring, including determining monitoring and data quality objectives, system design, site selection, equipment evaluation and operator training. Quality control functions affect directly measurement-related activities such as site operation, calibration, data management, field audits and training. The successful implementation of each component of a QA/QC scheme is necessary to ensure the success of the complete programme. QA/QC may be regarded as a chain of activities designed to deliver credible and accurate data, but a chain is only as strong as its weakest link!

Box 5.3 - QA/QC for Air Monitoring: overall objectives

- Measurements accurate, precise and credible.
- Data representative of ambient or exposure conditions.
- Results comparable and traceable.
- Measurements consistent over time.
- High data capture, evenly distributed.
- Optimal use of resources.

Box 5.4 - QA/QC for Air Monitoring: the major components

- | | |
|--------------------------|---|
| <i>Quality Assurance</i> | <ul style="list-style-type: none"> • Definition of monitoring and data quality objectives. • Network design, management and training systems. • Site selection and establishment. • Equipment evaluation and selection. • Routine site operations. |
| <i>Quality Control</i> | <ul style="list-style-type: none"> • Establishment of calibration/traceability chain. • Network audits and inter-calibrations. • System maintenance and support. • Data review and management. |

Although the main principles of QA/QC system design apply to most network or instrumentation types, there are often characteristic differences in their emphasis and practical implementation. It is a common oversight to place too much emphasis on laboratory-based quality assurance activities, as these are often easier to control and monitor.

Although such QA/QC tasks are vital, particularly for sampler-based measurement programmes involving substantial laboratory analysis, considerable emphasis in any network quality system needs to be focused on the point of measurement. Mistakes or problems at the start of the measurement chain cannot be readily corrected afterwards. Sample system design and maintenance (see Section 5.4.3), regular site visits, audits and inter-calibrations therefore play an important role in network quality assurance.

Another unifying feature of network quality systems is the need for effective data screening and validation. In any measurement programme -however well designed or operated- equipment malfunction, human error, power failures, interference and a variety of other disturbances may result in the collection of spurious data. To maximize data integrity and utility, therefore, these must be identified and removed before a final, definitive dataset can be generated or used.

The design of an effective and targeted QA/QC programme is only the first step in the process of quality management. The programme needs to be fully documented, and compliance with its procedures and requirements actively monitored. Monitoring programmes often evolve over time as objectives, legislation, resources or air pollution problems change. Quality assurance programmes therefore also need to be regularly reviewed, to ensure that they remain properly targeted and fit for purpose.

A step-by-step model for the development and implementation of QA/QC programmes for air monitoring is depicted in Figure 5.3. QA/QC systems are considered in greater detail elsewhere (UNEP/WHO 1994a; Bower 1997).

5.4 Network design

There are no universal rules for network design, since any decisions will be determined ultimately by the overall monitoring objectives and resource availability. Although monitoring systems can have just a single, specific objective, it is more common for them to have a broad range of targeted programme functions. No survey design can hope to completely address all the possible monitoring objectives listed in Box 5.1. However, the design of surveys to meet these individual requirements often has common features, and can use common data (to avoid duplication of effort) and overlapping data to verify the credibility of results and conclusions. The overall design goal is to ensure that the maximum information can be derived from the minimum effort. In some countries, networks may be operated by a variety of organisations, including different Government Departments. In such a circumstance, harmonization of the programmes and sharing of data is vital to avoid unnecessary effort and to maximize overall cost-effectiveness.

5.4.1 Resource constraints and issues

A key issue, which needs to be addressed at a very early stage of the network design process, is that of resource availability (Box 5.5). In practice, this is usually the major determinant in network design, which will exert a particularly strong influence on the choice of site numbers, pollutants to be monitored and instrumentation selected.

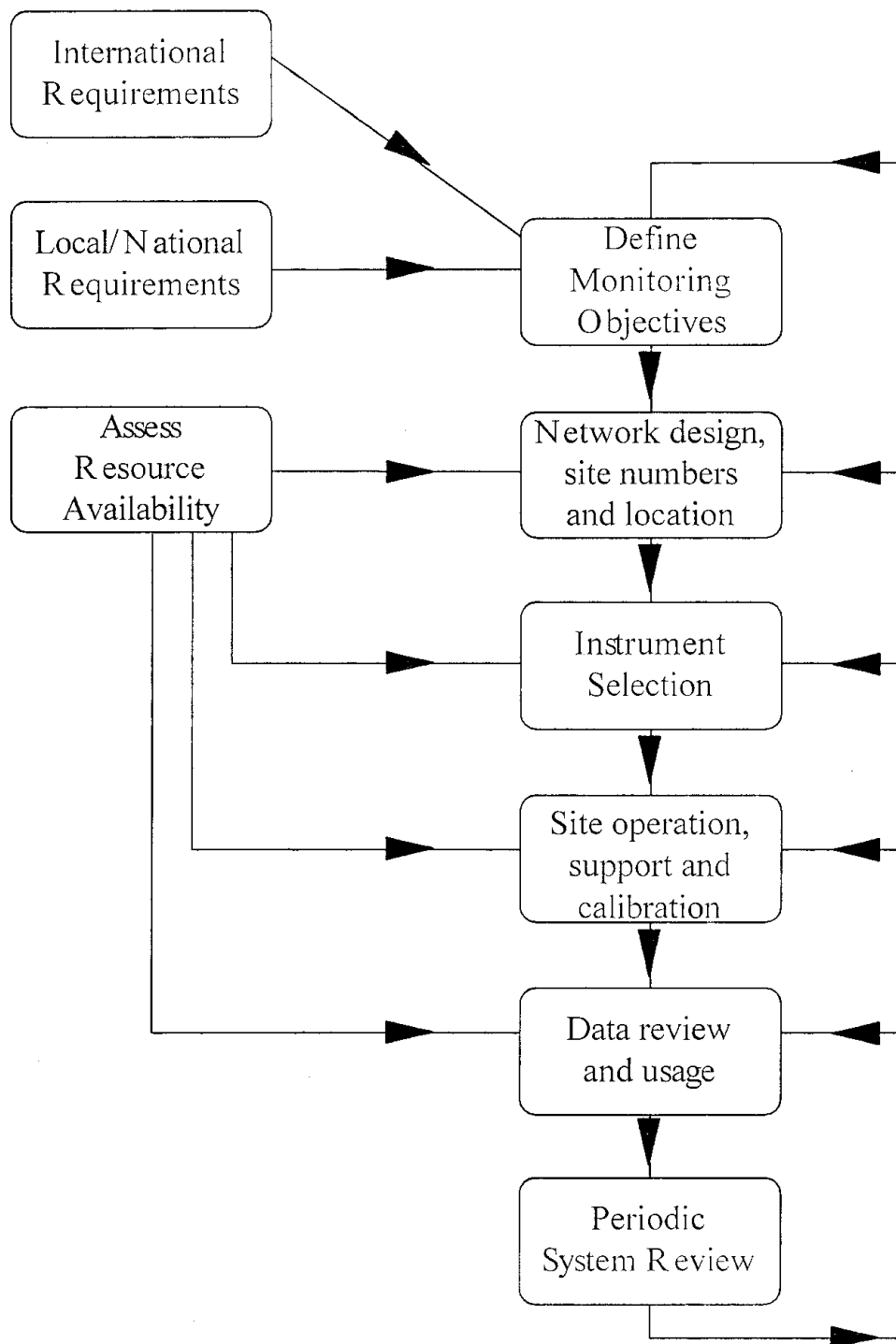


Figure 5.3. QA/QC for Air Monitoring: a Step-by-step Approach

A wide range of commitments and costs is likely to be incurred in any air monitoring programme. Some of these are listed in Box 5.6. Before any firm capital or resource commitment, it is therefore essential to plan the survey, assess resource availability, select the most appropriate equipment and choose monitoring sites.

Box 5.5 - Network Design: important resource constraints

- \$ money (capital and ongoing).
- ☺ skilled manpower.
- 🕒 time.

When any equipment purchase must be made, consideration is needed of its long-term operational or financial sustainability. Local sustainability requires the continuing availability of agents (or an in-house capability) for repair and maintenance, together with the necessary skill-base for routine equipment operation and calibration. Financial sustainability requires an ongoing budget for equipment operation, typically amounting to about 10% per annum of the initial capital expenditure.

Box 5.6 - Costs of Air Monitoring

- Capital purchase of analysers, samplers, site and laboratory infrastructure.
- Equipment service, maintenance and repair.
- Staff and subcontractor costs - operational and management.
- QA/QC audits, intercalibrations, training, data management.
- Running costs - site rental, electricity, consumables, spare parts, calibration gases, telephone, lab analysis, transport etc.

An ongoing resource commitment to QA/QC is also required in any monitoring survey or network, to ensure that its measurement quality and availability are fully consistent with overall programme objectives. Typically, a budget of between 20-40% of the total annual operating costs may be appropriate for this purpose, depending on the complexity of the programme and the stringency of its DQOs.

5.4.2 Site numbers and selection

For the purposes of designing a network to assess population exposure and compliance with health guidelines, a number of basic issues need to be addressed (Box 5.7).

Box 5.7 - Compliance Monitoring- basic issues

- Where is the population?
- What pollutant concentrations are they exposed to?
- ... and for how long?
- In what areas and micro-environments is exposure important?

In practice, the number and distribution of air quality monitoring stations required in any network, or the number of samplers used in a survey, also depend on the area to be covered, the spatial variability of the pollutants being measured and the required data usage (Box 5.8).

Box 5.8 - Network Design: Site Numbers*Will depend on:*

- required data use/objectives.
- area to be covered.
- spatial variability of pollutants.
- resource availability.
- instruments deployed.

There are a number of approaches to network design and site selection. Exposure assessment, in particular, will often need to target both source-oriented monitoring sites (often synonymous with worst-case or 'hot-spot' environments) and background locations optimized for quantifying general population exposure. Depending on the pollutants under assessment, data from a wide variety of location types may therefore be necessary to build up a reasonably complete picture of exposure patterns (Box 5.9).

Although the overall requirement of any network or survey is to maximize spatial coverage and representativeness, in practice this goal is only approached by grid-based monitoring strategies: these can be optimized to provide detailed information on spatial variability and exposure patterns for priority pollutants. However, this approach is highly resource-intensive and not, in consequence, widely used.

To reduce resource requirements, a grid approach can be utilized in conjunction with intermittent or mobile sampling, although use of this technique is not consistent with the need to maximize temporal representativeness as well as spatial coverage (see section 5.4.3).

A more flexible approach to network design, appropriate over city-wide or national scale, involves siting monitoring stations or sampling points at carefully selected representative locations, chosen on the basis of required data and known emission/dispersion patterns of the pollutants under study. This approach to network design requires considerably fewer sites than grid strategies and is, in consequence, cheaper to implement. However, sites must be carefully selected if measured data are to be useful. Moreover, modelling and other objective assessment techniques may need to be utilized to 'fill in the gaps' in any such monitoring strategy.

Box 5.9 – Possible Monitoring Locations Relevant to Exposure Assessment	
Site Classification	Description
• city/urban centre	An urban location representative of general population exposure in towns or city centres, e.g. pedestrian precincts and shopping areas
• urban background	An urban location distanced from sources and therefore broadly representative of city-wide background conditions
• suburban/residential	A location type situated in a residential area on the outskirts of a town or city
• kerbside/near road	A site sampling within 1-5 metres of a busy road
• industrial	An area where industrial sources make an important contribution to long-term or peak concentrations
• rural	An open countryside location distanced as far as possible from roads, populated and industrial areas.
• source/target-oriented	Any special source-orientated or micro-environment site. For example, garages, car parks or tunnels, or a site located at a targeted receptor point such as schools or hospitals
• indoor	Will include domestic and office environments (excluding occupational), together with in-car and commuting environments- see Chapter 6.

Some general points to consider when selecting a site location are:

- **Overall monitoring objectives.** These usually determine the target areas for study, the priority pollutants and the number of sites required.
- **Sources and emissions.** Compilations of emission data can assist substantially in site selection. These will help to identify the most polluted areas, as well as other location types where population exposure may be significant. If a full emission inventory is not available, then surrogate statistics such as population density, traffic flows and fuel consumption may be of use in estimating likely pollution 'hot spots', where target receptor exposure may be maximized.
- **Meteorology and topography.** The prevailing weather conditions and local topography will strongly influence the dispersion of air pollutants or, in the case of secondary pollutants, affect their production in the atmosphere.
- **Model simulations.** The results of dispersion modelling, if available, can be used to predict pollutant dispersion and deposition patterns, thereby helping to identify areas where exposure may be maximized. To be of real use, reliable emissions and meteorological data are needed, together with an appropriate and validated model.
- **Existing air quality data.** If monitoring has already been carried out in the area of interest, the data from previous studies may prove useful in targeting problem areas. If no such studies have been carried out, special screening surveys may be designed to provide area-wide or local information on pollution problems. These often involve passive samplers and/or mobile monitoring laboratories.
- **Other information** such as demographic, health, population and land-use information are invaluable in targeting locations representative of both baseline and worst-case exposure. The use of Geographical Information Systems (GIS), in particular, allow both ambient measurements and other geo-co-ordinated

datasets to be used for exposure assessment, epidemiological studies and a range of air quality management activities.

The site-selection process must also take into account the spatial distribution and variability of criteria pollutants within urban environments. For example, concentrations of primary traffic pollutants such as CO are highest at roadside locations, whereas O₃ levels have higher spatial uniformity but will be lowest in near-road locations due to scavenging by vehicle NO_x emissions. For this reason, it is usually not possible to optimize measurements for all pollutants at any one site location. In such circumstances, some degree of compromise will often be required. In general, the spatial variability of secondary pollutants, such as NO₂ and O₃, tends to be more homogeneous than for primary pollutants such as CO and SO₂. This greater variability of primary pollutants, in particular in proximity to sources, will have obvious implications for monitoring site density and numbers required in any survey.

Micro-scale siting considerations are also important in ensuring that meaningful and representative measurements are made. If baseline concentrations are to be assessed, then monitoring sites should be adequately separated from local pollutant sources (for example, roads or small boilers) or sinks (such as dense vegetation). Probe aerodynamics and site sheltering will also often be important. Free airflow around the sampling inlet will be necessary to ensure representative sampling; for this reason, sampling in a stagnant or sheltered micro-environment should be avoided.

A variety of practical considerations also apply when selecting monitoring sites. They must be accessible for site visits, but the potential for public interference or vandalism must also be recognized. Electricity for pollutant analysers and station infrastructure must be available, together with a telephone linkage for data telemetry, if utilized (Box 5.10).

Box 5.10 - Network Design: Micro-Scale

Need to consider -

- public safety.
- visual intrusiveness/aesthetics of site.
- security/vandalism.
- access to utilities and maintenance.
- planning permission.
- local sources/sinks.
- aerodynamic clearance/sheltering.

5.4.3 Sampling strategies and systems

Monitoring involves assessing pollutant behaviour in both space and time. A good network design should therefore seek to optimize both spatial and temporal coverage, within available resource constraints (UNEP/WHO 1994a; Bower 1997). The previous section dealt with maximizing spatial coverage and obtaining representative measurements. Achieving good time-domain performances is not a problem for most commonly-used air monitoring methodologies (see Section 5.5). However, once priority pollutants are identified, the measurement technologies selected must be capable of a time resolution consistent with the pollutant averaging times specified in guidelines.

Continuously operating automatic analysers may be used to assess compliance with short- or long-term guidelines. Well-recognized semi-automatic methods such as acidimetric SO₂ samplers (see Section 5.7.1) will be perfectly adequate for measurement against daily standards or criteria. For automatic analysers or samplers to reliably measure ambient pollutant concentrations, it is essential that these

pollutants are transferred unchanged to the instrument reaction cell. The sampling manifold is a crucial and often overlooked component of any monitoring system, which strongly influences the overall accuracy and credibility of all the measurements made.

Integrating measurement methods such as passive samplers, although fundamentally limited in their time resolution, are useful for the assessment of long-term exposure, as well as being invaluable for a variety of area-screening, mapping and network design functions (UNEP/WHO 1994b). Problems can arise, however, when using manual sampling methods in an intermittent, mobile or random deployment strategy. Such an approach is usually adopted for operational or instrumentation reasons, or simply because it would not be possible to analyse the sample numbers or data produced by continuous operation. Intermittent sampling is still widely used world-wide. However, this sampling strategy may be of limited utility in assessing diurnal, seasonal or annual pollutant patterns or, indeed, for a reliable assessment of population exposure patterns.

When auditing monitoring sites world-wide, sampling system deficiencies are by far the most commonly encountered problem. Usually, these result from inappropriate designs or inadequate cleaning of the sampling system. Some design requirements, common to all gas sampling systems for analysers or samplers, are summarized in Box 5.11. Corresponding requirements for SPM are complex, and these are discussed in detail elsewhere (UNEP/WHO 1994c).

Box 5.11 - Key Air Sampling System Requirements

- Inertness to pollutants being sampled.
- Minimized air-residence time.
- Low airstream/sample line interaction.
- Excess flow above total analyser demand.
- Minimized pressure drop.
- Removal of interferences such as water vapour/pollutants.
- Avoidance of thermal "shock" (when hot, humid, ambient air is sampled into an air-conditioned enclosure).
- ease of cleaning and maintenance...
- ...which must be done regularly!

5.5 Instrument issues

The capabilities of air monitoring methodologies, as well as their inevitable resource implications, exert a strong influence on network design. This section reviews some of these issues. Specific monitoring methods applicable to individual criteria pollutants are reviewed in Section 5.7.

Air monitoring methodologies can be divided into four main generic types, covering a wide range of costs and performance levels. These are passive samplers, active samplers, automatic analysers and remote sensors. The main advantages and characteristics of these monitoring technologies are summarized in Box 5.12.

Box 5.12 - Air Monitoring Techniques			
Method	Advantages	Disadvantages	Capital Cost
<i>Passive Samplers</i>	<ul style="list-style-type: none"> • Very low cost. • Very simple. • No dependence on mains electricity. • Can be deployed in very large numbers • Useful for screening, mapping and baseline studies. 	<ul style="list-style-type: none"> • Unproven for some pollutants. • In general only provide monthly and weekly averages. • Labour-intensive deployment/analysis. • Slow data throughput. 	US\$10-70 per sample.
<i>Active Samplers</i>	<ul style="list-style-type: none"> • Low cost. • Easy to operate. • Reliable operation/performance. • Historical dataset. 	<ul style="list-style-type: none"> • Provide daily averages. • Labour-intensive sample collection and analysis. • Laboratory analysis required. 	US\$1000-3000 per unit.
<i>Automatic Analysers</i>	<ul style="list-style-type: none"> • Proven. • High performance. • Hourly data. • On-line information. 	<ul style="list-style-type: none"> • Complex. • Expensive. • High skill requirement. • High recurrent costs. 	US\$10 000-15 000 per analyser.
<i>Remote sensors</i>	<ul style="list-style-type: none"> • Provide path or range-resolved data. • Useful near sources. • Multi-component measurements. 	<ul style="list-style-type: none"> • Very complex and expensive. • Difficult to support, operate, calibrate and validate. • Not readily comparable with point data. • Atmospheric visibility and interferences. 	US\$70 000 - 150 000 per sensor, or more.

Passive samplers

These offer a simple and cost-effective method of screening air quality in an area. A sample integrated over a defined exposure time (typically a week to a month) is collected by molecular diffusion to a pollutant-specific absorbent material. The low unit costs permit sampling at a number of points in the area of interest. This is useful in highlighting "hot-spots" of high pollutant concentrations, such as major roads or emission sources, where more detailed studies may be needed. Careful survey design and attention to laboratory-based QA/QC of the sample analysis process is necessary to make best use of this technique.

Active samplers

Pollutants samples are collected either by physical or chemical means for subsequent analysis in a laboratory. Typically, a known volume of air is pumped through a collector such as a filter or chemical solution for a known period of time, which is then removed for analysis. There is a long history of active sampler measurements in many parts of the world, providing valuable baseline data for trend analyses and comparison. Sampling systems (for gases), sample conditioning, weighing systems (for SPM) and laboratory procedures are key factors influencing the quality of the final data.

Automatic analysers

These can provide high-resolution measurements (typically hourly averages or better) at a single point for most of the criteria pollutants (SO₂, NO₂, CO and SPM), as well as for other important species such as VOC. The sample is analysed on-line and in real-time, usually by electro-optic methods: UV or IR absorption, fluorescence or chemiluminescence are common detection principles. To ensure the data from automatic analysers are accurate and reliable, a high standard of maintenance, operational and quality assurance/control procedures is invariably required.

Remote sensors

These are recently developed instruments which use long-path spectroscopic techniques to make real-time concentration measurements of a range of pollutants. The data are obtained by integrating along a path between a light source and a detector. Long-path monitoring systems can have an important role to play in a number of monitoring situations, particularly in proximity to sources. A high standard of operational, calibration and data screening/management practice is essential if meaningful data are to be produced by such systems.

General advice on instrument selection

It is advisable to always choose the simplest technique that will do the job. Inappropriate, too complex or failure-prone equipment can result in poor network performance, limited data utility and - worst of all - a waste of money. Although monitoring objectives are the major factor to consider, resource constraints and the availability of skilled manpower must also be considered. There is a clear trade-off between equipment cost, complexity, reliability and performance. More advanced systems can provide increasingly refined data, but are usually more complex and difficult to handle.

Sampler methods are not necessarily less accurate than automatic analysers. For instance, data from co-located chemiluminescence NO_x analysers and diffusion tubes can show excellent agreement, to within plus or minus 10%, providing both techniques are subject to high standards of quality assurance and operational practice (Smith et al. 1997). In practice, the combined use of samplers and automatic analysers in a 'hybrid' monitoring programme can offer a versatile and cost-effective approach to network design over a municipal or national scale. Such a network design will use passive or active samplers to provide good spatial coverage and area-resolution of measurements. Automatic analysers, deployed at carefully selected locations, can provide more detailed time-resolved data for assessing peak concentrations or comparison with short-term standards.

In some circumstances, additional use may be made of passive or active samplers. Reasonably robust statistical relationships can often be derived between peak, upper percentile and long-term average pollutant concentrations (Carless et al. 1994). Although these semi-empirical relationships may differ from pollutant to pollutant, as well as with generic site type, they may enable long-term datasets from sampler surveys to be used to assess broad compliance with short-term guidelines; or at least to identify

areas where exceedances are likely. This indirect assessment technique should, however, always be used with caution.

Deducing the levels of one pollutant from measurements of another may be possible when the local air pollution climate is dominated by emissions from one source sector, and where robust and well-established emission ratios exist for the species in question. For example, traffic-related benzene and lead levels may in some circumstances be estimated from corresponding CO concentrations. However, surrogate measurements of this kind must always be used with caution.

5.6 Turning data into information

As emphasised in the introduction to this chapter, the purpose of monitoring is not merely to collect data, but to produce useful information for planning, health professional, regulatory and public end-users (Figure 5.4). Raw data by themselves are of very limited utility. These first need to be screened (by validation) and collated to produce a reliable and credible dataset (UNEP/WHO 1994a; Bower 1997). In effective Air Quality Management Information Systems, the validated measurements will be archived together with corresponding emission datasets, model predictions and other input relevant to decision-making.

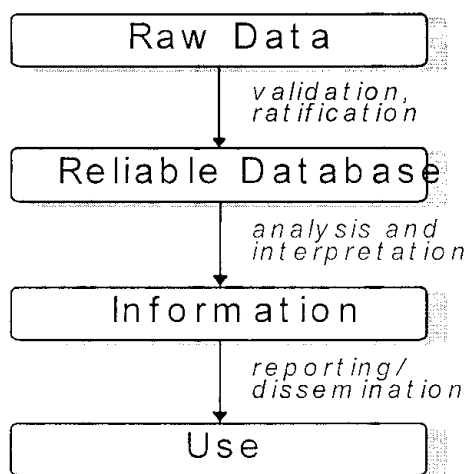


Figure 5.4 Data throughput from a monitoring programme

The next stage in data management is analysis and interpretation, designed to provide useful information in an appropriate format for end-users. A variety of proven analytical methodologies are available for air quality datasets. However, the appropriate level and method of data treatment will be determined by the ultimate end-use. A minimum level of data management could be the production of daily, monthly and annual summaries, involving simple statistical and graphical analyses that show both time and frequency distributions of the monitoring data. The use of Geographical Information Systems (GIS) should be considered, particularly when the intention is to combine pollution data with those from epidemiological and other geo-co-ordinated social, economic or demographic sources.

The information derived from measured data must be reported or otherwise disseminated in a timely manner to end-users. This can be in the form of complete datasets, processed summaries, peak or average statistics, exceedances of standards or targets, analytical results, graphs or maps. Formats for information transfer should be designed which are both appropriate to the capabilities of the network and to the requirements of the users. Communicating data or information may involve a number of transmission methods, including paper reports, CD-ROMs, electronic, broadcast and INTERNET media. Public information systems, often exploiting innovative broadcast and world wide web media, play an

increasingly important role in many countries in raising awareness, warning of pollution episodes and advising susceptible population subgroups.

5.7 Key pollutants and measurement methods

This section summarizes the measurement techniques available for determining ambient concentrations of the main "classic" pollutants, SO₂, NO₂, CO, O₃, SPM and lead. There is some overlap between these techniques and corresponding methodologies used for individual exposure and micro-environment surveys. At extreme ambient concentrations, moreover, some occupational exposure measurement systems, such as detector tubes, may be used in a semi-quantitative manner (Saltzman and Caplan 1995).

Sulphur dioxide

As the main source of this pollutant is the combustion of fossil fuels containing sulphur, either in power stations or domestic/commercial space heating, the major local source types strongly influences monitoring and assessment strategies. Automatic analyzers need to be used if compliance against a short-term guideline is to be determined; a variety of active samplers are suitable for comparison with daily or annual guidelines. Passive samplers may be used to provide data for comparison with the long-term annual guideline.

Passive samplers

There are currently no national or international standards governing the application of SO₂ diffusion tubes to ambient air monitoring, nor for their laboratory preparation and analysis. Protocols for sample preparation and analysis by spectrophotometry and ion exchange chromatography have, however, been published in scientific literature (Bennett et al. 1992; Downing et al. 1994; Hargreaves and Atkins 1988).

A variety of passive sampling techniques are available (UNEP/WHO 1994b). The most widely used include:

- The triethanolamine (TEA)/glycol/spectrophotometry method (Hangartner et al. 1989).
- The potassium hydroxide (KOH)/glycerol/spectrophotometry method (Hargreaves and Atkins 1988).
- The sodium carbonate (Na₂CO₃)/glycerine/ion-exchange chromatography method (Ferm 1991).

Hybridization of these techniques is widespread. In the UK, for instance, KOH or NaOH is used as absorbent, but with the tube membrane proposed by Ferm (1991) and using ion-exchange chromatography as the analysis method. In practice, the ion-exchange chromatographic technique has been informally accepted as the standard method for SO₂ diffusion tube analysis. The typical sensitivity of this hybrid technique is $\pm 8.5 \mu\text{g}/\text{m}^3$: some under-reading against automatic analysers has been observed (about 30%), although agreement with active samplers is better (Downing et al. 1994).

Active samplers

The equipment required for sampling gaseous sulphur compounds in ambient air is described in full in International Standard ISO 4219 (ISO 1979). This standard gives details of the equipment necessary to sample gaseous pollutants by absorption in a liquid bubbler. The standard also includes guidance for siting and installation of the apparatus. The principle of active-sampling methodologies is to draw ambient air through a collecting medium (typically a liquid bubbler), for a specified time, typically 24 hours. The volume of air is metered. The collecting medium is subsequently analysed and the concentration of pollutant in the sampled air determined. This proven method is well established, and

has been used in many monitoring networks worldwide for a number of years. In consequence, there is a long history of active sampler SO₂ measurements available for trend assessment.

There are several methods of SO₂ monitoring based on this principle, which can be carried out using the apparatus specified in ISO 4219. They differ with respect to the solutions used in the bubblers for SO₂ absorption and the method of analysis. The four most widely used methods are described below.

Acidimetric (total acidity) method. This method, given in ISO 4220 (ISO 1983), is used to determine a gaseous acid air pollution index. Although this method measures total acidity, and is not specific for SO₂, it is adequate for general use. The simplicity of the method, and the fact that the reagents are relatively safe, makes it a popular choice for routine monitoring (AEA 1997). An accuracy of $\pm 10\%$ has been estimated for SO₂ measurements using the total acidity method, taking account of all contributory factors. A precision of $\pm 4 \mu\text{g}/\text{m}^3$ is achievable for this widely-used method (AEA 1997).

Ion-exchange chromatography. A variation on the above technique. The exposed peroxide solutions are analysed for sulphate ions by means of ion-exchange chromatography, rather than titration. This has the advantage of being sulphate-specific, but requires the use of an expensive ion-exchange chromatograph.

Tetrachloromercurate (TCM) method. This is also known as the Pararosaniline method ISO 6767 (ISO 1990). This is the reference method specified in the EC Directive on SO₂ and suspended particulate matter (EC 1980). However, the reagents used are very toxic, and for this reason the method is not widely used.

Thorin method. This method is given in ISO 4221 (ISO 1980). The reagents used include perchloric acid, barium perchlorate, dioxane and thorin. These are hazardous and must be handled and disposed of with care. Accordingly, this method is not commonly used world-wide.

Automatic analysers

The measurement of SO₂ in ambient air using automatic analysers is covered by ISO/DIS 10498 (ISO/DIS 1999). Well-established automatic monitoring techniques are available. The most widely used method for automatic SO₂ measurement is ultraviolet fluorescence (UVF). SO₂ molecules in the sample airstream are excited to higher, unstable energy states by UV radiation at 212 nm. These energy states decay, causing an emission of secondary fluorescent radiation with an intensity proportional to the concentration of SO₂ in the sample.

The accuracy of data from automatic SO₂ analysers depends on a range of factors encompassing the entire measurement chain. These include accuracy of calibration standards, analyser stability and sample losses in the measurement system. An accuracy of $\pm 10\%$ has been estimated for SO₂ measurements in UK national automatic networks, taking account of all contributory factors. The precision of SO₂ measurements, determined from long-term variations in baseline response of in-service analysers, is estimated to be $\pm 3 \mu\text{g}/\text{m}^3$ (AEA 1996).

Remote sensors

Remote optical sensor systems, such as the Differential Optical Absorption System (DOAS), use a long-path spectroscopic technique to make real-time measurements of the pollutant concentration by integrating readings along a path between a light source and a detector. Long-path monitoring systems can be used to measure SO₂, but the methodology is less well established than that for automatic point monitors. The accuracy and precision of the data from these instruments are, therefore, much more difficult to determine. The method does not conform to ISO 7996 (ISO 1985b). Particularly careful

attention needs to be paid to instrument calibration and quality assurance to obtain meaningful data from remote sensing instruments.

Nitrogen dioxide

Automatic analysers must be used for the direct determination of compliance against the hourly guideline, although much useful information can be inferred using passive samplers (see section 4.5). Either technique is applicable for comparing ambient levels against the annual guideline.

Passive samplers

Monitoring ambient NO₂ concentrations using passive diffusion tube samplers is now well established. This method provides an integrated, average concentration for the pollutant over the exposure period (typically 2-4 weeks) and is particularly well suited to baseline and screening studies for assessing the spatial distribution of NO₂ concentrations in an urban environment. The most widely used techniques are variants on the Palmes-type sampler, originally developed for the assessment of occupational exposure. This uses a tube sampler, employing TEA as absorbent. Sample analysis, after thermal desorption, is by spectrophotometry or ion-exchange chromatography (Palmes et al. 1976). Very large scale mapping surveys are possible using diffusion tubes, but careful attention both to the harmonization of analytical procedures and to the outputs from different analytical laboratories is essential for the success of large-scale passive sampler surveys.

Although extensively used throughout the UK and Europe there are, at present, no national or international standards governing the application of diffusion tubes for ambient air quality monitoring, nor for the laboratory preparation and analysis of diffusion tubes. Protocols for sampler preparation and analysis by spectrophotometry have, however, been published in the scientific literature (Palmes et al. 1976; Atkins et al. 1986); these have been informally accepted as standard procedures for NO₂ diffusion tube preparation and analysis.

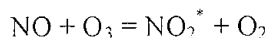
Recent comparisons of NO₂ diffusion tube measurements with co-located chemiluminescent NO_x analysers show good agreement (Smith et al. 1997; Gerboles and Amantini 1993). Over the range of concentrations generally encountered in urban areas (20-80 µg/m³), it was found that on average NO₂ diffusion tubes, exposed for one month, tended to overestimate ambient NO₂ by approximately 10% compared with a chemiluminescent NO_x analyser. Precision estimates of the diffusion tube technique have been quoted as 5-8% in similar studies.

Active samplers

A variety of active sampler technologies are available (UNEP/WHO 1994b). The best known of these is the Griess-Saltzman method, covered by ISO 6768 (ISO 1985a). Although this method is sensitive and requires a relatively simple, inexpensive sampling apparatus, there are a number of disadvantages. It is a relatively skilled and labour-intensive technique, uses corrosive chemicals and is not readily applicable to sampling periods longer than 1-2 hours. There also remain doubts about calibration methods, collection efficiency and possible side-reactions. In consequence, this method cannot be recommended for general baseline monitoring applications.

Automatic analysers

The reference method for automatic measurement of nitrogen oxide concentrations, as defined for compliance with EC Directive 85/203/EEC (EC 1985), is the automatic chemiluminescence method described in ISO standard 7996 (ISO 1985b). This method is widely used world wide. The method is based on the chemiluminescence energy emitted when NO in the sample airstream reacts with O₃ in an evacuated chamber to form an excited energy state of NO₂. The chemiluminescent reaction is:



Emitted light from the excited NO₂^{*} is converted to an output voltage by a photomultiplier tube and amplifier.

Automatic NO₂ analysers based on liquid-phase chemiluminescence, produced by reacting NO₂ with a chemical solution, are also available. These highly sensitive but relatively fragile instruments are mostly employed for research applications and are not generally regarded as being suitable for routine baseline monitoring purposes.

The accuracy of data from automatic NO₂ analysers depends on a range of factors encompassing the entire measurement chain. These include the accuracy of calibration standards, analyser stability and sample losses in the measurement system. Final accuracy can therefore vary from network to network. An accuracy of ± 8% has been estimated for NO₂ measurements in well-run automatic networks, taking account of all contributory factors (AEA 1996). The precision of NO₂ measurements is estimated to be ±6.5 µg/m³, determined from long-term variations in the baseline responses of in-service analysers.

Remote sensors

Long-path monitoring systems are available for the measurement of NO₂, but the methodology is less well established than that for automatic point monitors. The accuracy and precision of the data from these instruments are, therefore, much more difficult to determine. The method does not conform to ISO 7996 (ISO 1995b) and, as noted previously, careful attention needs to be given to instrument calibration and quality assurance to obtain meaningful data.

Carbon monoxide

CO in urban areas results almost entirely (typically ~90%) from road traffic emissions. Since CO is a primary pollutant, its ambient concentrations closely follow emissions. In urban areas, concentrations are therefore highest at the kerbside and decrease rapidly with increasing distance from the road. Mostly automatic analysers are being used for the direct assessment of ambient levels against guidelines.

Passive samplers

A passive sampler has been developed for CO, utilizing a zeolite absorber and a narrow filamental diffusion passage to optimize uptake, and involving GC/FID analysis after thermal desorption (Lee et al. 1992). This technique may be useful for screening, mapping and 'hot-spot' identification. Its use does not, however, appear to be widespread at the present time.

Active samplers

Grab samples may be collected for subsequent laboratory analysis. However, this technique is not known to be widely used.

Automatic analysers

The measurement of CO in ambient air is covered by international standards ISO/FDIS 4224 (ISO/FDIS 1999a) and ISO 8186. (ISO 1989)

Baseline ambient CO monitoring is normally carried out using IR analysers. A number of electrochemical CO analysers are available, but these are generally of low sensitivity and not suitable for routine ambient monitoring. However, they may have application in areas of high concentrations. A version of this sensor is incorporated in a commercially available roadside pollution monitoring system.

CO analysis is based on the absorption of IR radiation at wavelengths of 4.5-4.9 micrometres. Since other gases and particles can also absorb IR, the analyser must distinguish between absorption by CO and absorption by interferences. In the most common analyser type, this is done using a gas filter correlation wheel containing a cell of pure nitrogen and a cell of nitrogen plus CO. The cell containing CO removes the CO-sensitive wavelengths before the IR signal enters the absorption chamber, whilst all wavelengths are transmitted by the other cell. The difference in the intensity of the two absorption signals, divided by the intensity of the IR source, provides a measure of the ambient CO concentration.

The accuracy of data from automatic CO analysers depends on a range of factors encompassing the entire measurement chain. These include accuracy of calibration standards, analyser stability and sample losses in the measurement system. An accuracy of $\pm 8\%$ and a precision of $\pm 0.5 \text{ mg/m}^3$ may be achieved using this technique in well-managed and quality-assured programmes.

Ozone

O₃ is not emitted directly from man-made sources in any significant quantities, but is formed in the atmosphere by sunlight-driven chemical reactions involving NO_x and VOC (see Section 2.1.2). These reactions are not immediate, but may take from hours to days to complete. O₃ is chemically scavenged by primary NO_x emissions from traffic, and is also removed from the atmosphere by deposition to the ground.

Both spatial and temporal distributions of O₃ differ markedly from those of other pollutants. In particular, significant impacts may occur in areas up to hundreds of kilometres downwind of the original precursor emissions, as a result of long-range as a result of long-range transport. Ambient concentrations and population exposure may often be maximized in suburban and rural areas. This has important implications for monitoring system design.

Passive samplers

A variety of techniques are available (UNEP/WHO 1994b). These include:

- 1,2-di-(4-pyridyl) ethylene absorbent- spectrophotometry (Monn and Hangartner 1990).
- KI -spectrophotometry (Grosjean and Hisham 1992).
- NaNO₂/Na₂CO₃/glycerine -ion chromatography (Koutrakis et al. 1990).
- Indigo carmine-reflectance (Alexander et al. 1991).

These methods are not as widely used or validated as corresponding samplers for NO₂ and no clear consensus as to a standard technique has yet emerged.

Active samplers

The most widely used active sampler technique was the Neutral Buffered Potassium Iodide (NKBI) method. Although relatively simple and inexpensive, there are practical problems with deterioration of

the iodine complex and interference (most notably from NO₂ and SO₂). These issues have reduced its use to the extent that the technique may now be regarded as obsolete.

Automatic analysers

ISO 10313 (ISO 1993a) is not of real relevance, as the chemiluminescence detection technique it describes is no longer widely used. The most commonly used technology is now that of UV absorption; this is specified as the reference method for the purposes of EC Directive 92/72/EEC (EC 1992). An ISO standard is being developed for the UV method.

UV absorption is a robust, well-developed technique. Ambient O₃ concentrations are calculated from the absorption of UV light at 254 nm wavelength. The sample passes through a detection cell of known length (l). An O₃-removing scrubber is used to provide a zero reference light intensity, I₀. The analyser alternately measures the absorption of air in the cell with no O₃ present and the absorption in the experimental sample cell, I_s. The ambient O₃ concentration, c, may be simply calculated using the Beer-Lambert equation:

$$I_s = I_0 e^{-alc}$$

where a is the relevant absorption coefficient at 254 nm.

Given appropriate attention to system design, calibration and equipment support a typical measurement accuracy of ±11% and a precision of ±4 µg/m³ should be readily achievable in well-run automatic networks.

Remote sensors

Open-path optical remote sensing techniques such as DOAS are available for O₃, although the associated practical issues noted in previous sections are applicable.

Suspended particulate matter

SPM is a generic term embracing all airborne particulate matter. This therefore encompasses a wide range of size fractions, morphologies and chemical compositions, as discussed in Chapter 2. Although coarse particle size ranges may cause significant local nuisance or soiling, it is the finer fractions, such as PM_{2.5}, that are capable of deep lung/airway penetration. Concern about the potential health impacts of fine particulate matter has increased rapidly over recent years.

SPM monitoring is fundamentally different from the measurement of gaseous pollutants, and the methods are generally less precise. A wide variety of different sampling and detection methodologies is available, including the Tapered Element Oscillating Microbalance (TEOM), β-ray analysis, gravimetric sampling (low or high-volume) and a number of indirect optical, particle counting and light-scattering methods. The sampling system strongly affects the measurement process and appropriate aerodynamically designed inlets are essential for proper sample-fractionated determinations (UNEP/WHO 1994c).

Active samplers

Gravimetric samplers collect particulate matter onto a filter using high-volume (about 100 m³/hour) or low-volume (about 1 m³/hour) pumped sample flows. The weight of particulate matter deposited on the filter is used to calculate a 24-hour average mass concentration. No ISO or CEN standards have yet been promulgated for ambient measurement of PM₁₀ particulate matter using gravimetric samplers, although these are under development at the present time. An ISO standard for evaluating PM₁₀ inlet heads is, however, available (EN 1999). A United States Environmental Protection Agency procedure for PM₁₀

using the high-volume sampler is given in Federal Register 40 CFR Part 50 (CFR 1993). However, compliance with this procedure does not ensure consistency with the anticipated CEN standards.

The various SPM monitoring techniques may not necessarily produce comparable measurements. Different sampling systems, operating temperature, filter media and filter history may also potentially affect measurement equivalence. The accuracy and precision of any measured mass concentration is, therefore, liable to a wide margin of error. A target accuracy of $<10 \mu\text{g}/\text{m}^3$ and a precision of $<5 \mu\text{g}/\text{m}^3$ (for daily average concentrations $<100 \mu\text{g}/\text{m}^3$) are given for PM_{10} measurements by EN 12341 (EN 1999).

Medium- or low-volume gravimetric samplers are more portable and less noisy than high-volume samplers, making them more suitable for use in urban areas. However, the mass of particles collected is far less than with high-volume samplers, giving a greater potential for errors due to filter weighing. According to a recent large-scale instrument comparison, a number of commercially available high- and medium-volume samplers are equivalent to a reference Wide Ranging Aerosol Collector (WRAC) (EN 1999).

Correct filter handling, documentation and analysis is fundamental for obtaining valid data. The filters must be conditioned in a temperature- and humidity-controlled environment, typically 20°C and 50% relative humidity, for at least 24 hours before and after exposure. The filters must be accurately weighed using a suitable balance, that has been calibrated using an accredited method.

Automatic analysers

Instruments are commercially available using the following techniques:

- Tapered Element Oscillating Microbalance (TEOM).
- Beta-ray absorption analysers (ISO/FDIS 1999b).
- Light scattering systems.

Of the automatic instrument types available, the TEOM and β -ray systems have been operated widely for many years and are well tested in the field. The light scattering type of instrument has been developed more recently, and is therefore less well proven in service. Operating experience and co-located measurement campaigns indicate that measurements from the different instruments are not always equivalent or comparable.

For traceable and robust measurements, samplers must be fitted with a tested PM_{10} inlet head and an accurate flow control system. The PM_{10} sampling inlet should be tested to ISO Standard 7708 (ISO 1995) to ensure accurate size fractionation at the point of sampling. A target accuracy figure of $<10 \mu\text{g}/\text{m}^3$ and precision of $<5 \mu\text{g}/\text{m}^3$ (for daily average concentrations $<100 \mu\text{g}/\text{m}^3$) are given in EN 12341 (EN 1999). Tests on in-service TEOM analysers deployed in UK networks demonstrate these figures to be realistic and achievable.

Lead

The main sources of lead in air are the combustion of petrol containing lead-based additives and industrial emissions.

Active samplers

These are based on pumped sampling of large quantities of ambient air, capturing fine ambient particulate matter on a filter for subsequent analysis. Analysis of filters for lead is covered by ISO 9855 (E), which specifies atomic absorption spectroscopy as the standard analytical method (ISO 1993b). There is no

standard sampling method, although the EC Directive does specify some relevant sampling and filter criteria (EC 1982).

A variety of sampling methods are used, including high-, medium-, and low-volume samplers. There is no standard or reference sampling method. The UK method is broadly typical: this utilises an "M Type" sampler designed specifically for this purpose. Its flow rate is controlled to 5.4-7.1 m³/day, and Millipore Aerosol Field Monitor filters are exposed and changed weekly.

Passive sampling methods are not applicable.

6. Air Quality Management

Introduction

Basic principles guide international and national policies for the management of all forms of air pollution. An important global initiative occurred in 1983 when the UN General Assembly established the World Commission on Environment and Development, headed by Gro Harlem Brundtland. The report produced by the Commission, *Our Common Future*, was presented to the UN General Assembly in 1987 and endorsed by it. It has been influential in bringing environmental issues into the global arena, and in expressing some concepts that have been influential in air quality management (WCEDC 1987).

The Brundtland Commission suggested that sustainable development would be required to meet the legitimate aspirations of the world population without destroying the environment. It defined **sustainable development** as: "development that meets the needs of the present without compromising the ability of future generations to meet their own needs." This concept has been embraced as an apparent means of integrating environmental policy and economic development.

Following the Brundtland Commission, the UN Conference on the Environment and Development was held in Rio, in 1992 (UNCED 1992). The aim was to ensure that practical foundations for sustainable development were put in place. The Agenda 21 document and the Rio declaration were the most obvious results of this conference. Agenda 21 is a document covering sustainable development, which is not binding on countries. However, national implementation is reviewed by the Sustainable Development Commission and the UN General Assembly. Agenda 21 supports a number of environmental management principles on which some government policies are based, including air quality management. These include:

precautionary principle - where it is clear that a proposal will damage the environment, action should be taken to protect the environment without awaiting scientific proof of damage.

polluter pays - the full costs associated with pollution (including monitoring, management, clean-up and supervision) should be met by the organization responsible for the source of the pollution.

In addition, many countries have adopted the principle of **pollution prevention**, which aims to reduce pollution at sources.

The responsibility of national governments for international reporting on the environment of their country has enabled greater exchange of air quality information around the world.

Strategy for air quality management

The goal of air quality management is to maintain a quality of air that protects human health and welfare. This goal recognizes that air quality must be maintained at levels that protect human health, but must also provide protection of animals, plants (crops, forests and natural vegetation), ecosystems, materials and aesthetics, such as natural levels of visibility (Murray 1997). And to achieve this air quality goal, it is necessary to develop policies and strategies.

Government policy is the foundation for air quality management. Without a suitable policy framework and adequate legislation it is difficult to maintain an active or successful air quality management programme. A policy framework refers to policies in several areas, including transport, energy, planning, development and the environment. Air quality objectives are more readily achieved if these interconnected government policies are compatible, and if mechanisms exist for co-ordinating responses

to issues which cross different areas of government policy. Measures that have been adopted in many developed countries for integrating air quality policy with health, energy, transport and other areas are summarized in a report of the United Nations Economic Commission for Europe (UNECE 1995; UNECE 1999).

This following section (6.1) will discuss management of ambient air, and section 6.2 the management of indoor air.

6.1 Strategies for ambient air quality management

This section reviews the development of an air quality strategy, including some basic principles of ambient air quality management, ambient air quality standards, source emission inventories, emissions control for point, mobile and area sources, management of “non-classic” pollutants, communication and international air quality management.

Ambient air quality management has a long history. Complaints of air pollution led to studies of air pollutants and their effects. However, a substantial excess mortality rate during the economic expansion after the Second World War resulted in the initiation of pollution control. High air pollution levels in cities in the US and Europe resulted in excess deaths, including more than 4000 excess deaths in London from a stagnant atmosphere of fog, smoke and SO₂ during five days in December 1952 (Brimblecombe 1987). As a consequence of this disaster, there was increased public pressure for better air quality in cities in developed countries around the world. With the availability of relatively cheap and clean fuels, and in an environment of strong economic growth and increasing incomes, governments in developed countries slowly introduced measures to improve air quality in cities. Particular emphasis in the early stages was on reducing particle and SO₂ concentrations in cities.

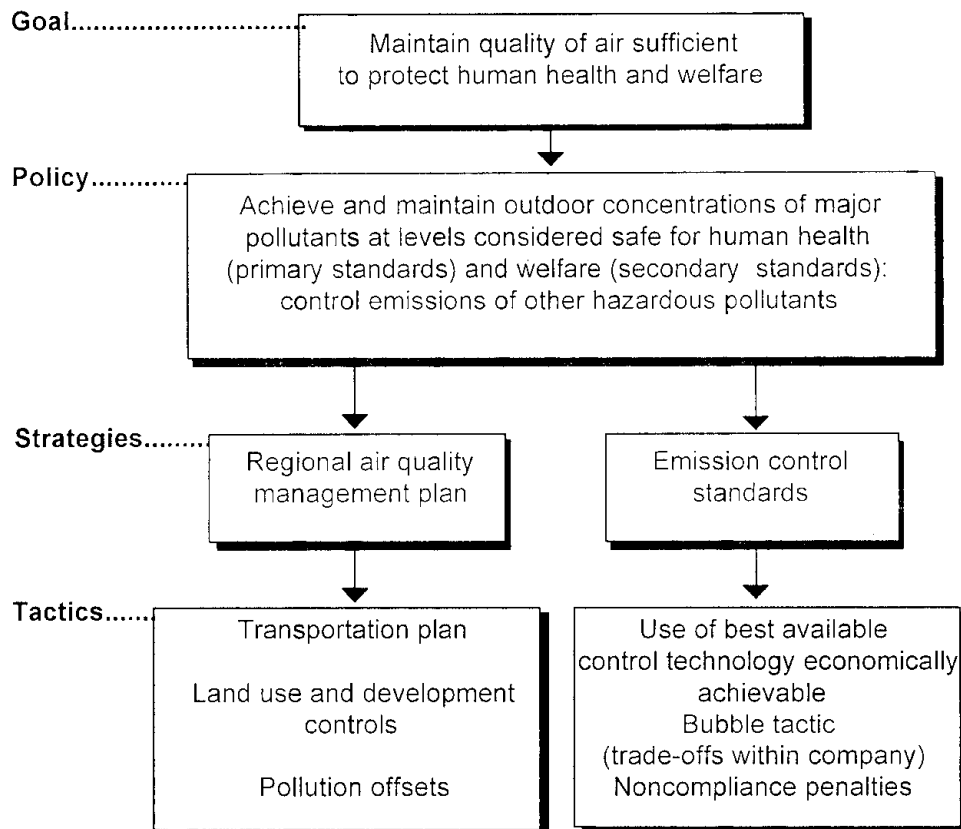
In the last two or three decades, air quality management in the cities of developed countries has broadened in scope. However, the emphasis and success of management activities has been varied. Although considerable progress to improve air quality has been achieved in some large cities of developing countries, many large cities face very significant challenges to implementing effective action. Also, it is now recognized that urban air pollution can travel long distances, affecting areas outside the local and national boundaries in which the polluting event occurs. Polluted air crosses regional and national boundaries, affecting health and environments in rural areas and in other countries.

In response, more effective international action has been implemented. International guidelines on ambient air quality have been produced by organisations such as WHO (WHO 1987), and international policies are being co-ordinated under conventions such as the Convention on Long-Range Transboundary Air Pollution (UNECE 1995; UNECE 1999).

6.1.1 Stages in the development of ambient air quality management

A legal framework is needed to provide a context for ambient air quality management. While there are many possible models, one example is illustrated by Figure 6.1.

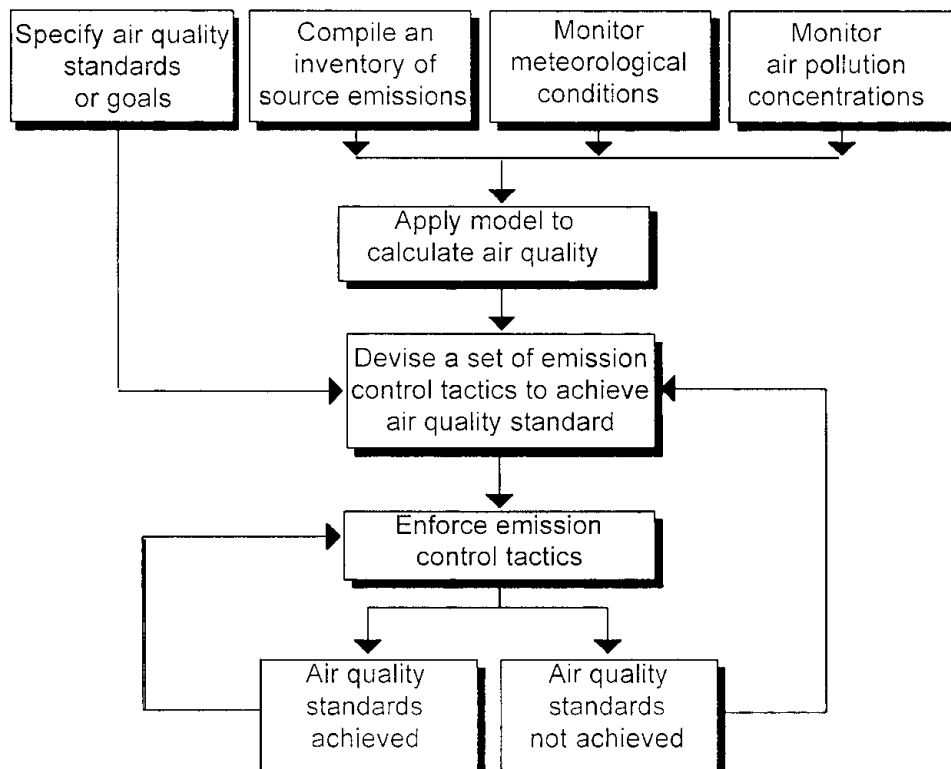
Figure 6.1. The Structure of the U.S. ambient air quality legislation as established by the Clean Air Act 1970, and amendments (after Westman 1985).



When goals and policies have been developed, the next stage is the development of a strategy or plan. Figure 6.2 summarizes the stages involved in the development of an air quality management strategy and can start with the development of ambient air quality standards or guidelines. It may also involve the development of an emissions inventory. The monitoring of both meteorological conditions and air pollutant concentrations would also normally occur, as these data are required by models used to estimate air quality, and to validate the model output. Air quality standards and model outputs or measurements may be considered in devising emission control tactics aimed at achieving the air quality standards. The tactics need to be enforced, and if the standards are achieved, they need continued enforcement. If the standards are not achieved after a reasonable period of time, the emission control tactics may need to be revised.

National air quality standards are usually based on a consideration of international guidelines, such as the WHO *Guidelines for Air Quality*, as well as national criteria documents that consider dose-response relations for the effects of each pollutant on human health, livestock, wildlife, crops, forests, natural ecosystems, materials, aesthetics etc. In some cases, studies of combinations of pollutants may be required. National standards take into account the technical, social, economic and political factors within the nation. National approaches to the establishment of air quality standards in some developed countries have been summarized by the Economic Commission for Europe (UNECE 1995; UNECE 1999).

Figure 6.2. Stages involved in the development of an air quality management strategy (Elsom 1992).



In some cases, monitoring may show that ambient air pollutant concentrations are considerably higher than some options for standards. An issue for those developing standards is whether national standards should reflect the need to protect human health and the environment, when this objective is unlikely to be achieved in the short- to medium-term with the available resources. In some countries, the standards are set at realistically attainable levels, given the prevailing national technical, social, economic and political conditions, even though they may not be fully consistent with the levels needed to fully protect human health and the environment. Over time, air quality standards may also change, after review, as conditions within a nation change, and as the scientific relationship between air quality, the health of the population and the quality of the environment becomes better understood.

As discussed in Chapter 3, there are considerable differences between the “classic” air pollutants such as SO₂, particles, NO₂, CO, O₃, and the “non-classic” air pollutants (Table 6.1). Different approaches may be needed to develop standards for the two types of air pollutants. Air quality monitoring (Chapter 5) is used to assess whether air quality at particular locations is in compliance with the standards selected.

Table 6.1. A comparison of the “classic” and “non-classic” air pollutants

“CLASSIC” POLLUTANTS	“NON-CLASSIC” POLLUTANTS
Few	Numerous
Not bioaccumulated (except Pb)	Some bioaccumulate
Lung is primary target (except CO and Pb)	There may be many target organs
Human health effects are generally well known (except NOx)	Human dose-response data rarely available
Effects occur from minutes (acute) to years later (chronic)	Effects occur from minutes (acute) to years later (chronic)

6.1.2 Source emission inventories

A crucial component of an air quality management plan is a reasonable quantitative knowledge of the sources of the various emissions (Figure 6.2). An emissions inventory is essential. In some cases, emissions are described in source groups. These may be:

- Point sources such as major industrial sites.
- Mobile sources such as motor vehicles.
- Area sources such as domestic emissions and emissions from light industry and commercial areas.
- Biogenic or natural sources.

For some components of an emissions inventory accurate data may be available. For example, accurate emissions data may be available for some industrial sites from measurements of stack emissions. In other cases, emissions can be calculated from estimates of process inputs. For example, the emissions of SO₂ from coal-fired electricity generation plants can often be calculated with reasonable accuracy from the knowledge of the throughput and sulphur content of the fuels and other information.

While estimates of emissions are needed to develop emission inventories, measurements to confirm the veracity of the estimates are highly desirable. Surveys may be used for point sources such as large industrial facilities to provide data on their emissions. However, reporting by companies is not always complete, particularly for fugitive emissions (such as leaks of volatile substances, equipment leaks and loss of fine particles from stockpiles), and for combustion products such as PAH for which sufficient data may not be available.

When source data are missing, it is common to use general emission factors for both point and diffuse sources. Emissions from diffuse sources include emissions from motor vehicles and off-road mobile sources, and area sources such as light industry, domestic and wood burning, as well as biogenic emissions from natural sources such as vegetation. Emission factors for diffuse sources are usually calculated using data specific for each source type. For example motor vehicle emissions may be estimated by calculations involving the distance traveled by vehicles, the number of vehicles, temperature, fuel consumption and the composition and properties of the fuels used. General emission factors for various industrial processes are available from published sources (such as EEA (undated); USEPA 1985; USEPA 1987; USEPA 1995 and more recent supplements and updates). However, these emission factors need to be used with care, as adjustments in emission factors may be needed to take into account differences in operating conditions, fuels and feed materials.

It should be noted that emissions inventories must also manage those pollutants, which form in the air from reactions among other pollutants. O₃ and some other components of the photochemical smog

complex are not directly emitted into the atmosphere, but form from reactions among NO_x and reactive organic compounds. The control of photochemical smog requires, among other things, an understanding of the sources and emissions of NO_x and reactive organic compounds.

In some developing countries, reliable statistical information for producing accurate emissions estimates is lacking. However, where action is needed to improve air quality, the absence of this information should not prevent the development of preliminary emissions estimates. Basic information about the population, transportation, industry, fuels and other information can be used to calculate preliminary emissions estimates (Kato and Akimoto 1992), which can then be used to develop and implement air quality management plans. The preliminary emissions estimates can be revised as more accurate information becomes available. Sources of information on how to prepare rapid emissions inventories include WHO 1993a; WHO 1993b; WHO 1995h; WHO 1997b.

6.1.3 Meteorology and mathematical models

A knowledge of meteorological conditions in an area is useful when applying mathematical models to calculate air quality. As indicated in Chapter 4, modelling is a powerful tool for the interpolation, prediction and optimization of control strategies. Models allow the consequences of various options for improving air quality to be compared. However, models need to be validated by monitoring data. Their accuracy depends on many factors, including the accuracy of the source emissions data, the quality of knowledge of meteorological conditions in the area, and the assumptions about physical and chemical processes in the atmosphere involving the transport and transformation of pollutants.

6.1.4 Emissions control approaches

Command and control

Laws and regulations are at the heart of air quality management strategies. The traditional approach for developing and implementing air quality management strategies has been the "command and control" approach. This approach has several major features centred around the regulation of emissions. The command and control approach usually involves the development and regulation in law of emissions standards, the licensing of emissions sources, the monitoring and reporting of emissions, and penalties for exceeding license conditions. Under this system, the techniques to be used in areas such as pollution control are prescribed by government, and compliance with conditions is checked by government inspectors. Licences are issued, standards are set, compliance with standards are checked, non-compliance cases commonly go to court, mitigating circumstances are considered by the court, and penalties are imposed. New developments or major changes to sources are usually subject to environmental impact assessment, and new sources may be subject to tighter performance standards than existing operations.

The "command and control" approach is the most widely used technique around the world as it has many strengths. This system has some public confidence, and provides a degree of certainty to industry and the public. However, it is also time consuming, expensive and legalistic. As the penalties imposed by the courts may be light, the outcomes may be unsatisfactory for all involved. The command and control approach is also rigid, with the potential for arbitrary decisions and a focus on end-of-pipe solutions, instead of more comprehensive pollution prevention approaches. While it may establish a minimum condition, it provides no incentive to minimize emissions. It usually ignores equity, often requiring highly expensive best-available technology for new sources, while existing sources with a lower level of technology and performance continue to pollute. However, in some situations the command and control approach has worked extremely well, and many countries have reduced emissions of SO₂, coarse particles and reduced or eliminated lead emissions from petrol.

In many countries the reform of regulations in the last 10-15 years has reduced dependence on the traditional command and control approach. In recent years, the trend in most developed countries has been towards increased use of other forms of regulatory control. One such approach is self-regulation (Table 6.2). It is argued that some industry groups, for example the chemical industry or the petroleum industry, are familiar with current best practice within their own industry, and can set codes of practice, industry standards and targets. Individual companies conduct self-monitoring of compliance and are subject to audit. However, self-regulation measures can provide less certainty to industry and may inspire less public confidence than regulatory control by government.

Table 6.2. Types of environmental regulation (after Bradfield et al. 1996)

Type	Description	Example
Command and control	Issue of licences, setting of standards, checking for compliance with standards, sanctions for non-compliance	Air pollution control Government audits Emission standards
Economic instruments	Use of pricing, subsidies, taxes, and charges to alter production and consumption patterns of organisations and the public	Load-based emission charges Tradeable emission permits Differential taxes True cost pricing of resources
Co-regulation	Formulation and adoption of rules, regulations and guidelines in consultation with stakeholders, negotiated within prescribed boundaries	National registers of pollution emission inventories
Self-regulation	Self-imposition of regulations and guidelines and environmental audits by industry groups. Voluntary adoption of environmental management measures.	Voluntary codes of practice Self-audit Emission reduction targets Environmental management systems

Economic instruments

Another approach adopted in many countries involves the use of economic instruments (UNECE 1995; UNECE 1999). This approach decreases the operating costs for pollution prevention. Examples include load-based emission charges, which increase operating costs for industry if pollution discharge increases; higher tax charges for leaded petrol compared with unleaded petrol; product charges and environmental taxes on fertilisers, batteries, pesticides, etc.; reducing subsidies for energy use; and subsidising zero emissions products. Pricing policies are a powerful economic instrument for air quality improvements. It has been estimated that direct energy subsidies in developing countries total nearly US\$230 billion each year (El-Ashry 1993). Reducing subsidies for energy use encourages energy conservation, reduces emissions from power stations, and frees investment to be used for other purposes, such as less polluting technologies (Hall 1995).

Another market-oriented approach is a system of tradeable emission permits. In this system, the regulating authority quantifies the total mass of emissions permitted in an area and issues an equivalent number of tradeable emissions entitlements. These tradeable permits can be freely bought and sold. They have the potential to achieve government policy objectives at the lowest cost to industry, and in some

cases to government. A comparison of command-and-control and market-based incentives in Santiago, Chile, found that flexible market-based incentives enabled substantially higher reductions in emissions to be achieved for the same expenditure (O'Ryan 1996).

An Emissions Trading Policy has been adopted in the US, in particular in the 1990 revision of the US Clean Air Act, which enables some trading of emissions permits. The US has established a national cap on SO₂ emissions of 8.9 million tonnes per year, beginning in year 2000. Sources may not emit more SO₂ emissions than their marketable emission allowance. These emissions allowances can be purchased, sold or banked for later use. New or expanding sources must arrange to transfer allowances from existing sources, using pollution control or closure of existing sources to provide the required emissions allowances. Existing industries can reduce or cease emissions from one source within the organization to enable expansion of emissions elsewhere. It is considered that this system provides maximum flexibility to industry to pursue the lowest-cost options, while meeting government policy objectives (Portney 1990).

Systems have been proposed which replace the requirement that every new model of vehicle produced meets a uniform emissions standard. It has been proposed that as the costs of achieving various levels of emission control vary among vehicle types, manufacturers should be required to achieve a weighted emissions level over their fleet (Kling 1994). It was argued that manufacturers who better the standard should be permitted to sell their emissions reduction credits to manufacturers unable to meet the standard. Some limited application of an incentive-based system has been incorporated into the Low Emission Vehicle Program adopted in California.

Emissions trading may be considered to be a government regulated, but private market in tradeable emission permits. While sufficiently developed markets may be a pre-requisite for an emissions trading system in developing countries, some principles of emissions trading may be applied without well-developed markets (Smith 1993).

Co-regulation

As part of the process of regulatory reform, companies and their industry organisations have been included in discussions of options for regulation reform, and in the review of these options. This proactive approach by industry organisations has led to a degree of co-regulation in some areas. It has resulted in the adoption of regulations and guidelines considered to be practical and realistic by those affected, and have simplified and reduced the costs of compliance for national governments. The process has resulted in the voluntary adoption of environmental management measures in a collaborative manner.

Corporate environmental management is a combination of public policy and social responsiveness. In the public policy area, the enactment of legislation and regulations has enforced socially responsible behaviour. The role of government has increasingly been to provide guidelines to environmental managers in industry, so that corporate behaviour can be shaped to meet social expectations. The aim is that guidelines should prescribe industrial emissions outcomes, but not the means to achieve these outcomes, and to avoid being too prescriptive, as this can encourage a legalistic approach.

Self regulation

There is a growing worldwide adoption of environmental management systems. These include the British Standard 7750, the European Union Eco-Management and Audit Scheme, and the environmental management system of the International Organization for Standardization, the ISO 14000 series (ISO 1996a; ISO 1996b; Sheldon 1997). The adoption of environmental management systems has also influenced the process by which governments define industrial emissions outcomes, while not prescribing to industry how these outcomes should be achieved.

Governments are also using public education strategies to improve the actions of the public that can lead to air pollution. In many cities, area sources of air pollution and vehicle sources together comprise the largest component of emissions, and it is the actions of individuals that decide the scale of these emissions. While technical strategies have a major role, education and public information programmes can also contribute to reducing the magnitude of these sources.

Another recent approach to non-classic air pollutants involves risk assessment. In many cases there is no "safe" level for these air pollutants. They do not follow a threshold-type response, as health and ecological risk can increase with increasing exposure. Consequently, this approach requires an evaluation of health risks for the general or sensitive population, and establishes acceptable levels of health risk for these populations. Sources are required by regulation to implement techniques for reducing the levels of health risk to those prescribed.

Emissions control options can involve broad strategic approaches, such as land use, transportation, energy and industrial development planning. Unless air quality planning has a consistency with these other areas, substantial progress is difficult. Complex models have been developed to assess the interaction and consequences of changes in these areas for air quality. However, changes in land use, transportation, energy, and industrial development planning may take decades to substantially improve air quality, so more specific tactics to control emissions are needed. A decision support system for industrial air pollution control is available which aims to support policy makers and managers in analysing and formulating policy options and control measures (WHO 1995h).

6.1.5 Evaluation of control options

Unless legal constraints in a country prescribe a particular control option, the evaluation of control options must take into account technical, financial, social, health and environmental factors, as well as the speed with which they can be implemented and whether they are enforceable. Although considerable improvements in air quality have been achieved in some developed countries, the financial costs have been high, and the resource demands of some approaches make them unsuitable for poorer developing countries. Methodologies for evaluating air pollution control strategies have been developed for use in metropolitan areas, both in developed and developing countries, such as the methodology for evaluating options for improving air quality in Mexico City (Hardie et al. 1995).

Technical

There needs to be confidence that the selected options are technically practical within the resources of the region. It must be possible to bring a selected option into operation, and maintain the expected level of performance in the long term with the resources available. For some control options in certain regions, this may require regular staff training and other programmes.

Financial

The selected options must be financially viable in the long term. This may require comparative cost-benefit assessments of options. These assessments must include not only the capital costs of bringing an option into operation, but also the costs of maintaining the expected level of performance in the long term.

Social

The costs and benefits of each option should be assessed for social equity in its effects on people's lifestyles, community structures and cultural traditions. Considerations may include, disruption or

displacement of residents or land uses, impacts on community, culture, and recreation. Some impacts can be managed and resources substituted.

Health and environment

The costs and benefits of each option should be assessed for health and environmental factors. This may involve use of dose-response relations, or risk assessment techniques.

Effect-oriented and source-oriented principles

Some countries determine air pollution control requirements on the basis of an assessment of the effects of the pollutants on health and the environment (effect-oriented). Increased emissions may be permitted where the assessment suggests there will be no health or environmental impacts, or ambient air quality standards will not be exceeded. Action may be taken to reduce ambient concentrations where impacts or exceedances are shown to occur. Other countries base their air quality management policies on the requirement for best available technology, or best available techniques not entailing excessive cost (source-oriented). Most developed countries apply a combination of both source-oriented and effect-oriented principles (UNECE 1995; UNECE 1999).

6.1.6 Control of point sources

Siting and planning

The most powerful and cost-effective air quality management options occur during the planning stages of a new facility, whereas options involving changes in existing production processes or pollution control technology are more limited in scope. Planning options involve careful site selection, to maximize dispersion, and location of the proposed facility away from sensitive receptors, such as residential areas or areas of natural or commercial sensitivity.

Source emissions reduction

The most cost-effective approaches to controlling existing air pollution sources are those that entail source emissions reduction (Griffin 1994). There are four major approaches, each of which require an understanding of the processes and activities that give rise to the emissions. These source reduction approaches are: management and operational changes; process optimization; combustion modifications; and fuel modifications.

Each approach has a different level of effectiveness on the various air pollutants. For example, process optimization may considerably reduce emissions of volatile and hazardous compounds, but can have little effect on NO_x and SO₂ emissions. In contrast, fuel modifications can decrease NO_x and SO₂ emissions but they may have little effect on volatile and hazardous compounds.

Management and operational changes

Management audits of emissions, sources, and source strength, and subsequent changes in operation to reduce emissions, offer a cost-effective way of reducing emissions. It requires the implementation of good practices in housekeeping and maintenance, to ensure that systems are in place to check that equipment is maintained, and that staff are trained and properly supervised. It aims to minimize fugitive

emissions, and losses from stored liquids and solids, by changing the composition of materials used, provided this can reduce emissions while maintaining product quality.

Process optimization

This approach seeks to achieve emissions reductions by altering the production process without loss of product quality or production volume. It usually involves conducting a series of changes in which a factor involved in the manufacturing process is altered, such as temperature, ventilation or line speed.

Combustion modifications

Changes to the way in which combustion occurs can substantially reduce emissions. Increasing fuel flow in burners, by taking some burners out of service and increasing fuel flow to those remaining, can substantially reduce emissions of NO_x . Changes to the geometry of the combustion chamber can reduce emissions of NO_x without requiring changes to the boiler or fuel. Other techniques that can be applied to reduce nitrogen oxide emissions include tight control over the oxygen feed into a burner, lowering the flame temperature, staged combustion and reburning.

Fuel modifications

Another alternative for reducing emissions is to reduce the amount of fuel used or to change the type of fuel. The simplest approach is to change the fuel from a relatively dirty fuel, such as coal, to a cleaner fuel such as natural gas. This is usually a cheaper means of reducing emissions than scrubbing SO_2 from emissions. Blending of fuels is also used, such as the blending of low-sulphur coal with high-sulphur coal, and coal/oil blends to reduce emissions of SO_2 . Emissions from processes using coal as a fuel can also be reduced by coal washing, which reduces the proportion of contaminants in coal. In recent years there have been many moves to improve the use of waste flue gases for secondary process such as heating, drying or power. This can reduce the overall requirement for fuel, and consequently reduce emissions.

In Hong Kong a ban on high-sulphur fuel was the best option for reducing SO_2 emissions. The cost of compliance monitoring made the costs of flue gas desulphurization and market-based measures more expensive than a ban on high-sulphur fuels (Barron et al. 1995). Others also doubt the value of flue gas desulphurization and consider that converting to the use of low-polluting fuels and energy conservation are less costly options for Eastern Europe and developing countries (Pearce 1996).

Emissions control

Tall stacks have traditionally been used to reduce ground-level concentrations of air pollutants at minimum cost to the producer. Their effectiveness depends on height, the velocity and temperature of the stack gases, and atmospheric conditions such as windspeed and direction, atmospheric stability, local topography and air quality. Stacks of 200-400 metres in height are reasonably effective at reducing ground-level concentrations of air pollutants when they are suitably sited. However, tall stacks do not reduce emissions. They distribute them over a wide area. Where the magnitude of emissions within a region is substantial, or the receiving environment is sensitive, serious environmental effects such as acid deposition and forest decline can occur in remote locations (Wellburn 1988).

Before a system for collecting emissions can be planned, some information is needed to identify, quantify and characterize the chemical and physical properties of the emissions, both under average and extreme

conditions. This enables the optimum type and capacity of collection system to be designed. There are many forms of emissions control systems available. Factors involved in the selection of control equipment are discussed by Holmes et al. (1993) and Griffin (1994). Different approaches are usually used for gaseous and particle emissions. The techniques listed in Table 6.3 and 6.4 are not comprehensive and represent only some of the more commonly used methods.

Table 6.3. Techniques commonly used to control particle emissions

Particle collection system	Action
Cyclone collectors	The waste gas swirls in a vessel and particles are removed by inertial impaction on the walls of a cylindrical vessel.
Filters	The waste gas is forced through a fabric bag or filter beds on which particles are physically collected.
Electrostatic precipitation	A negative charge is imparted to particles in the waste gas, which are attracted to positively charged collection plates.
Wet scrubbers	Liquids are brought into contact with particles to form agglomerates, which are removed from the waste stream by impaction on plates or on the walls of vessels.

Table 6.4. Techniques commonly used to control gaseous emissions

Technique	Action
Combustion	Incineration is used to oxidize combustible air pollutants. It may involve open-ended combustion units such as flares, high-temperature thermal incineration involving specific retention times, and catalytic incineration.
Adsorption	Solid collecting media with large surface-to-volume ratios, such as activated charcoal, are used to remove contaminants from waste gas streams.
Absorption	This involves the use of liquids (commonly water with additives) to scrub contaminants from waste gas streams.
Condensation	Condensers operate by removing heat from the gas stream, enabling the condensation of volatile liquids.

While these control techniques can be very effective, some are expensive in capital and maintenance infrastructure, and may be beyond the resources of some developed and developing countries. However, not all approaches need be expensive. Source reduction techniques are often the most cost-effective and suitable measures for many developing countries. These include fuel modifications, such as the preparation and use of low-sulphur and low-ash fuels, combined with management and operational approaches to reducing emissions.

Another key factor in pollution control and prevention is the designation of responsibility for controlling point source emissions in each facility (Hashimoto 1989). It is a legal requirement in Japan for each factory to designate an individual to be responsible for pollution control. The action of courts in strictly applying concepts of negligence and joint liability has led to an increased focus on due diligence and the application of best practices for controlling emissions. The decisions concerning air quality necessarily take place within the context of each nation, and effective action requires political support assisted by public awareness and demand for change (Hashimoto 1989).

6.1.7 Control of mobile sources

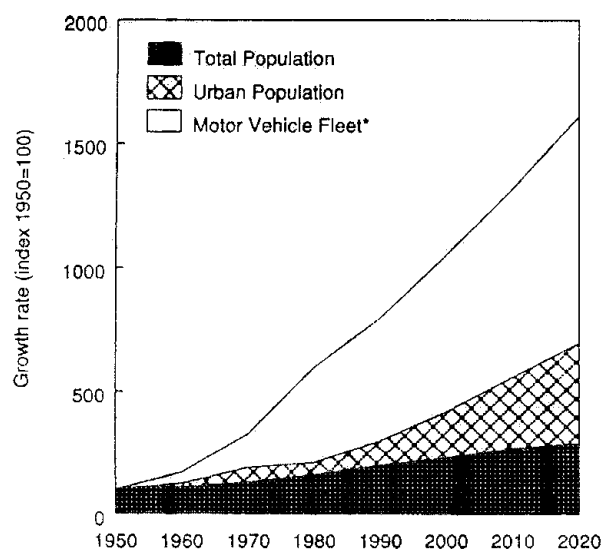
There is considerable variation in the pattern of vehicle emissions at different locations and in different regions of the world. However, considering anthropogenic emissions on a global basis, it has been estimated that motor vehicles can account for about 25-30% of emissions of NO_x , 50% of HC, 60% of lead and as much as 60% of CO (Faiz and de Larderer 1993). In city centres, vehicles may be responsible for 90-95% of CO and lead and 60-70% of NO_x and HC. As vehicle emissions usually occur near to the breathing zone of people, exposures can be high and they can represent substantial health risks.

While most of the vehicle population is in developed countries, motor vehicle pollution in developing countries is rapidly worsening due to increasing vehicle fleet growth (Figure 6.3), increasing distances travelled, and high rates of emissions from the vehicle fleets. The causes of the high emissions rates include high proportions of polluting two-stroke engine vehicles, road congestion which increases emissions per kilometre travelled, poor fuel quality including high lead content, inadequate emissions controls, poor maintenance and high average age of the vehicle fleet (Faiz and de Larderer 1993).

Many countries have acted to regulate and enforce emissions reductions, so ambient concentrations of vehicle-related air pollutants over the last two decades have declined in most developed countries. For example, the decreases in ambient concentrations in the US from 1985 to 1994 were 28% for CO, 86% for lead, and 9% for NO_x (USEPA 1995). With pressure to improve engine design and operating conditions, and improved tailpipe control technologies, vehicle emissions in many countries have decreased despite increasing number of vehicles and kilometres travelled. For example, while emissions of CO in the period 1980-1990 increased in France from 9216 000 to 10 268 000 tonnes, they decreased subsequently to 8 850 000 in 1996 (UNECE 1999). In the period 1980-1996 CO emissions in Germany decreased from 15 046 000 to 6 717 000 tonnes, and in the European part of the Russian Federation from 13 520 000 to 9 312 000 tonnes (UNECE 1999). Although in the most wealthy of the developing countries significant improvements in air quality are occurring, in most other developing countries for which data are available, both vehicle emissions and ambient concentrations of vehicle-related air pollutants have increased (WHO 1997a). For example it is estimated that emissions of CO in Delhi increased from 140 to 265 tonnes in the period 1980-1990, and are projected to be 400 tonnes in the year 2000 (UNEP/WHO 1992).

As the options for controlling vehicle emissions must be considered within the technical, financial, social, health and environmental context of each nation, the challenges and response options in developed and developing countries are different. In some developing countries, financial and regulatory measures to control vehicle emissions impose major economic and social costs, and there may be an uneven distribution of costs and benefits in the community. For example, there may be increased costs but few benefits for people living in rural areas. Capital may be required to alter local vehicle manufacturing and fuel refining processes, and operating costs may increase. This could divert resources from other priority areas, or make local industry uncompetitive.

Figure 6.3. Estimated and projected increases in the total population, urban population, and vehicle numbers 1950-2020, excluding motorized two- and three-wheeled vehicles (after Faiz et al. 1990).



The experience with vehicle inspection programmes in developing countries has been reported to be generally poor (Faiz et al. 1990), and the use of sophisticated vehicle control technologies is expected to have greatest utility in only the most advanced of the developing countries. Consequently, the most promising approaches for controlling vehicle emissions in developing countries is likely to be through the use of cleaner fuels, traffic management and administratively simple policies (Faiz et al. 1990). However, many developing countries have found that improving fuel economy and emission standards, as well as encouraging use of fuel-efficient vehicles and clean fuels, have the effect of both reducing costs and contributing to an improvement in air quality. In addition the strengthening of traffic management programmes, improvements in public transport, restrictions on motorized traffic and encouragement of the use of gas-fuelled vehicles in fleets are also cost-effective means of reducing vehicle emissions (Faiz and de Larderer 1993).

Many middle-income countries have introduced most of the above measures. Some have implemented additional measures, including approval standards and testing of new vehicles, exhaust emission controls, fuel improvements, roadside emission checks, replacement of two-stroke engines with four-stroke engines, and use of low- or zero-emission fuels (such as electric light-rail) for public transport.

Most developed countries apply regulations for vehicle emissions as part of an international process, under which vehicles and their component parts are required to be approved before marketing. Some countries also require regular in-service inspection and maintenance for emissions and safety, as a condition for continued operation of vehicles. This includes retrofitting or scrapping of non-conforming vehicles. Technology requirements for new vehicles in most developed countries include three-way catalytic converters, with closed loop and charcoal canister for petrol-fuelled passenger cars. There are also requirements that apply to diesel, light- and heavy-duty trucks and buses. Conventional two-stroke motorcycles are usually prohibited. There are programmes to control fuel losses during refuelling. Most developed countries require use of unleaded fuels for new cars, and encourage their use by economic instruments. In some countries, leaded petrol is banned (UNECE 1995; UNECE 1999). Advanced area-wide traffic management systems may be employed to facilitate vehicle flow and to minimize emissions.

Policy measures to control vehicle ownership and use, and to encourage other forms of transport, are also commonly employed to support vehicle emissions programmes. For example, tight control over vehicle ownership and use in Singapore, especially within the central business district during the day, has

contributed to reducing air pollution from motor vehicles (Chin 1996). Coercive programmes such as no-drive days are normally used as a last resort on days when air quality reaches extreme levels, as they are politically unpopular, and they create social costs and enforcement problems. More socially acceptable measures include incentives to develop and use public transportation, such as buses, light rail and bicycles. Land-use planning approaches that encourage public transport and provide disincentives for use of private vehicles are attractive and cost-effective long-term measures.

6.1.8 Control of area sources

The control of area sources of air pollutants involves a number of strategies, as the characteristics of area sources are highly variable. The sources are often small, such as domestic and light-industry sources. Area sources include open burning of waste materials from agriculture, forestry and land clearance. Other sources are forest fires, emissions from vehicle refuelling, off-road vehicles and marine craft, and commercial and domestic fuel combustion. Surface mining and overgrazing of land in semi-arid areas can also act as sources of particles.

The options for controlling area sources can be classified as technical, regulatory, educational and market-based strategies. Technical strategies involve investigating alternatives to existing polluting activities, and implementing cleaner production and pollution prevention technologies and best practices. They encourage the replacement of existing technologies with lower- or zero-emission technologies.

Regulatory strategies involve legal enforcement of regulations at local and national government levels. This could involve banning of some emissions, banning of some open burning, or burning of materials during certain periods, increasing penalties, control of fuel quality, and restrictions on the types of combustion equipment available.

Educational strategies involve informing the community about sources of emissions and the impact of air pollution on health and the environment, and informing them about practices such as open burning, use of poor quality fuels etc, which lead to pollution.

Market-based strategies may involve polluter pays concepts. They include changes in cost structures to provide financial incentives for using clean fuels. They also involve reducing the costs of emissions licenses for adopting best practices, load-based emission charges and true cost pricing of resources (Table 6.2).

6.1.9 Non-classic air pollutants

While most attention is given to the relatively small number of well-recognized and often ubiquitous classic air pollutants (Table 6.1), there are thought to be several tens of thousands of synthetic chemicals in use, some of which are known or thought to be highly toxic air pollutants. The US Congress has identified 189 toxic air substances. Although the acute effects of the most common non-classic chemicals are relatively well-known, much less is known about the chronic, long-term or indirect effects of exposure at ambient concentration levels. In addition, exposure to many non-classic air pollutants may occur in small commercial operations, such as in agricultural enterprises where staff may not be well trained, and accidental exposure or release can occur. Some of these air pollutants are emitted at low concentrations from common sources such as vehicle emissions, and from wood fires. Some non-classic air pollutants can be very persistent in the environment, with exposure occurring many years after release.

As many of these chemicals, such as agricultural chemicals, are often traded, international approaches have been developed to maintain registers of their known toxic effects and their legal status. While techniques to manage them have been developed, the effect of increasing the regulation of non-classic air pollutants has been to exert pressure on industry to manage their production, using pollution prevention approaches. This can involve, but not be limited to, replacing them with safer compounds,

changing the production process to prevent them from being produced in side reactions, and recycling or destroying them (such as by high temperature incineration) to prevent release into the environment.

6.1.10 Education and communication

Effective education and communication are important tools in raising public awareness of air quality issues. The successes of air quality management strategies have often involved action at all levels in the community. In many cases, central government action is triggered by local complaints from citizens. Actions to control air pollution have sometimes been possible only by establishing communications between local communities, local government and the national government agency responsible for air quality issues (e.g. Hashimoto 1989). Two-way communication between local communities and those responsible for air quality management is essential, and it requires use of many techniques to be successful.

Reporting air quality information in a form that is generally understandable by the public is a difficult problem. One approach is the use of the pollutant standard index, an example of which is explained by Griffin (1994). This system enables a wide range of air quality components, concentrations and averaging times to be reported to the public as one simple normalized figure. Although a pollution index provides a relatively simple and easy way to disseminate information on the level of air pollution, there are difficulties associated with the setting of these indices. Most of these difficulties arise from the fact that the composition of the pollutant mixture varies in both time and space, and that the components of the mixture have different health impacts. Despite these difficulties, they have been successfully used in some countries. In particular, they were used in communicating complex air quality information to the public during the 1997 haze periods that affected several major South East Asian cities.

6.1.11 International air quality management

The recognition that air pollution does not respect national frontiers has led to considerable action to develop international approaches to the management of air quality. Initially, action to control air pollution was conducted only at a national level, ignoring the import or export of air pollution across national frontiers. Acid deposition, photochemical oxidants, and accidental releases of ionising radiation and toxic chemicals first became international issues only during the 1970's. The development of international environmental law to guide air quality management in the area of transboundary air quality matters is still at an early stage of development, although some principles, international agreements and treaties have been formulated.

The Organization for Economic Co-operation and Development (OECD) provided the first multinational co-operative assessments of the long-range transport of sulphur pollutants in Western Europe. It urged member countries to reduce emissions and pressed for the principle of "polluter pays" to be applied internationally (Elsom 1992). Following this, members of the United Nations Economic Commission for Europe adopted the Convention and Resolution on Long Range Transboundary Air Pollution. This convention commits signatories in North America, Western Europe and Eastern Europe to reduce and prevent air pollution and to use the best available technology that is economically feasible. Many nations agreed to cut emissions of SO₂ by thirty percent by 1993, and fifty percent by 1995, based on 1980 emissions levels.

The European Union has also agreed on directives to reduce emissions of SO₂ and NO_x, has established air quality standards and has limited the sulphur content of some fuels. It has also agreed to apply the "best available technology not entailing excessive costs" and agreed to limits on emissions from power stations. In other parts of the world there has been action to increase the information flow among nations for air quality management by introducing international reporting of emissions, ambient concentrations, policy directives and tools for strengthening air quality management. This has largely involved UN agencies such as WHO and UNEP

(UNEP/WHO 1992; UNEP/WHO 1996; WHO 1997a), the World Bank and Regional Banks (World Bank 1992), OECD (OECD 1991) and the international development agencies.

6.2 Management of indoor air quality

Most human beings spend most of their time in indoor environments, where they can be exposed to poor air quality. Pollution and degradation of indoor air cause illness, increased mortality, loss of productivity and have major economic and social implications. Indoor air problems can be reduced by better urban planning, by better design, operation and maintenance of buildings, and through the use of less-polluting materials and equipment in buildings. Indoor air quality problems affect all types of buildings, including homes, schools, offices, health care facilities and other public and commercial buildings. Health effects can include increased rates of cancer, lung disease, allergy and asthma, as well as fatal conditions such as CO poisoning and legionnaires' disease (discussed in Section 4.1). The medical and social costs associated with these illnesses, and the related reduction in human productivity, result in staggering economic losses.

This section considers management of indoor air quality in developed countries, and in some situations in developing countries, and then focuses on the important and widespread problems of indoor air quality management associated with biomass fuel combustion in developing countries.

6.2.1 Management of indoor air quality in developed countries

6.2.1.1 Strategies for indoor air quality management

Control and improvement of indoor air quality can be achieved by combining the three main strategies: proper design and construction of buildings; control of indoor air pollution; and adequate management of problems associated with indoor air quality.

6.2.1.2 Design considerations

Site

Site investigation. Potential sites of buildings need to be evaluated to determine whether they may be prone to indoor air quality problems, or may be in a high-risk area for radon. Assessment of sites includes a consideration of past uses and identification of any contaminants that might remain as a result of previous use. The use of adjacent sites should also be noted, to evaluate the potential for outdoor pollutants being carried to the proposed building.

Site preparation. Accumulation of moisture favours the growth of biological agents and can be prevented by choosing dry and well-drained building sites and properly grading the property.

Building Envelope Design

Tightness. Buildings should be designed to conserve energy and with good control over infiltration of air and movement of pollutants. This requires that adequate outside air be effectively delivered to occupants through the high volume air conditioning system (HVAC). Natural ventilation should be encouraged whenever possible and convenient. Energy conservation can also be achieved by controlling internal loads (e.g. through increased use of

natural light).

Ventilation

Outside air-flow rates. Outdoor air-flow requirements are calculated as part of the mechanical design process. Guidelines based on occupancy and space usage are important; however, outdoor air-exchange rates should also take into consideration the total indoor pollution load and the desired quality of air. Adequate outdoor air flows are important in residential as well as commercial properties.

Breathing space. A consideration in HVAC design should be the amount of supply air and outside air that actually reaches the occupants of a building. This involves examining the method and efficiency of air distribution. The effectiveness of the HVAC system to dilute and remove indoor pollutants, and to properly distribute outside air throughout the building, is an important aspect of the design. Ventilation rates should be re-evaluated when interior spaces are renovated.

Mechanical ventilation in houses. Some houses are designed airtight with insufficient outside air entering through passive infiltration. As a result, mechanical ventilation is necessary to introduce a satisfactory flow of outside air and to provide adequate dilution and removal of pollutants. This enables heat recovery from the ventilation air.

Commissioning

New buildings should be commissioned before occupancy. Commissioning should include testing and balancing of the HVAC system, and documentation that the system meets needs both during operations and during potential renovations. Commissioning should also establish responsibilities for maintaining and operating the system, and for training the staff responsible for operating and maintaining the system. In addition, commissioning should include ventilation specifications for use while the building is new, to control levels of VOC.

Material selection

Designers should specify building materials that are minimal sources of indoor emissions. These materials include low-emitting products and materials, which do not generate or store dust particles. In addition, the design should minimize horizontal surfaces on interior finishes and furnishings to reduce the particle levels in buildings.

Combustion appliances

Designers and builders should specify and install combustion appliances according to manufacturers' specifications, paying special attention to requirements for combustion and for exhaust ventilation.

6.2.1.3 Indoor air pollution control

Management of pollutant sources

Biological contaminants. Biological contaminants will flourish wherever there is adequate moisture because adequate nourishment is always available on building surfaces. Because so

many building materials can serve as a nutrient source for moulds and other biological contaminants, the most practical means for controlling biological contamination is to avoid excess moisture wherever possible. Moisture control can be accomplished by dehumidification, ventilation, and increasing the temperature at the building surfaces to prevent condensation. Dehumidification is most important in humid climates, and ventilation can aid in moisture control by increasing air movement. These techniques may be used individually or in combination.

Biological contamination can be avoided both by sustaining high-quality maintenance and by monitoring the materials and procedures used in operating and maintaining the building components, including the air-conditioning system. Proper maintenance of air-conditioning equipment is critical for preventing microbiological growth and the entry of undesirable microorganisms into the indoor air. These components include drainage pans, coils, cooling towers, ductwork and humidifiers. Poor filter maintenance is a common problem and a poorly maintained filter can act as a source of fungal spores, and bacterial and other biological particles that can be distributed in air within the building. Routine maintenance schedules are required that include filter checking and replacement and drain pan clearing.

Volatile Organic Compounds. The concentration of VOC within the air of a building can be controlled through careful selection of building materials and products. Building managers should become familiar with the VOC found in the building components and products. Designers and building managers should attempt to select the safest, least toxic materials, when they can be identified, or those with the lowest emission rates. Information regarding VOC may be found by reviewing product labels, Material Safety Data Sheets (MSDS), and available compendia (e.g. the American Institute of Architects Environmental Resource Guide).

For building materials, off-gassing is greatest immediately after the installation of VOC sources, when they are new. This off-gassing decreases with age of the VOC sources. To minimize occupant exposure to VOC, areas that have newly-installed VOC-emitting materials, or that have undergone renovation, should receive increased outdoor air ventilation and/or local exhaust. In the initial months after building completion, the ventilation should operate 24 hrs/day and 7 days/week. Installation of new products or renovation work should preferably occur when the space is unoccupied and remain unoccupied until the strongest VOC off-gassing has occurred.

Air clearing is not recommended as a substitute for source control and adequate ventilation for removing VOC. Although VOC can be removed by air cleaners relying on adsorption and absorption methods, care must be taken to avoid re-emission of the collected VOC from the filter medium.

Radon. To prevent the migration of radon gas into a structure, any cracks or openings in the foundation of the lowest level of that structure should be tightly sealed. Ventilation can be introduced to the lowest level in a building to dilute and remove the gas. Exhaust fans and piping can create sub-slab depressurization to remove radon and deter it from accumulating in the building.

Combustion Gases. Combustion gases should normally be exhausted to the outdoor air, and prevented from entering occupied spaces. Outdoor air intakes for a building should not be located near exhaust systems or other sources of combustion gases, such as highways. Combustion appliances are a source of combustion gases within a building and should be used

and vented in accordance with the manufacturers' recommendations. Adequate general ventilation, as well as exhausts for the appliances, should be provided to minimize the exposure of occupants.

Particles. Particles, including asbestos, tobacco smoke particles, dust and pollen are hazardous or troublesome to occupants when they become airborne. Materials that generate high loads of particles need to be avoided. Proper housekeeping practices should be followed to keep dust levels low. Cleaning activities should be conducted during the off-peak hours to minimize effects of fine particles on sensitive occupants. High-efficiency filtration in the air handling system can also help reduce airborne particle levels.

Asbestos Asbestos products must be avoided. When asbestos products are identified in existing buildings, the general recommendation is to minimize disturbance of those materials, which are non-friable or friable, yet in good condition. This also involves training staff on emergency maintenance handling procedures.

Environmental tobacco smoke. To eliminate exposure of non-smokers to ETS, organisations should prohibit smoking in buildings. If this is not possible, organisations should provide enclosed, separately-ventilated, negatively-pressurized smoking rooms, with direct external exhaust. These smoking rooms should provide a high volume of outdoor air per smoker.

Operation and maintenance of ventilation systems

Building maintenance personnel should be trained to understand the indoor air quality aspects of their work. Many maintenance activities directly affect indoor air quality, and some may reveal indicators of potential problems. The staff should be made aware of indoor air quality considerations and how their work can directly impact the health and comfort of occupants.

Preventive maintenance of an HVAC system is essential for it to operate correctly and provide suitable comfort conditions and good indoor air quality. Detailed maintenance logs should be kept for all equipment, including controls and filters. A scheduled program should be developed for a routine check of equipment, calibration of control system components, and necessary filter replacements.

Space is often used for purposes other than those originally intended, especially in older buildings. Changes such as increased occupant density, or altered function of the space, can affect both the required outdoor air supply to the space and the necessary exhaust from the space, and consequently can reduce indoor air quality. When space is reallocated, renovated, or changed from the original design, the use of the space should be re-examined to determine if adjustments to the HVAC system are warranted. The same procedure is required when new sources of contaminants are introduced.

Air cleaning

Depending on the pollutants of interest, four technologies can be considered for removing contaminants from the air: particle filtration, electrostatic precipitation, negative ion generation and gas sorption. The first three are devised for the removal of particulate matter, while the fourth is designed to remove gases. Air cleaning is most effective when used in conjunction with source control and adequate ventilation. Most air cleaning in large buildings is directed primarily

at preventing contaminant accumulation in HVAC equipment and enhancing equipment efficiency.

Filtration is effective only when properly installed and maintained. It is important that filters be changed or cleaned on a regular basis and that leakage around the filters is minimized. High-efficiency filtration is most effective at improving indoor air quality.

6.2.1.4 Resolving indoor air quality problems

Addressing occupant complaints and symptoms

When complaints are received from occupants of a building, the building management needs to be responsive to these complaints. The initial investigation into the cause of the complaint may be conducted by the in-house building management staff. Building management should continue an investigation as far as it can, and be responsible for hiring an outside consultant if needed.

Building diagnostic procedures

Investigation protocol. After receiving complaints related to indoor air quality, experienced staff or consultants should investigate the cause of the problem through an iterative process of information collection and hypothesis testing. To begin, a walkthrough inspection of the building is required, including the affected areas and the mechanical systems serving these spaces. A walkthrough can provide information on the occupants, HVAC system, pollutant pathways and contaminant sources. Visual indicators of possible contaminant sources or HVAC system malfunctions should be evaluated first. Measurements of temperature, relative humidity, and air flow should be taken if a walkthrough alone does not provide a solution. Symptom logs and schedules of building activities may provide enough additional information to resolve the problem. When visual inspection and data gathered from the occupants do not identify a possible cause, it may be necessary to sample for suspected contaminants, or compare indoor and ambient levels of pollutants, to ascertain the source of the problem. Whenever a problem is discovered during the investigation, a remedy should be attempted and then a determination made as to whether the complaint has been resolved.

Sampling for contaminants. As part of the evaluation of the HVAC system, samples should be collected for temperature, relative humidity, CO₂ levels and airflow. More sophisticated sampling can be conducted for mould, bacteria, VOC etc. at a later date, if it becomes necessary to confirm a hypothesis, or to provide proof to a building owner or other responsible party.

Other potential stressors. Several building-related factors can cause symptoms similar to those of indoor air pollution - headaches and eye irritation are examples. These other stressors include ergonomics, lighting, noise, vibration and psychosocial factors. An investigation should therefore also evaluate non-indoor air quality factors.

6.2.1.5 Government policy

Many of the problems associated with poor air quality can be prevented at low cost and without compromising energy efficiency if governments develop and implement integrated strategies for the indoor environment, in concert with all social and economic partners.

Guidance/education

Understanding indoor air quality issues enables a government to focus public education. Both general information, as well as technical training, can be provided for minimizing indoor air pollution. Special focus needs to be given to the design process, so that buildings meet acceptable indoor air standards. Targeted technical guidance and training can be provided for audiences that influence building air quality or occupant health. These include architects; mechanical designers; building owners; facility managers; homebuilders; diagnosis and mitigation professionals; and physicians.

Research support

Pollutant source characterization. Research on indoor air quality can be used to characterize pollutant sources and provide protocols for reducing exposures; it can also provide information on the relationship between health effects and indoor pollutants.

Health effects. There are three areas where research can significantly improve our understanding of the health effects of indoor pollution. These are: low-level chemical exposure and pollutant mixtures; allergy/hypersensitivity; and multiple chemical sensitivity, also known as environmental illness.

The effects of low-level exposure to the mixtures of pollutants found in non-industrial environments need to be characterized, since they can induce different health effects from those produced by higher pollutant levels, such as those identified in occupational exposure limits.

Research can be used to better understand the mechanisms causing the health effects, and the different responses of individuals, or groups of individuals. For example, an improved understanding of hypersensitivity associated with allergy and other conditions would help find medical solutions to hypersensitive reactions.

Research to characterize and determine the causes of, and solutions to multiple chemical sensitivity is also needed. Identifying the physiological nature of multiple chemical sensitivity is the first step in understanding whether and how indoor air quality contributes to the syndrome.

Technology development. The development of better technologies in diagnosis, mitigation, and control would help to improve indoor air quality. Mitigation and control studies are needed to provide economical and practical alternatives to current technologies. Better means of measuring the effectiveness of ventilation systems are also needed. While the ability to measure individual pollutants often exceeds our knowledge of their health effects at the measured levels, progress is still needed in measurement of pollutant mixtures. There is a need for the development of diagnostic tools that are inexpensive and easy to use.

There is a particular need for improving methods for assessing airborne biological contamination, including both viable and total microorganisms. Research needs to be directed towards the development of immunological and other methods for reliably detecting and quantifying specific organisms, or their allergens. Techniques are also needed for assessing mycotoxins and microbial metabolites that may affect health via non-allergic mechanisms.

Sick Building Syndrome and Building Related Illnesses. Efforts to identify causes and solutions

to SBS and BRI are required (for definitions of these terms see chapter 4). Research in health effects and building diagnostics, combined with analyses of data compiled from building investigations, are important for gaining a better understanding of indoor air quality problems.

Problem assessment and surveys

There is a need to assess the extent of indoor air quality problems, to provide accurate information when setting priorities for public health problems.

Building surveys/Epidemiology. Building surveys are necessary to identify building types in which problems occur more frequently. The results of these studies support effective risk reduction programs. Epidemiological studies are needed to characterize indoor air quality-related symptoms, and to distinguish the effects of air pollution from those due to other causes. Epidemiological studies also help to quantify the risk for indoor air pollutants.

Economics. Economic studies are needed to measure the costs of indoor air pollution and indoor air quality control strategies to individuals, businesses and society. This research includes developing measures of productivity loss and health cost increases, as well as costing various control strategies, including increasing ventilation, controlling pollutant sources and air cleaning.

Standard/protocol development

Exposure guidelines for indoor air quality. When the health effects of exposure to pollutants are known, it is important to ensure the protection of workers by setting reasonable exposure limits. In cases where research or risk assessment activities have yet to determine precise dose-response relationships, but where health effects are generally recognized, exposure limits should be set conservatively, weighing risk, economic impact and feasibility. In addition, efforts should be made to develop exposure limits that recognize non-carcinogenic effects.

Building codes. Building codes provide an opportunity to incorporate indoor air quality considerations into the design process. There is a need to develop codes for ventilation design, building envelope design, site preparation, materials selection and commissioning.

Ventilation standards. Adequate ventilation of occupied spaces with outside air is necessary to ensure good indoor air quality. Research and development is needed for a health-based ventilation standard. Encouraging code-setting bodies to adopt ventilation standards, set by consensus organisations or governmental bodies, will help improve indoor air quality in buildings.

Maintenance protocols. Easily implementable guidelines are needed for maintaining HVAC systems and other maintenance activities that affect indoor air quality.

Product labelling. As an incentive to industries to develop and market products that emit less pollution, improved product labelling programmes should be implemented. The intent is to provide information to consumers and building designers; it is not intended as a sign of safety approval. Labelling would serve to achieve general reductions in emissions, rather than requiring manufacturers to meet specific guidelines, except for those cases where undesirable chemicals can be identified.

Accreditation. By instituting a system of accreditation that recognizes and highlights areas of expertise, consumers can be provided with information to make better informed choices when procuring indoor air quality services.

Emission Standards. Guidelines for product VOC emissions would provide useful information for manufacturers, architects, design engineers, building managers and others who play a role in selecting products used indoors. However, development of such guidelines is dependent upon additional research establishing a health basis for them.

6.2.2 Management of Indoor Air Quality in Developing Countries

The management of indoor air pollution in developing countries is a very important task of the building occupants if adverse impacts from e.g. open stove cooking and heating are to be avoided. Decisions of the building occupants, however, will often be driven by the household economy, convenience or habits rather than by minimal health risk considerations with respect to activities, facilities, and materials used indoors. Legislative and economic mechanisms should encourage individuals to manage the indoor environment in a health promoting way by means of technical and behavioural interventions. WHO has summarized technical and social-behavioural interventions in a publication on indoor air pollution from the use of biomass fuels (WHO 1992). Both types of interventions are depicted in figures 6.4 and 6.5.

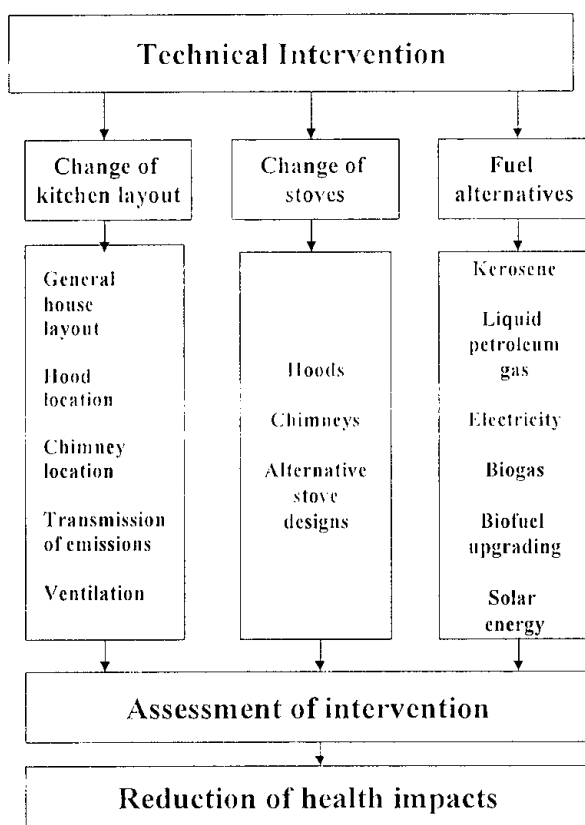
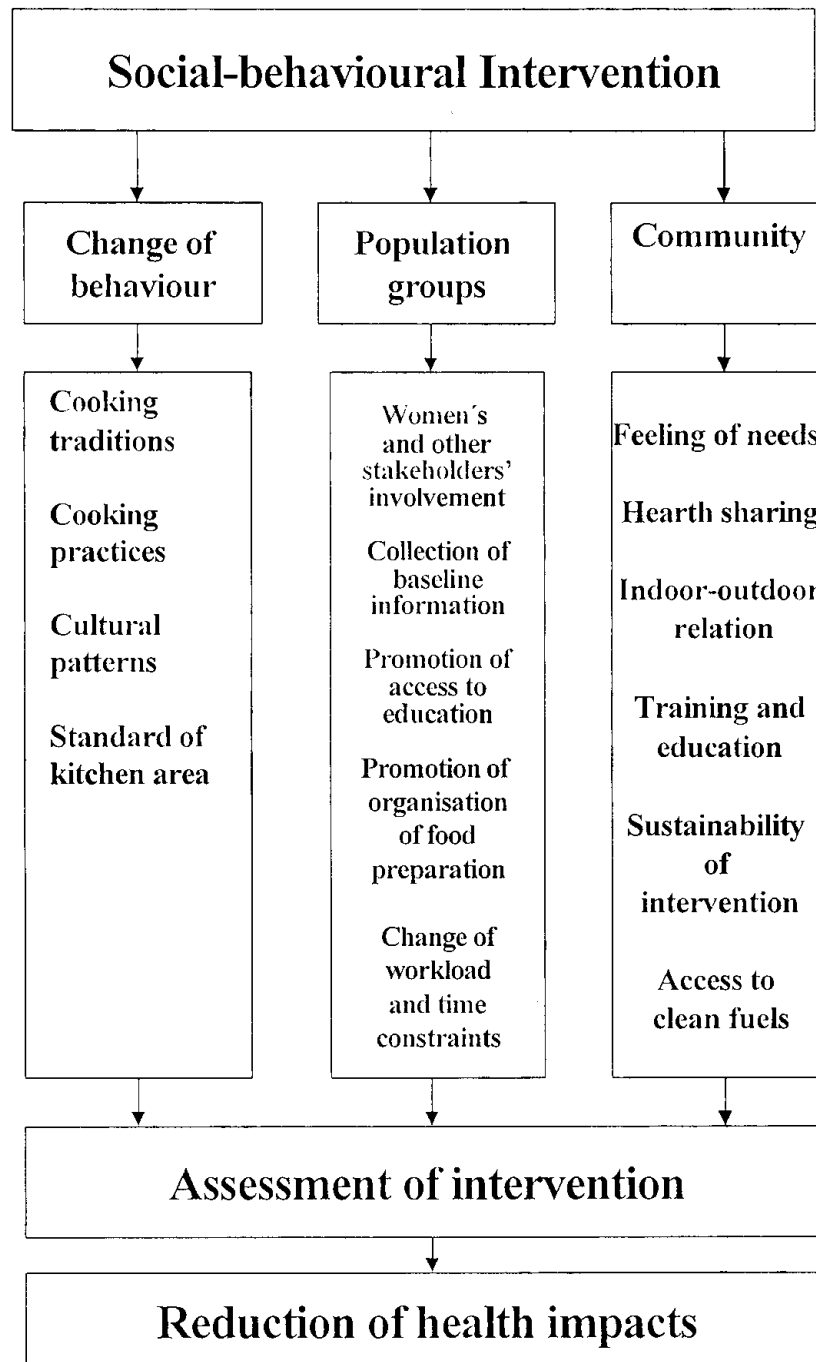
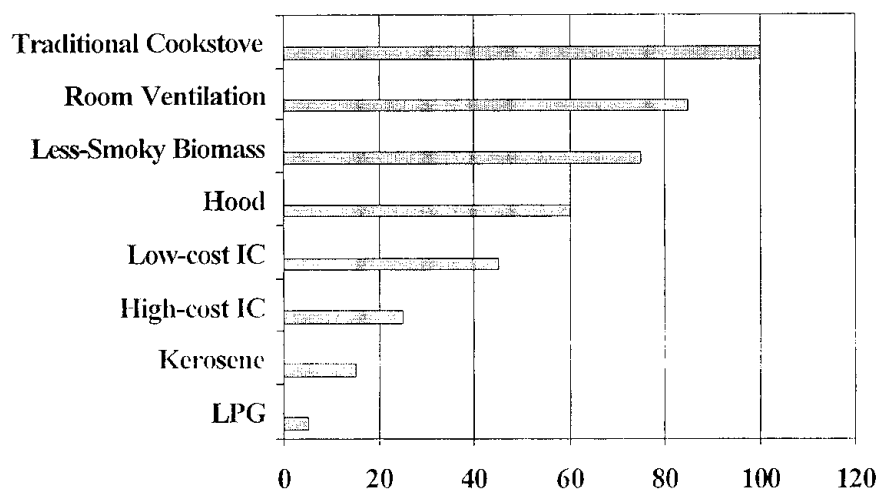


Figure 6.4 Technical interventions for reducing health impacts from use of biomass fuel in households

Figure 6.5 Social-behavioural interventions for reducing health impacts from use of biomass fuels in households



An overview of the effectiveness of major technical interventions for reducing ill-health from the use of household solid fuel is shown in Figure 6.6. This section concentrates in the following on only the major technical options and provides a brief outline of the issues involved.



IC = Improved cookstove with flue (chimney)

Figure 6.6 Effectiveness of potential exposure interventions: Percent of exposure compared to using traditional cookstove without flue – typical values.

6.2.2.1 Improved Ventilation

An obvious solution when observing a village kitchen containing an unvented woodstove is better ventilation - i.e. more windows or other openings. In practice, however, there are often severe constraints because of weather, security or architecture. Thus, while better ventilation can clearly help in many circumstances, it is not a solution applicable to all situations.

6.2.2.2 Improved Stoves - Chimneys

Standard industrial hygiene suggests that general ventilation is not always sufficient as a means of exposure control, and that ventilation at the individual workplace is needed. Improved stoves utilizing flues or hoods can reduce indoor exposures substantially, particularly in the vicinity of the stove. Studies in developing countries show that pollution levels in homes can be lowered by nearly a factor of ten in ideal circumstances when well-constructed and maintained improved stoves are used.

Unfortunately, however, such circumstances do not seem to prevail in a large percentage of households. Inexpensive stoves tend to deteriorate through use of poor quality materials, poor construction and poor maintenance, leading at best to a factor of three improvement in exposures over long periods. In a large number of studies, no statistically significant difference was found between the indoor concentrations of

particles in homes using these improved stoves, and those in homes of their neighbours, who used open fires.

Another factor reducing the health benefit of even well-operating chimney stoves is that they exhaust emissions outdoors. In a built-up areas, such as exists in most urban slums and many villages, outdoor levels of air pollutants around the houses can significantly affect indoor levels. This "neighborhood effect" is not well-characterized, but it can limit practical exposure reduction.

If not carefully designed, chimney stoves can decrease fuel efficiency. The natural draft of the flue can so reduce the heat transfer to the cooking pots that overall efficiency is reduced. Perversely, in an attempt to prevent this effect, improved chimney stoves often have dampers to reduce the airflow. While overall efficiency may increase due to increased heat transfer efficiency, combustion efficiency can be impaired by poor air supply. The result, therefore, is paradoxically an increase in both fuel efficiency and emissions, although perhaps also lower exposures since the emissions are released outdoors.

In spite of these problems, chimney stoves seem to offer a short-term solution in many situations, but they probably need to be considered as only a first step in managing indoor emissions from fuel combustion.

6.2.2.3 Improved Stoves - Combustion

Wood and most other biomass fuels have few intrinsic contaminants, so that in ideal circumstances, virtually complete combustion can almost eliminate health-damaging emissions. In many developed countries, wood-burning stoves are subject to severe restrictions on emissions. By application of good engineering, remarkable improvements in emission performance has been achieved in such devices. This includes not only the use of catalytic converters, but also clever designs incorporating fluidized beds or secondary combustion.

Unfortunately, it can be difficult to design inexpensive devices that can reliably achieve high combustion efficiency and low emissions. A "low cost" low-emissions metal heating stove in the USA might cost \$500. More typically, costs are twice this or more. Improved stove programmes in many developing countries attempt to keep costs well under \$20. The technical potential seems high for filling this gap and inexpensive devices utilizing downdraft designs, for example, have achieved remarkable combustion efficiency in experimental situations. Much work remains to be done before such devices are practical on a global scale.

6.2.2.4 Fuel

Although the potential of truly low-emission stoves is alluring, improved fuels are the only proven long-term approach to the indoor air quality problem in developing countries. History has shown that people generally move to higher-quality fuels given access and affordability. This observation has led to the concept of the "energy ladder." At its bottom rung are the lowest-quality biomass fuels, grass, shrubs and roots; next come agricultural residues of dung and crop wastes; and then the highest-quality unprocessed biomass fuel, wood.

Although improved stoves have important roles, the long-term approach to the indoor air quality problem in developing countries is probably to accelerate the natural movement up the energy ladder to liquid and gaseous fuels. These fuels can be made from biomass itself, for example in the forms of alcohol and biogas. Promoting movement up the energy ladder in some cases can be accomplished by changing government policies that restrict access to certain petroleum fuels because of concerns about balance of payments. In many cities, even at international prices, such fuels are often cheaper than buying wood or charcoal when all costs are considered. Here the constraint is often the up-front cost of the stove and storage system (pressurized tank), which could be provided by low-interest loans or other subsidies.

Subsidizing kerosene and bottled gas directly, however, has many problems. When this has been done, usually as a means to reduce the pressure on biomass resources, the poor often do not benefit much, while others benefit by using the fuels for unintended purposes, e.g., irrigation pumps and vehicles. The result is high cost to the society and little shifting of household fuel use. Creative new approaches using vouchers or other types of incentives are needed in this area, to confine the benefits of subsidies to those who need them and are the intended beneficiaries. In addition, much enhanced research is needed on conversion of biomass into liquid and gaseous fuels that are compatible with high-quality household environments.

Other renewable fuels, such as solar energy, have the potential to provide clean fuels at an affordable economic cost, and in some areas to wholly or partially replace those household fuels that create substantial indoor air quality problems.

6.2.2.5 Conclusion: Simple Exposure Indicators

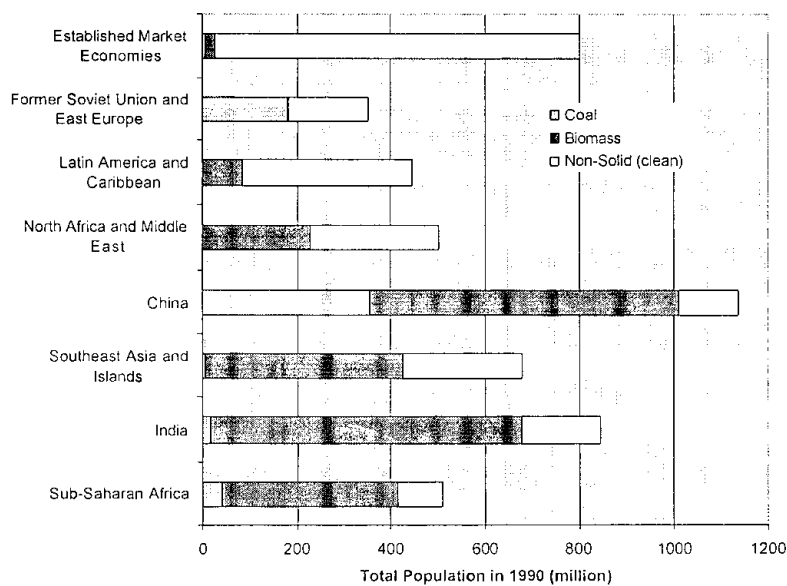
Although work on deriving simple exposure indicators urgently needs to be encouraged, realistically it is likely to be some years before sufficient environmental monitoring can be undertaken in most developing countries. In the interim, simple affordable exposure assessment tools are needed to assist in estimating the scale of the problem in local areas.

Simple indicators of poor water quality and sanitation have been developed and implemented successfully by WHO and others. These indicators are widely used to show trends and locate special problem areas. They do not require actual measurements but are able to be collected from other socio-economic information on households.

It should be possible to collect a set of indicators of the potential for air-pollution-related diseases from the segments of the population with:

- Access to clean fuels (defined to be stoves using liquid and gaseous fuels or electricity, or defined as use of the clean fuels themselves) and,
- Access to venting [or ventilation] (defined to be the use of flues, chimneys, or outdoor cooking).

Although both of these indicators are subsets of broad goals related to achieving adequate, healthy and sustainable living environments, such simple indicators have high utility because of their ability to be quantified and easily understood. Trends over time and comparisons among different regions or populations are thus facilitated. Figure 6.7 is a preliminary attempt at reporting the first of these indicators at the global level.



Note: Most use of solid fuels in the first two regions is in vented heating stoves.

Figure 6.7 World population using clean and potentially dirty (solid) household fuels

Such indicators will help focus efforts to develop interventions. Eventual control of indoor air exposure from solid fuel cooking and heating is likely to require many years, and the integrated efforts of several sectors, including health, environment, energy and housing. Nevertheless, efforts to accelerate this process are likely to be rewarded with major improvements in human health.

7. Priority Setting in Air Quality Management

7.1 Introduction

This chapter is intended to give guidance on how to set priorities in rational air quality management. Actual priorities will differ for each country; therefore, each country sets priorities in air quality management according to its policy objectives, needs and capabilities. Priority setting in air quality management refers to prioritizing the health risks of air pollution, with corresponding prioritization of the pollutants, and concentrating on the most important sources of the pollutants. Conceptually, prioritizing health risks is straightforward (WHO 1999a; WHO 1999d). High priority health risks will be given to those compounds for which "high" toxicity and "high" exposure of the population are entailed.

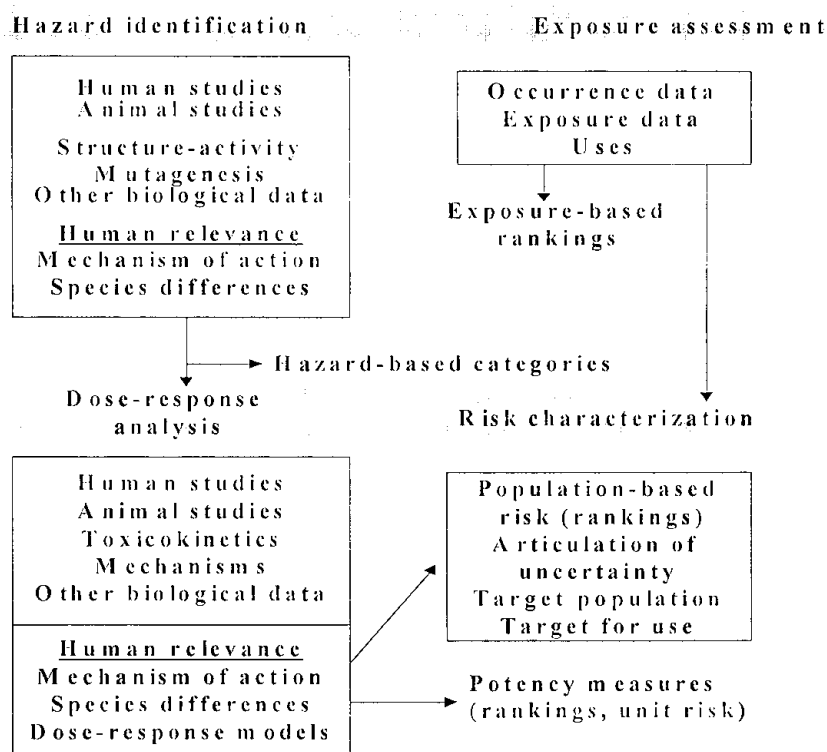


Figure 7.1 Basic elements of the estimation and prioritization of health risks

Conversely, low priority health risks involve agents of "low" toxicity and "low" exposure. "Medium" priority risks include compounds for which toxicity is "low" and exposure is "high," or vice versa. Basic elements of the estimation and prioritization of health risks is illustrated in Figure 7.1 (Sexton 1993; Younes et al 1998).

For effective air quality management, goals, policies, strategies and tactics need to be defined. These are discussed in Chapter 6.

A framework for a political, regulatory and administrative approach is required to guarantee a consistent and transparent derivation of air quality standards and to ensure a basis for decisions on risk-reducing measures and abatement strategies. In such a framework the following considerations need to be included:

- legal aspects.
- the potential of air pollution to cause adverse effects on health, taking into account populations at risk.
- exposure-response relationships of pollutants and pollutant mixtures and the actual exposure responsible for related health and/or environmental risks.
- the acceptability of risk.
- cost-benefit analysis.
- stakeholder contribution in setting standards.

7.2 Legal aspects

A legislative framework usually provides the basis for policies that set air quality standards at the municipal, regional, national or supranational level. The setting of standards strongly depends on the risk management strategy adopted which, in turn, is influenced by country-specific socio-political considerations and/or international agreements. Legislation and air quality standards vary from country to country, but in general the following issues may be taken into consideration:

- Identification and selection of the adverse effects on public health and the environment to be avoided.
- Identification of the population to be protected from the adverse health effects.
- Identification of the pollutants to be considered.
- The numerical value of the standards for the various pollutants or the decision-making process.
- Existing background concentrations of air pollutants.
- Applicable monitoring methodology and its quality assurance.
- Enforcement procedures to implement air quality standards within a defined time frame, to achieve compliance.
- Emission control measures and emission standards.
- Environmental impact assessment procedures.
- Identification of responsible enforcement authorities.
- Resource commitment.

Air quality standards may be based solely on scientific and technical data. However, other aspects such as technological feasibility, costs of compliance, prevailing exposure levels, social, economic and cultural conditions, are also usually considered in setting standards or in designing appropriate emission abatement measures. These are discussed in Section 2.4. As a consequence, air quality standards differ widely from country to country (WHO 1998b).

Air quality standards can set the reference point for emission control and abatement policies at national, regional or municipal levels. The latter two levels are only effective if long-distance transport of air pollution does not influence exposure. In the case of exposure to pollutants from long-range transboundary transport, however, adequate measures can only be achieved through appropriate international agreements.

Air quality standards strongly influence the implementation of air pollution control policies. In many countries, there is an obligation to develop action plans at the municipal, regional or national level to abate air pollution (clean air implementation plans) if standards are exceeded. Such plans have to address all relevant sources. Air quality standards also play a role in environmental impact assessments and in the provision of public information on the state of the environment.

7.3 Adverse effects on health

In setting air quality standards on the basis of air quality guidelines, it is necessary to define from which effects the population is to be protected. Health effects range from death and acute illness, through chronic and lingering diseases, to temporary physiological or psychological changes.

The distinction between adverse and non-adverse effects poses considerable difficulties. WHO has given a definition of adverse effects as "any effect resulting in functional impairment and/or pathological lesions that may affect the performance of the whole organism, or which contribute to a reduced ability to respond to an additional challenge" (WHO 1987). A more recent definition was given in the framework of the International Programme for Chemical Safety in its Environmental Health Criteria Series (WHO 1994c): "An adverse effect is any change in morphology, physiology, growth, development or life span of an organism which results in impairment of functional capacity, or impairment of capacity to compensate for additional stress, or increase in susceptibility to the harmful effects of other environmental influences." Even this elaborate definition incorporates significant subjectivity and uncertainty in defining an adverse effect of air pollutants on health.

More serious effects are generally accepted as adverse. But when the health effects are either temporary and reversible, or involve biochemical or functional changes with uncertain clinical significance, a judgement is required on whether these less serious effects should be considered when deriving the standards. Judgements as to whether the health effects are adverse may differ between countries, because of factors including different cultural backgrounds and different levels of health status. The use of biomarkers or other indicators of exposure may provide a basis for setting air quality standards. Changes in such indicators, while not necessarily being adverse effects in themselves, may be harbingers of adverse effects on health. An example is blood lead content as an indicator of likely impairment of neuro-behavioural development.

7.4 Population at risk

The population at risk is that part of the population that is exposed to enhanced concentrations of air pollution. Each population has sensitive groups or sub-populations that are at higher risk for developing health effects following exposure to air pollutants. Sensitive groups include individuals impaired by concurrent diseases or other physiological limitations, and those with specific characteristics, which makes them more vulnerable to air pollutants (e.g. infants, elderly people). Other groups may be judged to be at higher risk due to enhanced exposure (outdoor workers, athletes, children). The sensitive groups in a population may vary across countries due to differences in medical care, nutritional status, lifestyle, and/or prevailing genetic factors, or due to the existence of endemic diseases or the prevalence of debilitating diseases

7.5 Exposure-response relationships

Chapter 3 provides exposure-response relationships for a number of pollutants, including graphs for particulate matter and O₃. The percent change of various health endpoints, such as daily mortality and hospital admissions, are derived for a 10 µg/m³ increase in PM₁₀ and PM_{2.5} concentrations. Assuming linearity, the relationships apply from 0 and 200 µg/m³. For carcinogenic compounds quantitative assessment of the unit risks provides an approximate estimate of responses at different concentrations.

In setting standards, the definition of acceptable risk is related to risk perception and economic and social circumstances.

In developing standards, regulators should consider the degree of uncertainty in the exposure-response relationships provided in the air quality guidelines. Differences in the population structure (age, health status) climate (temperature and humidity), and geography (altitude, environment) can influence the prevalence, frequency and severity of health effects. Consequently, modified exposure-response relationships should be applied when setting standards (see Section 2.4).

7.6 Exposure characterization

When setting standards it is not enough to simply consider the pollutant concentrations in ambient air. Personal exposure of the population should also be considered. As discussed in Section 4.2.3, the total exposure of people to pollutants also depends on the time people spend in the polluted environments, i.e. outdoor, indoor, workplace, in-vehicle etc. Exposure also depends on the various routes of intake of the pollutants into the human body, for example air, water, food and tobacco smoking. Multiple exposures may vary across these routes which should be considered in the standard setting procedure. In deriving air quality standards, the size of the population at risk (i.e. exposed to enhanced air pollutant concentrations) is also an important factor to consider. Models of exposure estimates should be used in addition to ambient and indoor concentration monitoring.

7.7 Risk assessment

The development of air quality standards should be based on health and ecological risk models. Increasingly, these models are used to inform policy makers on some of the possible consequences of air pollutants at levels corresponding to various options for standards. Using this information, the policy maker can better assess the effects of air pollution.

Regulatory risk assessment in air pollution management includes a consideration of hazard identification, exposure-response relationships, exposure assessment and quantitative risk characterization. The first step, hazard identification, and to some extent exposure-response relationships, have already been provided in the *Guidelines for Air Quality*. Exposure assessment may predict changes in exposure associated with reductions in emissions from a specific source or group of sources. When using ambient air concentrations in the assessment of exposure, the issues discussed in Section 7.4 have to be taken into consideration. The final step in regulatory risk assessment, risk characterization, refers to the quantitative estimation of the health effects in the population at risk. Examples for such estimates were given by Hong 1995; Ostro 1996; Schwela 1996a; Schwela 1996b; Schwela 1998; Murray and Lopez 1996.

Regulatory risk assessments are likely to result in different risk estimates across countries and economic regions, owing to differences in exposure patterns, and in the size and characteristics of sensitive groups. Differences in the legislation and availability of information may also lead to differing results. There are many uncertainties at each step of a regulatory risk assessment. Therefore, the methods used to conduct the risk assessments should be clearly described and the limitations associated with the analysis discussed. A sensitivity and uncertainty analysis should be performed to characterize the major uncertainties of the risk estimates.

7.8 Acceptability of risk

In the absence of thresholds for the onset of health effects - as in the cases of fine and ultra-fine particulate matter and carcinogenic compounds - the selection of an air quality standard requires that the regulator determine an acceptable risk for the population. This also applies in cases where thresholds are present, but it would not be feasible to adopt air quality guidelines as standards because of economic or technical constraints. The acceptability of the risks and, therefore, the standards selected, depends on the expected incidence and severity of the potential effects, the size of the population at risk, the perception of related risks and the degree of scientific uncertainty that the effects will occur at a specific level of air pollution. For example, if a suspected but uncertain health effect is severe, and the size of the population at risk is large, a more cautious approach would be appropriate than if the effect were less severe, or if the population were smaller.

The acceptability of risk may vary among countries because of differences in social norms, the degree of adversity and risk perception in the general population, and because of the influences of various

stakeholders. Risk acceptability is also influenced by how the risks associated with air pollution compare with risks from other pollution sources or human activities.

7.9 Cost-benefit analysis

In the derivation of air quality standards from air quality guidelines two different approaches for decision making can be applied. Decisions can be based purely on health, cultural and environmental consequences with little weight to economic efficiency. This approach would have the objective of reducing the risk of adverse effects to a socially acceptable level. The second approach would be based on a formal cost-effectiveness or cost-benefit analysis (CBA), with the objective of identifying the control action that achieves greatest net economic benefit, or is the most economically efficient. The development of air quality standards should account for both extremes, and encompass a process that involves stakeholders and assures social equity to all involved. It should also provide sufficient information to guarantee that the stakeholders understand the scientific and economic consequences. Cost benefit analysis is discussed in Section 2.4.7.

The steps in a cost-benefit analysis include:

- Identification and cost analysis of control action (emission abatement strategies and tactics).
- Assessment of air quality and population exposure, with and without the control action.
- Identification of benefit categories (health effects, material damage, damage to ecosystems).
- Comparison of health and environmental effects, with and without control action.
- Comparison of the estimated costs of control action and benefits.
- Sensitivity and uncertainty analysis.

Cost analysis of control action. To determine the financial burden of control action, cost assessment should include all costs of investment, operation and maintenance. This is usually not a problem for direct abatement measures at the source, which can be monetarized. It may be more difficult to determine the costs of indirect measures, such as alternative traffic plans or change in behaviour of individuals. Even when secondary air pollutants are not monitored they should be included in the CBA.

Assessment of air quality. An assessment of air quality includes information about expected air quality, both with and without control measures. Typically, the assessment is based on air quality monitoring data and dispersion modelling. The types of data requested in a CBA include pollutant concentrations (evaluated for relevant averaging times), site classification, emission data (with sufficient temporal and spatial resolution), and meteorological and topographical data relevant to the dispersion of emissions. The air quality guidelines are based on a set of health and environmental effect endpoints determined by consensus and scientific judgement. Other effects that were not included in the air quality guidelines may occur in a special local situation and may be considered in an analysis of costs and benefits.

Identification of benefit categories. Relevant benefit categories defined in existing CBAs include: mortality and morbidity due to long- and short-term exposures, climate and visibility effects, non-human biological effects, soiling and material damage (USEPA 1987a,b); total premature mortality and mortality due to respiratory and cardiovascular diseases, hospital admissions, upper and lower respiratory symptoms, symptom exacerbation among asthmatics and reduced activity days (EC DG XII 1995; GVF 1996). The quantification of benefit categories included in a CBA is a difficult task. Some indicators of diseases can be quantified, such as the use of medication, number of hospital admissions, outpatient visits or days of labour lost. Other effects, such as premature death of the elderly or excess mortality present more difficult problems. Well-being, the quality of life or the value of ecosystems may be difficult or even impossible to monetarize. The values assigned to benefit categories might differ substantially among countries due to different cultural or social attitudes. It is better, however, to include the relevant benefit categories, even if the economic assessment is uncertain or ambiguous.

Comparison of health and environmental effects. A comparison of the health and environmental benefits with and without control action, and information on exposure-response relationships, should be combined with information on air quality assessment. The combined information is applied to the population at risk. To assess the influence of air pollution, knowledge is needed of the prevalence of different health effects in the population at risk and the percent increase of health effects with one unit of pollutant concentration.

Comparison of costs and benefits. The CBA should provide a benefit-cost ratio based on monetarized costs and benefits, and be accompanied by a description of the non-monetarized items that also should be considered. Monetary valuation of control actions, and of the effects on health and the environment, may be different in concept and vary substantially from country to country. There may be differences in assessing costs, and the relative value of benefit categories can vary. The costs of environmental policy action may also vary according to the scale and level of decision making, e.g. with respect to transfer costs (taxes, subsidies aimed at redistribution of costs). Benefits may also be transferable between groups of the population. Furthermore, action taken to reduce one pollutant may increase or decrease the concentration of other pollutants. These additional effects should be considered, as well as pollutant interactions, which may lead to double counting of costs or benefits, or to disregarding some costly but necessary action. Due to different levels of knowledge about the costs of control action and the costs of health effects there is a tendency to overestimate the cost of control action and underestimate the benefits. Thus, CBAs in two areas with otherwise similar conditions may differ significantly.

Sensitivity and uncertainty analysis. In a CBA, sensitivity analysis provides valuable insight into the properties and assumptions underlying the results of the CBA. Sensitivity methods include comparison with other CBA studies, recalculation of the whole chain of CBA using other assumptions, or ranges around a central value. Sensitivity analysis has to be carefully designed and requires considerable resources.

In conclusion, CBA is a highly interdisciplinary task. Appropriately applied, CBA is a legitimate and useful way to provide information for risk managers making decisions that will affect public health and the environment. CBAs should be peer-reviewed and not be used as the sole and overriding determinant of these decisions.

7.10 Review of standard setting

The setting of standards should involve stakeholders (industry, local authorities, non-governmental organisations and the general public) that assures, as far as possible, social equity or fairness to all the parties involved. It should also provide sufficient information to guarantee that stakeholders understand the scientific and economic consequences. The earlier stakeholders are involved the more likely is their acceptance. Transparency in moving from air quality guidelines to air quality standards helps to increase public acceptance of necessary measures. Raising public awareness of air pollution-induced health and environmental effects (changing of risk perception) serves to obtain public support for necessary control action. Information to the public about the air quality during episodes, as well as the risks entailed, lead to a better understanding of the issue (risk communication).

Air quality standards should be regularly reviewed and revised as new scientific evidence on the effects on public health and the environment emerges.

7.11 Enforcement of air quality standards: Clean air implementation plans

The aim of enforcement is to attain compliance with the standards. The instruments used to achieve this goal are Clean Air Implementation Plans (CAIPs). The outline of such a plan should be defined in regulatory policies and strategies. Clean air implementation plans were formulated in several developed countries during the 1970s and 1980s. Air pollution was characterized by many sources and many different types of air pollutants. Consequently it was extremely difficult to assess the public health risks

associated with a single source or group of sources. As a consequence, on the basis of the polluters pay principle (Chapter 6), sophisticated tools were developed to assess the sources (e.g. air pollutant concentrations, health and environmental effects, control measures) and to make a causal link between emissions, air pollution and the necessary and efficient control measures. A typical clean air implementation plan (CAIP) includes:

- Description of area.
- Emissions inventory.
- Air pollutant concentrations inventory - monitored and simulated.
- Comparison of emissions and air quality standards or guidelines.
- Inventory of effects on public health and the environment.
- Causal analysis of effects and attribution to individual sources.
- Control measures and their costs.
- Transportation and land-use planning.
- Enforcement procedures.
- Resource commitment.
- Projections for the future.

Costs of public health and environmental effects have not been included in published clean air implementation plans. However, the CAIP has been a very efficient instrument of air pollution abatement in developed countries (Schwela and Köth-Jahr 1994, WHO 1997a). In the cities of developing countries, or countries in transition, much simplified CAIPs would have to be developed. The main sources of emissions in many cities of the developing world are old vehicles and some industrial sources such as power plants, brick kilns, cement factories and a few others. Their relative contribution to air pollution could be determined by use of rapid emission inventories. The emission factors used in such inventories are published (WHO 1993a 1993b), and a PC programme is available (WHO 1995; WHO 1997b; WHO 1998) that enables emissions and ambient air concentrations to be estimated, and the impact of possible control measures to be evaluated. Projections for the future can also be evaluated by the programme. By using the experience obtained in developed countries, the control action to be taken is very often obvious. As a consequence less monitoring could be sufficient, and dispersion models could help simulate spatial distributions of concentrations when little useful monitoring data are available. 0

Appendix 1 Bibliographical References

AEA 1996 Site Operator's Manual Automatic Urban Monitoring Network. AEA Technology plc, National Environmental Technology Centre, Culham, Abingdon OX14 3ED, UK and <http://www.aeat.co.uk/netcen/airqual/reports/lsoman/lsoman.html>.

AEA 1997 Instruction Manual: UK Smoke and Sulphur Dioxide Networks. Report AEAT-1806, AEA Technology plc, National Environmental Technology Centre, Culham, Abingdon OX14 3ED UK and <http://www.aeat.co.uk/netcen/airqual/reports/smkman/shead.html>.

AEA 1998 UK NO₂ Diffusion Tube Network Instruction Manual. Report AEAT – 3675, AEA Technology plc, National Environmental Technology Centre, Culham, Abingdon OX14 3ED, UK and <http://www.aeat.co.uk/netcen/airqual/reports/no2man/no2man.html>.

Albalak R, Frisancho AR, Keeler GJ 1999 Domestic biomass fuel combustion and chronic bronchitis in two rural Bolivian villages. *Thorax* 54: 1004-1008.

Alexander J, Drueke M, Traem R and Rumpel K-J. 1991 Ozon-Messungen mit SAM- kein Einfluss Meteorologischer Groessen. *Staub-Reinhaltung der Luft* 51: 307-308.

ARA-SEEBLA_CONSECOL 1990: Estudio epidemiológico sobre efectos de la contaminación atmosférica. *Enfoques a atención primaria* 5: 3-6.

Aranda CF, Astudillo P, Mancilla P, Caussade S, Girardi G, Gamboa R 1993 Monitoreo epidemiológico de los efectos de la contaminación atmosférica en las enfermedades respiratorias infantiles. Santiago de Chile Diciembre 1992. Auspiciado por Sociedad Chilena de Pediatría --UNICEF--

Arranda CF, Sanchez JM, Angulo J, Ostro B, Eskeland G 1994 Air pollution and health effects: a study of respiratory illness among children in Santiago, Chile. World Bank Report.

Atkins CHF, Sandalls J, Law DV, Hough A, Stevenson K 1986 The measurement of nitrogen dioxide in the outdoor environment using passive diffusion samplers. Environment & Medical Sciences Division Report, Harwell Laboratory, N^o AERE-R 12133, February 1986. AEA Technology plc, National Environmental Technology Centre, Culham Abingdon OX14 3ED, UK.

ATSDR 1988 The nature and extent of lead poisoning in children in the United States: A report to Congress. Agency for Toxic Substances and Disease Registry, U.S. Department of Health and Human Services, Washington DC, USA.

Barron WF, Liu J, Lam TH, Wong CM, Peters J Hedley A 1995 Costs and benefits of air quality improvement in Hong Kong. *Contemporary Economic Policy*, XIII, 105-117.

Bennett SL, Lee DS, Sandalls FJ, Nason P, Atkins DHF 1992 The measurement of sulphur dioxide in the outdoor environment using passive diffusion tube samplers: A second report. Environmental Physics Department, AEA Environment and Energy. Report N^o AEA-EE-0323, May 1992. AEA Technology plc, National Environmental Technology Centre, Culham Abingdon OX14 3ED, UK.

BMEPB 1981 Report on environmental quality of Beijing 1980. Internal report, Beijing Medical College, Beijing Municipal Environmental Protection Bureau.

Borja-Aburto VH, Loomis DP, Bangdiwala SI, Shy CM, Rascon-Pacheco RA 1997: Ozone, suspended particulates, and daily mortality in Mexico City. *American Journal of Epidemiology* 145: 258-268.

Bower JS 1997 Ambient Air Quality Monitoring, In: R. Hester and R. Harrison (eds.) *Issues in Environmental Science and Technology No.8- Air Quality Management*, UK Royal Society of Chemistry, October 1997.

Bradfield PJ, Schulz CE, Stone, MJ 1996 Regulatory approaches to environmental management. In: D.R. Mulligan (ed.) *Environmental management in the Australian minerals and energy industries*, pp. 46-73. University of New South Wales Press, Sydney, Australia.

Brenner H, Mielck A 1993 Children's exposure to parental smoking in West Germany. *International Journal of Epidemiology* 22: 818-823.

Brimblecombe P 1987 *The Big Smoke*. Routledge, London, UK.

Boy E, Delgado H, Bruce N 1999 Birth weight and exposure to kitchen wood smoke during pregnancy. Report for WHO, Child and Adolescent Health Division, Geneva.

Brunekreef B 1997 Air pollution and life expectancy: is there a relationship? *Occupational and Environmental Medicine* 54: 781-784.

CAPM 1990: . A dynamic study on the level of accumulation of harmful substances in human body in China. Chinese Academy of Preventive Medicine, Beijing.

Carless J, Broughton GFJ, Bower J 1994 Estimation of Short-term Pollutant Statistics from Measured Long-term Average Concentrations in the UK. Warren Spring Laboratory Report LR1010, AEA Technology plc, National Environmental Technology Centre, Culham Abingdon OX14 3ED, UK.

Castillejos M, Gold D, Damokosh A, Serrano P, Allen G, McDonnell WF, Dockery D, Ruiz Velasco S, Hernandez M, Hayes C 1995 Acute effects of ozone on the pulmonary function of exercising schoolchildren from Mexico City. *American Journal of Respiratory and Critical Care Medicine* 152, 1501-7.

Castillejos M, Gold D, Dockery D, Tosteson T, Baum T, Speizer F 1992 Effects of ambient ozone on respiratory function and symptoms in Mexico City schoolchildren. *American Review of Respiratory Diseases* 145, 276-282.

CFR 1993 Code of Federal Regulations, Protection of Environment, National Primary and Secondary Ambient Air Quality Standards, CFR Title 40 Part 50, Appendix J. Reference Method for the Determination of Particulate Matter as PM₁₀ in the Atmosphere. Office of the Federal Register, National Archives and Records Administration, Washington DC, USA.

Chen BH, Hong CJ, Pandey MR, Smith KR 1990 Indoor air pollution and its effects in developing countries, WHO Statistics Quarterly 43: 127-138. **000371**

Chen Xiaolin, Hong Quanjie, Tao Xuguang 1993 Effect of ambient SO₂ pollution on pulmonary function of women and children, Journal of Environment and Health 10: 152-154.

Chen Xiaolin, Hong Quanjie, Tao Xuguang 1995 Effects of ambient SO₂ pollution on respiratory local non-specific immunologic function of women, Shanghai Environmental Sciences 14: 40-42.

Chin ATH 1996 Containing air pollution and traffic congestion - transport policy and the environment in Singapore. Atmospheric Environment 30: 787-801.

Chinn S, Florey CDV, Baldwin IG, Gorgol M 1981 The Relation of Mortality in England and Wales 1969-73 to Measurements of Air Pollution. Journal of Epidemiology and Community Health 35: 174-179.

CMD 1997 Taber's Cyclopedic Medical Dictionary, edition 18, FA Davis Company, Philadelphia.

Choi KS, Inoue S, Shinozaki R 1997 Air pollution, temperature and regional differences in lung cancer mortality in Japan. Archives of Environmental Health. 52: 160-168.

Collings DA, Sithole SD, Martin KS 1990 Indoor woodsmoke pollution causing lower respiratory disease in children. Tropical Doctor 20: 151-155.

Davis MJ, Svendsgaard DJ 1987 Lead and child development. Nature 239: 297-300

Dennis RJ 1996 Woodsmoke exposure and risk for obstructive airways disease among women. Chest 109: 115-119.

Deveaux P, Kibel MA, Dempster WS, Pocock F, Formenti K 1986 Blood lead levels in preschool children in Cape Town. South African Medical Journal 69: 421-424.

Dockery, DW, Pope CA III, Xu X, Spengler JD, Ware JH, Fay ME, Ferris BG, Speizer FE 1993 An association between air pollution and mortality in six US cities. New England Journal of Medicine 329:1753-1759.

Dossing M, Khan J, Al-Rabiah F 1994 Risk factors for chronic obstructive lung disease in Saudi Arabia. Respiratory Medicine 88: 519-522.

Downing CEH, Campbell GW, Bailey JC 1994 A survey of sulphur dioxide, ammonia and hydrocarbon concentrations in the United Kingdom using diffusion tubes: July to December 1992. Warren Spring Laboratory Report, Report N^o LR 964, AEA Technology plc, National Environmental Technology Centre, Culham Abingdon OX14 3ED, UK.

EA 1997: Environment Agency, Air Quality Bureau. Report of a continuous survey of the health effects of nitrogen oxides in 1992-1995, Government of Japan.

EC 1980: Council Directive 80/779/EEC of 15 July 1980 on air quality limit values and guide

values for sulphur dioxide and suspended particulates. Official Journal of the European Communities, No. L229, 30.8.1980, p.30. **000372**

EC 1982 Council Directive of 3 December 1982 on a Limit Value for Lead in Air 82/884/EEC. Council of the European Communities, Brussels.

EC 1985 Council Directive 85/203/EEC of 7 March 1985 on air quality standards for nitrogen dioxide. Official Journal of the European Communities, No. L372, p. 36.

EC 1992 Council Directive 92/72/EEC of 12 September 1992 on air pollution by ozone. Official Journal of the European Communities, No. L297, Vol. 34.

EC 1995 Externalities on Energy, Vol. 2. Methodology. Commission of the European Communities, EUR 16521 EN, DG XII, Luxembourg.

ECA 1989: Indoor pollution by NO₂ in European countries. European Concerted Action on Indoor Air Quality and its Impact on Man, Report No. 3; Office for Official Publications of the European Communities, Luxembourg.

ECA 1990: Indoor air pollution by formaldehyde in European countries. European Concerted Action on Indoor Air Quality and its Impact on Man, Report No. 7; Office for Official Publications of the European Communities, Luxembourg.

ECA 1995: Radon in indoor air. European Concerted Action on Indoor Air Quality and its Impact on Man, Report No. 15; Office for Official Publications of the European Communities, Luxembourg.

EEA undated Air – Atmospheric Emission Inventory Guidebook. European Environment Agency, Copenhagen.

El-Samara GH, Abdel Salam MS, Zagloul A, Khalaf-Alla S 1984 Environmental pollution impacts of industrial activities in Egypt. Egyptian Journal of Occupational Medicine 8: 1-14.

El-Ashry MT 1993 Balancing economic development with environmental protection in developing and lesser developed countries. Journal of the Air and Waste Management Association 43: 18-24.

Elsom DM 1992 Atmospheric pollution. A global problem, Second Edition. Blackwell, Oxford, UK.

EN 1999 Air quality. Determination of the PM₁₀ fraction of suspended particulate matter. Reference method and field test procedure to demonstrate reference equivalence of measurement methods – EN 12341. Available as BS EN 12341 from BSI 389 Chiswick High Road, London, W4 4AL or as a national standard from any CEN member country.

Evans J, Wolff S 1996 Modeling of air pollution impacts: one possible explanation of the observed chronic mortality. In: Wilson R, Spengler J (eds) Particles in Our Air: Concentrations and Health Effects. Harvard University Press, pp. 189-204.

Faiz A, de Lardere JA 1993 Automotive air pollution in developing countries: outlook and control strategies. *The Science of the Total Environment*. 134: 325-334.

Faiz A, Sinha K, Walsh M, Valma A 1990 Automotive air pollution: issues and options for developing countries. WPS 492, World Bank, Washington, USA.

Fang Qisheng et al. 1991 Toxicity of ozone and a study on environment and health criteria, Internal Report.

Ferm M 1991 A Sensitive Diffusional Sampler. Report No. IVL B-1020, Swedish Environmental Research Institute, IVL Biblioteket, Stockholm, Sweden.

Ferrari L, Chowdhury B, Younes M 1995 Indoor air pollution in developing countries – what are the problems and how can they be resolved? In: L. Morawska, N.D. Bofinger and M. Maroni (eds.) *Indoor air: An integrated approach*, pp. 27-28, Elsevier, Oxford, UK.

Folinsbee LJ 1991 Effects of single and repeated prolonged low-level ozone exposure in man. Presented at the Society for Occupational and Environmental Health on Health effects of air pollution: Impact of clean air legislation. March 25-27 1991. Crystal City, VA pp. 42-43.

Gerboles M, Amantini L 1993 Validation of measurement by NO₂ passive sampler a comparison with chemiluminescent monitor. Technical note TNI/93/107, Atmospheric Chemistry Unit, Ispra.

GMEPB 1980 Report on environmental quality of Guangzhou, Guangzhou Municipal Environmental Protection Bureau.

Gonzales-Cossio T, Peterson KE, Sanin LE, Fishbein E, Palazuelos E, Aro A, Hernandez-Avila M, Hu Howard 1997 Decrease in birth weight in relation of maternal bone lead burden. *Pediatrics* 100: 856-62.

Griffin RD 1994 Principles of air quality management. Lewis Publishers, Boca Raton, FL, USA.

Grosjean, D, Hisham, MWM 1992 A passive sampler for atmospheric ozone. *Journal of the Air and Waste Management Association* 42: 169-173

Gupta BN, Mathur N, Mahendra PN, Srivastava AK 1997 A study of the household environmental risk factors pertaining to respiratory diseases. *Energy Environment Review* 13:61-67.

GVF 1996: Monetarisierung der verkehrsbedingten externen Gesundheitskosten (Monetarisierung of health costs due to traffic) Studie im Auftrag des Dienstes für Gesamtverkehrsfragen des Eidg. Verkehrs- und Energiewirtschafts-departementes, Synthesebericht, 10. Mai 1996, ECOPLAN Wirtschafts und Umweltstudien, GVF-Auftrag Nr. 272, Bern.

Hackney JD, Linn WS, Mohler JG, Collier CR 1977 Adaptation to short-term respiratory effects of ozone in men exposed repeatedly. *Journal for Applied Physiology* 43, 82-85.

Hall JV 1995 Air quality policy in developing countries. *Contemporary Economic Policy*, XIII, 77-85.

Hangartner M, Burri P, Monn C 1989 Passive Sampling of Nitrogen Dioxide, Sulphur Dioxide and Ozone in Ambient Air. *Proceedings of the 4th World Clean Air Congress*, Hague, the Netherlands, September 1989, Vol. 3, pp. 661-666.

Hardie RW, Thayer GR, Barreraroldan A 1995 Development of a methodology for evaluating air pollution options for improving the air quality in Mexico City, *Science of the Total Environment* 169: 295-301.

Hargreaves, KJ, Atkins DHF 1988 The measurement of sulphur dioxide in the outdoor environment using passive diffusion tube samplers: A first report. Environmental and Medical Sciences Division, Harwell Laboratory. Report N^o AERE-R-12569, July 1988. AEA Technology plc, National Environmental Technology Centre, Culham Abingdon OX14 3ED, UK.

Hashimoto M 1989 History of air pollution control in Japan. In: H. Nashimura (ed.) *How to conquer air pollution: a Japanese experience*, pp. 1-93, Elsevier, Amsterdam.

He Xingzhou et al. 1984 Compilation of survey information 1976-1981 on air pollution and mortality of residents in 26 cities of China.

Hofmeister VA 1987 The effects of air pollution at different seasons on lung function in Fischer normal school children. Sao Paulo. University of Sao Paulo. Department of Environmental Health.

Holmes G, Singh BR, Theodore L 1993 *Handbook of Environmental Management and Technology*, Wiley, New York.

Hong CJ 1995 Global burden of diseases from air pollution, unpublished

Hussein, A. S.A. 1988: Possible Effect of Air Pollution on Preparatory School Children. M.Sc. Thesis, Faculty of Medicine, Cairo, Egypt.

Ilabaca Marileo MA 1996 Relación entre la contaminación atmosférica y las consultas por emergencias respiratorias pediátricas, en el servicio de urgencia del hospital Luis Calvo Mackenna, en Santiago de Chile. Tesis. Instituto Nacional de Salud Publica, Cuernavaca, Mexico, Diciembre 1996.

ISO 1979 Air Quality- Determination of gaseous sulphur compounds in ambient air- Sampling equipment. International Standard ISO 4219. International Organization for Standardization, Geneva, Switzerland.

ISO 1980 Ambient air - Determination of the mass concentration of sulfur dioxide in ambient air - Thorin spectrophotometric method. International Standard ISO 4221. International Organization for Standardization, Geneva, Switzerland.

ISO 1983 Ambient air - Determination of a gaseous acid air pollution index - Titrimetric method with indicator or potentiometric end-point detection. International Standard ISO 4220. International Organization for Standardization, Geneva, Switzerland.

ISO 1985a Ambient Air Determination of mass concentration of nitrogen dioxide - Modified Griess-Saltzman Method. International Standard ISO 6768. International Organization for Standardization, Geneva, Switzerland .

ISO 1985b Ambient Air Determination of mass concentration of nitrogen oxides - Chemiluminescence method. International Standard ISO 7996. International Organization for Standardization, Geneva, Switzerland.

ISO 1989 Ambient air - Determination of the mass concentration of carbon monoxide: Gas chromatographic method, 8186. International Organization for Standardization, Geneva, Switzerland.

ISO 1990 Ambient air - Determination of the mass concentration of sulfur dioxide - Tetrachloromercurate TCM / pararosaniline method. International Standard ISO 6767. International Organization for Standardization, Geneva, Switzerland.

ISO 1993a Ambient Air- Determination of the Mass Concentration of Ozone- Chemiluminescence Method. International Standard ISO 10313. International Organization for Standardization, Geneva, Switzerland.

ISO 1993b Ambient air - Determination of the particulate lead content of aerosols collected in filters. Atomic absorption spectroscopy method. International Standard ISO 9855 E . International Organization for Standardization, Geneva, Switzerland.

ISO 1995 Air quality - Particle size fraction definitions for health-related sampling. International Standard ISO 7708. International Organization for Standardization, Geneva, Switzerland.

ISO 1996a Environmental management systems - Specification with guidance for use. ISO 14001. International Organization for Standardization, Geneva, Switzerland.

ISO 1996b Environmental management systems - General guidelines on principles, systems and supporting techniques. International Standard ISO 14004. International Organization for Standardization, Geneva, Switzerland.

ISO/FDIS 1999a Ambient air - Determination of carbon monoxide - Non-dispersive infrared spectrometric method. International Standard ISO/FDIS 4224. International Organization for Standardization, Geneva, Switzerland.

ISO/FDIS 1999b Ambient air - Measurement of particulate matter on a filter medium - Beta-ray absorption method. International Standard ISO/FDIS 10473. International Organization for Standardization, Geneva, Switzerland.

ISO/DIS 1999 Ambient air—Determination of sulfur dioxide—Ultraviolet fluorescence

method. International Standard ISO/DIS 10498. International Organization for Standardization, Geneva, Switzerland.

Junker A, Schwela D 1998 Air quality guidelines and standards based on risk considerations. In: Papers of the 11th World Clean Air and Environment Congress, Vol. 6, paper 17D1, National Association for Clean Air, South Africa.

Kamat SR, Doshi VB 1987 Sequential health effects study in relation to air pollution in Bombay, *European Journal of Epidemiology* 3: 265-277.

Kamat SR, Patil JD, Gregart J, Dalal N, Deshpande JM, Hardikar-P 1992 Air pollution related respiratory morbidity in central and north-eastern Bombay. *Journal of the Association of Physicians of India* 40: 588-593.

Kato N, Akimoto H 1992 Anthropogenic emissions of SO₂ and NO_x in Asia: emissions inventories. *Atmospheric Environment* 26A: 2997-3017.

Kling CL 1994 Emission trading vs. rigid regulation in the control of vehicle emissions, *Land Economics* 70: 174-188.

Koutrakis P, Wolfson JM, Slater JL, Mulik JD, Kronmiller KJ and Williams DD 1990 Measurements of Ozone Exposure. Proceedings of the 1990 EPA-AWMA International symposium on Measurement of Toxic and related Air Pollutants. Pittsburgh, pp 468-474.

Lawther PJ. In: S. M. Farber , R.H.L. Wilson (eds.) 1961 *The air we breathe, a study of man and his environment*, Springfield, Illinois: Charles C Thomas, p. 235.

Lee K, Yanagisawa Y, Hishinuma M, Spengler JD, Billick IH 1992 A Passive Sampler for Measurement of Carbon Monoxide using a Solid Adsorbent. *Environmental Science and Technology* 26: 697-702.

Li Xiuyun, Liu Xuhong, Yhao Wuhong, Hou Yihui 1992 A study on mutagenicity of air particulates with different diameters in residential quarter, *Chinese Environmental Science* 12: 365-368.

Lippmann M 1989 Health effects of ozone - A critical review, *Journal of the Air Pollution Control Association*. 39: 672-695.

Lippmann M 1993 Health effects of tropospheric ozone: review of recent research findings and their implications to ambient air quality standards. *Journal of Exposure Analysis and Environmental Epidemiology* 3:103-129.

Lippmann M 1999 Air pollution and health - studies in North America and Europe. In: G. McGranahan and F. Murray (eds.) *Health and Air Pollution in Developing Countries*. Background document for a Policy Dialogue on Health and Air Pollution in South Asia, EPTRI, Hyderabad, India. Stockholm Environment Institute, Stockholm, Sweden.

Lippmann M, Ito K 1995 Separating the effects of temperature and season on daily mortality from those of air pollution in London: 1965-1972. In: R.F. Phalen and D.V. Bates (eds.)

Proceedings of the Colloquium on particulate air pollution and human mortality and morbidity, pp. 85-97; *Inhalation Toxicology* 7: no. 1.

Liu Jifang, Xiuyhi, Tong Dexue, Yhang Yuanlin, Han Yonglin, Wu Yingping, Chen Weimin,, Wang Chunying 1992 Effects of CO pollution in classrooms on COHb and immunologic level in primary school children. *Public Health Research* 21: 250-251.

Mavalankar DV, Trivedi CR, Gray RH 1991 Levels and risk factors for perinatal mortality in Ahmedabad. *India Bulletin WHO* 69: 435-442.

Mishra VK, Retherford RD, Smith KR 1999a Biomass cooking fuels and prevalence of Tuberculosis in India. *International Journal of Infectious Diseases* 3:119-129.

Mishra VK, Retherford RD, Smith KR 1999b Cooking with biomass fuels increase the risk of blindness. *National Family Health Survey Bulletin* Bulletin, No.14.

Miyao M. Furuta M. Ozawa K. Kondo T. Sakakibara H. Ishihara S. and Yamanaka K. 1993. Morbidity of allergic rhinitis based on the national health insurance records of Japan. *Tohoku Journal of Experimental Medicine* 169: 345-350,

Mohan M, Sperduto, RD, Angra SK, Milton RC, Mathur RL, Underwood BA, Jaffery N, Pandya CB, Chhabra VK, Vajpayee RB 1989. India-US case control study of age-related cataracts. *Archives of Ophthalmology* 107: 670-676.

Molina Esquivel E, Barcelo Perez C, Ceballo Delgado R 1989 Contaminantes primarios de la atmósfera, temperatura del aire, enfermedad respiratoria aguda y asma bronchial en niños. *Revista Cubana* 61: 215-227.

Monn C, Hangartner M 1990: Passive Sampling for Ozone, *Journal of the Air and Waste Management Association* 40: 357-358.

Morgan G, Corbett S, Wlodarczyk J 1998 Air pollution and hospital admissions in Sydney, Australia 1990 to 1994, *American Journal of Public Health* 88: 1762-1766.

Mtango FD, Neuvians D, Broome CV, Hightower AW, Pio A 1992 Risk factors for deaths in children under 5 years old in Bagamoyo district, Tanzania. *Tropical Medicine and Parasitology* 43: 229-233.

Muñoz H, Romieu I, Palazuelos E, Macilla Sanchez T, Meneses Gonzalez F 1993 Blood lead level and neurobehavioral development among children in Mexico City. *Archives of Environ Health* 48: 132-139.

Murray F 1997 Urban air pollution and health effects. In: D. Brune, D.V. Chapman, M.D. Gwynne, J.M. Pacyna (eds.) *The Global Environment*, pp. 585-598, Scandanavian Science Publisher, VCH, Weinheim, Germany.

Murray CJL, Lopez, AD (eds.) 1996 *The Global Burden of Disease. A comprehensive assessment of mortality and disability from diseases, injuries, and risk factors in 1990 and projected to 2020*. Harvard School of Public Health, Harvard University Press.

- Nakai S, Nitta H, Maeda K 1995 Respiratory health associated with exposure to automobile exhaust. II. Personal NO₂ exposure levels according to distance from the roadside, *Journal of Exposure Analysis and Environmental Epidemiology* 5: 125-136.
- Nasralla MM 1992 A Report on Air Pollution and Noise in Egyptian Cities, Egyptian Environmental Affairs Agency, Cairo, Egypt.
- Nasralla MM 1997 Carcinogenic, toxic and microbial contaminants in Cairo air, Final Report, Academy of Science and Technology, Cairo, Egypt.
- Needleman HL, Gatsonis CA 1990 Low-level lead exposure and the I.Q. of children: A meta-analysis of modern studies. *The Journal of the American Medical Association* 263: 673-678.
- Nitta H, Sato T, Nakai S, Maeda K, Aoki S, Ono M 1993 Respiratory health associated with exposure to automobile exhaust. I. Results of cross-sectional studies in 1979 1982, and 1983, *Archives of Environmental Health* 48: 53-58.
- O' Dempsey T, McArdle TF, Morris J, Lloyd-Evans N, Baldeh L, Laurence BE, Secka O, Greenwood BM. 1996 A study of risk factors for pneumococcal disease among children in a rural area of west Africa. *International Journal of Epidemiology* 25: 885-93.
- OECD 1991. The state of the environment. Organization for Economic Cupertino and Development, Paris, France.
- Ono M, Murakami M, Nitta H, Nakai S, Maeda K 1990 Epidemiological studies of air pollution and health effects in area near roadways with heavy traffic in Tokyo, *Japanese Journal of Public Health* 37: 321-332.
- Opperman L, Nel CM, Bekker PJ, Booyens U, Terblanche APS 1993 Total suspended particulate levels and prevalences of upper respiratory illnesses in the Vaal Triangle, south Africa. Presentation at the 86th Annual Meeting & Exhibition of the Air & Waste Management Association, June 13-18, Denver, Colorado, USA.
- O'Ryan RE 1996 Cost-effective policies to improve urban air quality in Santiago, Chile. *Journal of Environmental Economics and Management* 31: 302-313.
- Ostro BD, Eskeland GS, Sanchez JM, Feyzioglu T 1999 Air pollution and health effects: A study of medical visits among children in Santiago, Chile. *Environmental Health Perspectives* 107: 69-73.
- Ostro BD, Sanchez J.M. Aranda C., Eskeland G 1996 Air pollution and Mortality: Results from a study in Santiago, Chile. *Journal of Exposure Analysis and Environmental Epidemiology* 6: 97-114.
- Palmes ED, Gunnison AF, DiMattio J, Tomczyk C 1976 Personal sampler for nitrogen dioxide. *American Industrial Hygiene Association Journal* 37: 570-577.
- Pandey MR 1984 Domestic smoke pollution and chronic bronchitis in a rural community of the hill region of Nepal. *Thorax* 39: 337-339.

Pandey MR, Neupane RP, Gautam A, Shrestha IB 1989 Domestic smoke pollution and acute respiratory infections in a rural community. *Environment International* 15: 337-340.

Pearce D 1996 Economic valuation and health damage from air pollution in the developing world, *Energy Policy* 24: 627-630.

Penna MLF Duchiate MP 1991 Contaminación del aire y mortalidad infantil for neumonia. *Boletín Oficial Sanidad Panamericana* 110: 199-206.

Pershagen G, Akerblom G, Axelson O, Clavensjö B, Damber L, Desai G, Enflo A, Lagarde F, Mellander H, Svartengren M, Swedjemark GA 1994 Residential radon exposure and lung cancer in Sweden. *New England Journal of Medicine* 330: 159-164.

Pope CA III, Bates DV, Raizenne ME 1995 Health effects of particulate air pollution: Time for reassessment. *Environ Health Perspectives* 103: 472-480.

Pope CA III, Thun MJ, Namboodiri MM, Dockery DW, Evans JS, Speizer FE, Heath CW 1995 Particulate air pollution as a predictor of mortality in a prospective study of US adults. *American Journal of Respiratory and Critical Care Medicine* 151: 669-674.

Portney PR 1990 Air pollution policies. In: P.R. Portney (ed.) *Public policies for environmental protection*, pp. 27-96. Resources for the Future, Washington, D.C. USA.

Qin Yuhui, Fu Yhenying, Pei Xiukun, Jin Huiyhi, Liu Suyan, Yang Airong, Yin Xianren, Tao Yong, Li Shuanli, Yin Chunfu, Guo Baiming, Cao Zhaojin, Wang Xianren 1990 Effects of indoor pollution on the respiratory illnesses of children, *Journal of Environment and Health* 7: 198-201.

Romieu I, Carreaon T, Lopez L, Palazuelos E, Rios C, Manuel Y, Hernandez-Avila M 1995 Environmental urban lead exposure and blood lead levels in children of Mexico City. *Environ Health Perspectives* 103: 1036-1040.

Romieu I, Cortes Lugo M, Ruiz Velasco S, Sanchez S, Meneses F, Hernandez M 1992 Air pollution and school absenteeism among children in Mexico City. *American Journal of Epidemiology* 136: 1524-31.

Romieu I, Meneses F, Ruiz S, Huerta J, Sienna JJ, White M Etzel R, Hernandez-Avila M 1997 Effects of intermittent ozone exposure on peak expiratory flow and respiratory symptoms among asthmatic children in Mexico City. *Archives of Environmental Health* 52: 368-376.

Romieu I, Meneses F, Ruiz S, Sienna JJ, Huerta J, White MC, Etzel RA 1996 Effects of air pollution on the respiratory health of asthmatic children living in Mexico City. *American Journal of Respiratory and Critical Care Medicine* 154: 300-307.

Romieu I, Meneses F, Sienna-Monge JJ, Huerta J, Ruiz-Vleasco S, White M, Etzel R, Hernandez M 1995 Effects of urban air pollution emergency visits for childhood asthma in Mexico City. *American Journal of Epidemiology* 141: 546-553.

Romieu I, Palazuelos E, Meneses F, Hernandez-Avila 1992 Vehicular traffic as a determinant of blood-lead levels in children: A pilot study in Mexico City. *Archives of Environmental Health* 47: 246-249.

Saldiva PHN, Pope CA III, Schwartz J, Dockery DW, Lichtenfelds AJ, Salge JM, Barone Y, Bohm GM 1995 Air pollution and mortality in elderly people: a time series study in Sao Paulo, Brazil. *Archives of Environmental Health* 50: 159-164.

Salem MM 1990 Occupational cardio-respiratory disturbances in traffic police and taxi drivers in Cairo, M.D. Thesis, Faculty of Medicine, Cairo, Egypt.

Saltzman BE, Caplan PE 1995 Detector tubes, direct-reading passive badges and dosimeter tubes. In B.S. Cohen, S.V. Hering (eds.) *Air Sampling Instruments for evaluation of atmospheric contaminants*, 8th edition, pp. 401-437, ACGIH, Cincinnati, Ohio, USA.

Samet JM, Yeger SL, Berhane K 1995 The association of mortality and particulate air pollution. In: *Particulate Air Pollution and Daily Mortality, Replication and validation of selected studies, the Phase I Report of the Particle Epidemiology Evaluation Project*, Health Effects Institute, Washington DC, USA.

Sanchez-Cortez J 1997 Contaminación atmosférica y síntomas respiratorios en niños escolares del area de influencia del complejo industrial-Las Ventanas, Puchuncavi, V Region de Chile. Tesis. Instituto Nacional de Salud Publica, Cuernavaca, Mexico. Julio 1997.

Sandoval J, Salas J, Martinez-Guerra ML, Gomez A, Martinez C, Portales A, Palomar A, Villegas M, Barrios R 1993 Pulmonary arterial hypertension and cor pulmonale associated with chronic domestic woodsmoke inhalation. *Chest* 103: 12-20.

Schwartz J, Marcus A 1990 Mortality and air pollution in London. A time series analysis. *American Journal of Epidemiology* 131: 185-194.

Schwartz J, Spix C, Touloumi G, Bachárová L, Barumamdzadeh T, le Tertre A, Piekarksi T, Ponce de Leon A, Pönkä A, Rossi G, Saez M, Schouten JP 1996 Methodological issues in studies of air pollution and daily counts of deaths or hospital admissions. *Journal of Epidemiology and Community Health* 50 Suppl. 1: S3-S11.

Schwartz J, Zeger S 1990 Passive smoking, air pollution and acute respiratory symptoms in a diary study of student nurses. *American Review of Respiratory Diseases* 36: 62-67.

Schwela, DH, Junker A 1978 Derivation of air quality standards on the basis of risk considerations, *Water, Air, and Soil Pollution* 10: 255-268.

Schwela DH, Köth-Jahr I 1994 Leitfaden für die Aufstellung von Luftreinhalteplänen (Guidelines for the implementation of clean air implementation plans), Report No. 4, Landesumweltamt Nordrhein Westfalen, Germany.

Schwela DH 1996a Exposure to environmental chemicals relevant for respiratory hypersensitivity: global aspects, *Toxicology Letters* 86: 131-142.

- Schwela DH 1996b Health effects and exposure to indoor air pollution in developed and developing countries, Indoor Air '96, Proceedings of the 7th International Conference in Indoor Air Quality and Climate, Vol. 1, pp. 9-20.
- Schwela DH 1998 Health and Air Pollution - A Developing Country's Perspective, In: 11th World Clean Air and Environment Congress, Durban, South Africa, 13-18 September 1998, vol. 1, Paper 1A.
- Seifert B 1993 Innenräume. In: H.E. Wichmann, H.E. et al. (eds.) Handbuch der Umweltmedizin, ECOMED Fachverlag, Landsberg.
- SERPLAC 1989 Epidemiological study of the effects of atmospheric pollution. Santiago, Secretarias Regionales de Planificación y Coordinación. In Spanish.
- Sexton K 1993 An introduction to risk-based priority setting: Toward a conceptual framework for analysis. In: Proceedings of the Symposium on Comparative Risk Analysis and Priority Setting of Air Pollution Issues, Air and Waste Management Association, Keystone, CO, USA.
- Sheldon C 1997 ISO 14001 and beyond; environmental management systems in the real world. Greenleaf Publishing, Sheffield, UK.
- Shields PG, Xu GX, Blot WJ 1995 Mutagens from heated Chinese and U.S. cooking oils. *Journal of the National Cancer Institute* 87: 836-841.
- Shima M, Adachi M 1996 Serum immunoglobulin E and hyaluronate levels in children living along major roads, *Archives of Environmental Health* 51: 425-430.
- Simpson RW, Williams G, Petroeschevsky A, Morgan G, Rutherford S 1997 Associations between outdoor air pollution and daily mortality in Brisbane, Australia. *Archives of Environmental Health*. 52: 442-454.
- Smith KR 1987 Biofuels, air pollution and health.: A global review. Plenum Press, New York City, USA.
- Smith KR 1993 Fuel combustion, air pollution and health: the situation in developing countries. *Annual Review of Energy and Environment* 18: 529-566.
- Smith KR 1996 Indoor air pollution in developing countries: Growing evidence of its role in the global disease burden. In: K. Ikeda and T. Iwata, Indoor Air '96. Published by the Organizing Committee of the 7th International Conference on Indoor Air Quality and Climate, SEEC ISHIBASHI Inc., Japan.
- Smith KR, Liu Y 1994 Indoor Air Pollution in Developing Countries. In J. Samet (ed.) *Epidemiology of Lung Cancer*, Marcel Dekker, New York, pp. 151-184.
- Smith S, Bush T, Stevenson KJ, Moorcroft S 1997 Validation of Nitrogen Dioxide Diffusion Tube Methodology. Stanger Science and Environment and AEA Technology, National Environmental Technology Centre, Lansdowne Building, Lansdowne Rd, Croydon, CR0

2BX, UK and <http://www.aeat.co.uk/netcen/airqual/reports/valid/nvalid.html>.

SMMS 1981 Internal Report on environmental quality of Shenyang. Shenyang Municipal Monitoring Station.

Spektor DM, Hofmeister VA, Araxo P, Braque JAP, Echelar F, Nogueira DP, Hayes C, Thurston GD, Lippmann M 1991 Effects of heavy industrial pollution on respiratory function in the children of Cubatao Brazil: A preliminary report. *Environmental Health Perspectives* 94: 51-54.

Stevenson KJ, Bush T UK Nitrogen Dioxide Survey Annual Report

1993 Report N^o AEA/CS/RAMP/16419032/002.

1994 Report AEA/0085, ISBN 0 7058 1711 3

1995 Report AEA/20181001/002, ISBN 0 7058 1730 X

1996 Report AEAT - 2779, ISBN 0 7058 1760 1

1997 Report AEAT - 4565, ISBN 0 7058 1774 1

AEA Technology plc, National Environmental Technology Centre, Culham Abingdon OX14 3ED, UK and <http://www.aeat.co.uk/netcen/airqual/reports/>.

Suess MJ 1992 Indoor air quality. A contribution to the WHO/EURO/ECEH book *Concern for Europe's Tomorrow* (Chapter 6 on Air Pollution). WHO Regional Office for Europe, Copenhagen.

Tellez-Rojo MM, Romieu I, Pena MP, Ruiz-Velasco S, Meneses-Gonzales F, Hernandez-Avila M 1997 Efecto de la contaminación ambiental sobre las consultas por infecciones respiratorias en niños de la Ciudad de Mexico, *Salud Publica de Mexico* 39: 513-522.

Terblanche APS, Opperman L, Nel CME, Reinach SG, Tosen G, Cadman A 1992 Preliminary results of exposure measurements and health effects of the Vaal Triangle Air Pollution Health Study. *South African Medical Journal* 81:550-556.

Terblanche APS, Opperman L, Nel R, Pols A 1993 Prevalence of respiratory illnesses in different regions of South Africa. *Clean Air Journal* 8. 18-20.

UNCED 1992 Agenda 21: Programme of Action for Sustainable Development, United Nations Conference on Environment and Development, 3-14 June 1992, Rio de Janeiro, Brazil.

UNECE 1995 Strategies and policies for air pollution abatement. Economic Commission for Europe. United Nations, New York and Geneva 1995.

UNECE 1999 Strategies and policies for air pollution abatement. Major Review. Economic Commission for Europe. United Nations, New York and Geneva 1999.

UNEP/WHO 1992 Urban air pollution in megacities of the world. Blackwell, Oxford, UK.

UNEP/WHO 1993 GEMS/AIR Global Environment Monitoring System: A Global Programme for Urban Air Quality Monitoring and Assessment, WHO/PEP 93.7, UNEP/GEMS/93.A.1, United Nations environment Programme, Nairobi, Kenya.

UNEP/WHO 1994a GEMS/Air Methodology Review Handbook Series, Vol.1- Quality Assurance in Air Quality Measurements. WHO/EOS/94.1, UNEP /GEMS /94.A.2, United Nations Environment Programme, Nairobi, Kenya, World Health Organization, Geneva, Switzerland.

UNEP/WHO 1994b: GEMS/Air Methodology Reviews Vol. 4: Passive and Active Sampling Methodologies for Measurement of Air Quality. WHO/EOS 94.4, UNEP /GEMS/94.A.5, United Nations Environment Programme, Nairobi, Kenya, World Health Organization, Geneva, Switzerland.

UNEP/WHO 1994c: GEMS/Air Methodology Reviews Vol. 3. Measurement of Suspended Particulate matter in Ambient Air. WHO/EOS 94.3, UNEP/GEMS/94.A.4, United Nations Environment Programme, Nairobi, Kenya, World Health Organization, Geneva, Switzerland.

UNEP/WHO 1996 Air quality management and assessment capabilities in 20 major cities. United Nations Environment Programme, Nairobi, Kenya, World Health Organization, Geneva, Switzerland.

USEPA 1985 and supplements. Compilation of air pollutant emission factors, Volumes I and II. National Technical Information Service, Springfield, VA, USA.

USEPA 1987a and supplements. Compilation of air pollutant emission factors for selected toxic compounds. National Technical Information Service, Springfield, VA, USA.

USEPA 1987b Draft regulatory impact analysis on the national ambient air quality standard for sulphur dioxide, United States Environmental Protection Agency, Washington DC, USA.

USEPA 1995a National air pollutant emission trends 1994. Report number EPA-454/R-95-014. USEPA Office of Air Quality Planning and Standards. Research Triangle Park, NC, USA.

USEPA 1995b Air Chief. United States Environmental Protection Agency, Washington DC.

USEPA 1996 Air quality criteria for particulate matter. Volume 1. US Environmental Protection Agency, Research Triangle Park, N.C. (April 1996) EPA/600/P-95/001aF.

von Schirnding Y 1989 Reducing environmental lead exposure - time to act.(Editorial). South African Medical Journal 76: 293-294.

von Schirnding Y, Bradshaw D, Fuggle R, Stokol M 1991 Blood lead levels in inner-city South African Children. Environmental Health Perspectives 94:125-130.

Waller RE 1971 Air pollution and community health. Journal of the Royal College of Physicians 5: 362-368.

Wang Jin , Chen Bingheng 1989 Effect of indoor and outdoor air pollution on pupil's immune function, Journal of Environment and Health 6: 1- 4.

- Wang Lihua, Xu Xiping, Yhou Yufen, Yhang Jinliang, Yeng Bing, Du Xinghui, Chen Aiwu, Huang Xiaofeng 1994 Relationship between air pollution and changes in children's peak expiratory flow. *Journal of Environment and Health*, 11: 243-246.
- Ward DE 1999 Smoke from wildland fires. Background paper contributed to the WHO-UNEP-WMO Workshop "Health Guidelines for Episodic Forest Fire Events, 6-9 October 1998, Lima, Perú. In press.
- WCEDC 1987 *Our Common Future*. World Commission on Environment and Development. United Nations, New York, USA.
- Webster 1994 *Webster's New Encyclopedic Dictionary*. Könnemann, Cologne, Germany.
- Wellburn A 1988 *Air pollution and acid rain - the biological impact*. Longman, Harlow, UK.
- Westman WE 1985 *Ecology, impact assessment and environmental planning*. Wiley, New York.
- WHO 1958 *Air Pollution. Fifth Report of the Expert Committee on environmental Sanitation, Technical Report Series No. 157*. World Health Organization, Geneva.
- WHO 1964 *Atmospheric Pollutants. Report of a WHO Expert Committee, Technical Report Series No. 271*. World Health Organization, Geneva.
- WHO 1972 *Air quality criteria and guides for urban air pollutants. Report of a WHO Expert Committee, Technical Report Series No. 506*. World Health Organization, Geneva.
- WHO 1979a *Sulfur oxides and suspended particulate matter. Environmental Health Criteria No. 8*. World Health Organization, Geneva.
- WHO 1980 *Glossary on Air Pollution. WHO Regional Publications, European Series No. 9*. World Health Organization, Regional Office for Europe, Copenhagen.
- WHO 1987 *Air Quality Guidelines for Europe. WHO Regional Publications, European Series No. 23*. Regional Office for Europe, World Health Organization, Copenhagen, Denmark.
- WHO 1990a *2-Methoxyethanol, 2-Ethoxyethanol, and their acetates. Environmental Health Criteria 115*. World Health Organization, Geneva.
- WHO 1990b *1-Propanol. Environmental Health Criteria 102*. World Health Organization, Geneva.
- WHO 1990c *2-Propanol. Environmental Health Criteria 103*. World Health Organization, Geneva.
- WHO 1991a *Chlorobenzenes other than hexachlorobenzene. Environmental Health Criteria 128*. World Health Organization, Geneva.
- WHO 1991b *Hexachlorocyclopentadiene. Environmental Health Criteria 120*. World Health Organization, Geneva.
- WHO 1992a *Air quality guidelines in the European region. EUR/ICP/CEH 079/A. Regional Office for Europe, World Health Organization, Copenhagen, Denmark.*

WHO 1992b Acrolein. Environmental Health Criteria 127. World Health Organization, Geneva.

WHO 1992c Indoor air pollution from biomass fuel. WHO/PEP/92-3 A. World Health Organization, Geneva.

WHO 1993a Assessment of Sources of Air, Water, and Land Pollution, Part One: Rapid Inventory Techniques in Environmental Pollution; by Alexander Economopoulos. WHO/PEP/GETNET/93.1-A, World Health Organization, Geneva.

WHO 1993b Assessment of Sources of Air, Water, and Land Pollution, Part Two: Approaches for Consideration in formulating Environmental Control Strategies; by Alexander Economopoulos, WHO/PEP/GETNET/93.1-B, World Health Organization, Geneva.

WHO 1994a. Updating and Revision of the Air Quality Guidelines for Europe - Inorganic air pollutants. EUR/ICP/EHAZ 94 05/MT04. Regional Office for Europe, World Health Organization, Copenhagen, Denmark.

WHO 1994b Chloroform. Environmental Health Criteria 163. World Health Organization, Geneva.

WHO 1994c Assessing Human Health Risks of Chemicals: Derivation of Guidance Values for Health-based Exposure Limits. Environmental Health Criteria 170. World Health Organization, Geneva.

WHO 1995a Updating and Revision of the Air Quality Guidelines for Europe - "Classical" air pollutants. EUR/ICP/EHAZ 94 05/PB01, Regional Office for Europe, World Health Organization, Copenhagen, Denmark.

WHO 1995b Updating and Revision of the Air Quality Guidelines for Europe -PCBs, PCDDs, PCDFs. EUR/ICP/EHAZ 94 05/MT10. Regional Office for Europe, World Health Organization, Copenhagen, Denmark.

WHO 1995c Updating and Revision of the Air Quality Guidelines for Europe - Ecotoxic effects. EUR/ICP/CEH230/B. Regional Office for Europe, World Health Organization, Copenhagen, Denmark.

WHO 1995d Acetaldehyde. Environmental Health Criteria 167. World Health Organization, Geneva.

WHO 1995e Cresols. Environmental Health Criteria 168. World Health Organization, Geneva.

WHO 1995f Isophorone. Environmental Health Criteria 174. World Health Organization, Geneva.

WHO 1995g Methyl Bromide. Environmental Health Criteria 166. World Health Organization, Geneva.

WHO 1995h Decision Support System for Industrial Pollution Control DSS IPC. PC Programme for the assessment of air emission inventories, liquid and solid waste inventories, estimation of pollution in air, water, and soil. PAHO/World Bank 1995.

WHO 1995i Concern for Europe's Tomorrow – Health and the Environment in the WHO European Region. WHO European Centre for Environment and Health. [Published on behalf of the World Health Organization Regional Office for Europe]. Wissenschaftliche Verlagsgesellschaft mbH, Stuttgart.

WHO 1996a Updating and Revision of the Air Quality Guidelines for Europe - Volatile organic compounds. EUR/ICP/EHAZ 94 05/MT12. Regional Office for Europe, World Health Organization, Copenhagen, Denmark.

WHO 1996b Diesel fuel and exhaust emissions. Environmental Health Criteria 171. World Health Organization, Geneva.

WHO 1996c Ethylbenzene. Environmental Health Criteria 186. World Health Organization. Geneva.

WHO 1997a Health and Environment in Sustainable Development - Five years after the Earth Summit. World Health Organization, Geneva.

WHO 1997b Healthy Cities Air Management Information System, AMIS 1.0. CD ROM. World Health Organization, Geneva.

WHO 1997c Nitrogen Oxides. Environmental Health Criteria 188. World Health Organization, Geneva.

WHO 1997d Acrylic acid. Environmental Health Criteria 191, World Health Organization. Geneva.

WHO 1997e Di-n-butylphthalate. Environmental Health Criteria 189. World Health Organization, Geneva.

WHO 1997f Methanol. Environmental Health Criteria 196. World Health Organization, Geneva.

WHO 1997g Xylenes. Environmental Health Criteria 190. World Health Organization, Geneva.

WHO 1998a Guidance for Setting Air Quality Standards. EUR/ICP/EHPM 02 01 01. Regional Office for Europe, World Health Organization. Copenhagen. Denmark.

WHO 1998b Healthy Cities Air Management Information System, AMIS 2.0. CD ROM. World Health Organization, Geneva.

WHO 1998c Acetone. Environmental Health Criteria 207. World Health Organization, Geneva.

WHO 1998d 2-Butoxyethanol. Concise International Chemical Assessment Document No 10. IOMC, World Health Organization, Geneva.

WHO 1998e Methyl Methacrylate. Concise International Chemical Assessment Document No 4. IOMC, World Health Organization, Geneva.

WHO 1998f 1,1,1,2-Tetrafluoroethane. Concise International Chemical Assessment Document No 11. IOMC, World Health Organization, Geneva.

WHO 1998g Dichloroethane. Concise International Chemical Assessment Document No 1. IOMC, World Health Organization, Geneva.

WHO 1998h Selected chloroalkyl ethers. Environmental Health Criteria 201, World Health Organization, Geneva.

WHO 1998i Selected Non-herocyclic Polycyclic Aromatic Hydrocarbons. Environmental Health Criteria 202. World Health Organization, Geneva.

WHO 1998j 1,1,2,2-Tetrachloroethane. Concise International Chemical Assessment Document No 3. IOMC, World Health Organization, Geneva.

WHO 1998k Assessment of the health risk of dioxins: re-evaluation of the Tolerable Daily Intake (TDI). WHO Consultation, May 25-29 1998, Geneva, Switzerland, WHO European Centre for Environment and Health, International Programme on Chemical Safety, World Health Organization, Geneva. Internet address: <http://www.who.int/pcs/pubs/dioxin-exec-sum/exe-sum-final.html>

WHO 1999a. Air Quality Guidelines for Europe. WHO Regional Publications, European Series. World Health Organization, Regional Office for Europe, Copenhagen, in press. Internet address: <http://www.who.dk>

WHO 1999b Carbon tetrachloride. Environmental Health Criteria 208. World Health Organization, Geneva.

WHO 1999c Health effects of interactions between tobacco use and exposure to other agents. Environmental Health Criteria 211. World Health Organization, Geneva.

WHO 1999d Principles for the Assessment of Risks to Human Health from Exposure to Chemicals, Environmental Health Criteria 210. World Health Organization, Geneva.

Willeke K, Baron PA 1993 Aerosol Measurement: Principles, Techniques and Applications, New York : Van Nostrand Reinhold.

WMO (1992) International Meteorological Vocabulary. WMO-No. 182, Secretariat of the World Meteorological Organization, Geneva, Switzerland.

World Bank 1992 World Development Report 1992: development and the environment. Oxford University Press. Oxford, UK.

Younes M, Meek ME, Hertel RF, Gibb HJ, Schaum J 1998 Risk Assessment and Management. In: J.A. Herystein, W.B. Bunn III, L.E. Fleming, J.M. Harrington, J. Jeyaratnam, I.R. Gardener (eds.) International Occupational and Environmental Medicine. Mosby, New York, USA.

Zhang Jinliang, Wang Lihua, Liu Junzhuo, Zhou Yufen, Wen Tianyou, Meng Dazuo, Li Qing, Li Zhi, Zhang Xuehua, Wu Di, Wu Hongyuan 1996: 24-hour NO₂ level in kitchen air and 24-hour NO₂ personal exposure level and its effect on urinary HOP, Journal of Environment and Health, 13 193-196.

Appendix 2 Acronyms

ACGIH	American Conference of Governmental Industrial Hygienists
ADI	Acceptable daily intake
ALA	Amino-Levulinic Acid
ALAD	Amino-Levulinic Acid Dehydratase
AMIS	Air Management Information System (WHO, Healthy Cities)
AMRO	WHO Regional Office for the Americas
AR	Allergic Rhinitis
ARI	Acute Respiratory Infection
ATDSR	Agency for Toxic Substances and Disease Registry (USA)
BMEPB	Beijing Municipal Environment Protection Bureau
BRI	Building Related Illness
BS	Black Smoke
bw	body weight
CaCO ₃	Calciumcarbonate
CAIP	Clean Air Implementation Plan
CBA	Cost-benefit analysis
Cd	Cadmium
CEN	European Committee for Standardization
CFC	ChloroFluoroCarbon
CFR	Code of Federal Regulations
CH ₄	Methane
CI	95% Confidence Interval
CMD	Cyclopedic Medical Dictionary
CMD	Count Median Diameter
CNS	Central Nervous System
CO	Carbon monoxide
CO ₂	Carbon dioxide
COHb	Carboxyhemoglobin
COPD	Chronic Obstructive Pulmonary Disease
CS ₂	Carbon disulphide
Cu	Copper
DOAS	Differential Optical Absorption System
DQOs	Data Quality Objectives
EA	Environment Agency of Japan
EC DG	European Commission Directorate General
ECA	European Concerted Action
ECE	Economic Commission for Europe
ECEH	WHO European Centre of Environment and Health
EHC	Environmental Health Criteria
ETS	Environmental Tobacco Smoke
EURO	WHO Regional Office for Europe
FEF ₂₅₋₇₅	Forced Expiratory Flow – interquartile range
FEP	Free Erythrocyte Protoporphyrin
FEV ₁	Forced Expiratory Volume in first second of expiration
FVC	Forced Vital Capacity
GEMS	Global Environmental Monitoring System (UNEP/WHO)
GC/FID	Gas Chromatography/Flame Ionization Detector
GIS	Geographic Information System

GVF	Dienst für GesamtVerkehrsFragen des Eidg. Verkehrs- und Energiewirtschafts-departementes (Switzerland)
H ⁺	Hydrogen ion
H ₂ S	Hydrogen sulphide
H ₂ S O ₄	Sulphuric acid droplets
HC	Hydrocarbons
HCl	Hydrochloric acid
HF	Hydrogen fluoride
HNO ₃	Nitric acid
HOP	Hydroxyproline
HVAC	High Volume Air conditioning System
IARC	International Agency for Research on Cancer
ICRP	International Commission on Radiological Protection
IgE	Immunglobulin E
IgG	Immunglobulin G
IOMC	Inter-Organization Programme for the sound Management of Chemicals
IPCS	International Programme on Chemical Safety
IR	Infrared Radiation
ISO	International Standards Organization
ISO/DIS	ISO Draft International Standard
ISO/FDIS	ISO Final Draft International Standard
KI	Potassium iodide
KOH	Potassium hydroxyde
LOAEL	Lowest-Observed-Adverse-Effect-Level
LOEL	Lowest-Observed-Effect-Level
LPG	Liquefied petroleum gas
µm	micrometer
µg	microgram
MMD	Mass median diameter
MMVF	Man-Made Vitreous Fibres
Mn	Manganese
MSDS	Material Safety Data Sheets
Na ₂ CO ₃	Sodium carbonate
NaCl	Sodium chloride
NaNO ₂	Sodium nitrite
NH ₃	Ammonia
NH ₄ ⁺	Univalent ammonium radical
NH ₄ HSO ₄	Ammonium bisulphate
(NH ₄) ₂ HSO ₄	Ammonium hydrogen sulphate
NH ₄ NO ₃	Ammonium nitrate
Ni	Nickel
NO	Nitrogen oxide
NO ₂	Nitrogen dioxide
NO _x	Nitrogen oxides
NOAEL	No Observed Adverse Effect Level
NOEL	No Observed Effect Level
O ₃	Ozone
OECD	Organization for Economic Cupertino and Development
OEH	Occupational and Environmental Health, WHO, PHE, Geneva

OH	Hydroxyl radical
OR	Odds Ratio
PAH	Polycyclic (Polynuclear) Aromatic Hydrocarbons
PAHO	Pan American Health Organization
PAN	PeroxyAcetyl Nitrate
Pb	Lead
PBPK	Physiologically Based Pharmacokinetic model
PCDDs	Polychlorinated dibenzodioxins
PCDFs	Polychlorinated dibenzofurans
PCBs	Polychlorinated biphenyls
PEF	Peak Expiratory Flow
PEFR	Peak Expiratory Flow Rate
PHA	PhytoHemAgglutinin
PHE	Department for Protection of the Human Environment, WHO, Geneva
PM	Particulate matter with no regard to size of particles
PM ₁₀	Concentration of particles with aerodynamic particle diameters of less than 10 micrometers.
PM _{2.5}	Concentration of particles with aerodynamic particle diameters of less than 2.5 micrometers.
QA/QC	Quality Assurance/Quality Control
QAP	Quality Assurance Programme
R-SH	Mercaptan
RSP	Respirable Suspended Particles
SBS	Sick Building Syndrome
SERPLAC	Secretarias Regionales de Planificación y Coordinación
Si	Silicium
SO ₂	Sulphur dioxide
SO ₃ ²⁻	Sulphur trioxide ion
SO ₄ ²⁻	Sulphate ion
SPM	Suspended particulate matter
STPD	Standard Temperature and Pressure Dry
sRAW	Specific AirWay Resistance
TEA	Triethanolamine
TC	Tolerable concentration
TCDD	2,3,7,8-tetrachlorodibenzo-p-dioxin
TCM	Tetrachloromercurate
TDI	Tolerable daily intake
TEOM	Tapered Element Oscillating Microbalance
TEQ	Toxicity Equivalent concentration or uptake
TI	Tolerable intake
TSP	Total Suspended Particles
UK	United Kingdom
UN	United Nations
UNEP	United Nations Environment Programme
UR	Unit Risk
USEPA	United States Environmental Protection Agency
USA	United States of America
UV	Ultra Violet radiation
UVF	Ultra-Violet Fluorescence
V	Vanadium

VOC	Volatile Organic Compounds
WHO	World Health Organization
WRAC	Wide Ranging Aerosol Classifier
Zn	Zinc

Appendix 3 Glossary

Acidity	The quality of possessing hydrogen ions (CMD 1997).
Adverse effect	Change in morphology, physiology, growth, development or life span of an organism exposed to air pollution, which results in impairment of functional capacity or impairment of capacity to compensate for additional stress or increase in susceptibility to the harmful effects of other environmental influences (WHO 1994a).
Aerosol	A suspension in a gaseous medium of solid particles, liquid particles or solid and liquid particles having a negligible falling velocity (ISO 1994).
Airway permeability	Capability of allowing the passage of air through the natural passageway for air to and from the lungs (CMD 1997).
Allergen	Any substance that causes manifestations of allergy. Among common allergens are inhalants, foods, drugs, infectious agents, contactants, and physical agents (CMD 1997).
Allergic	Pertaining to, sensitive to, or caused by an allergen (CMD 1997).
Allergy	An acquired, abnormal immune response to a substance that does not normally cause a reaction (CMD 1997).
Anemia	A reduction in the number of circulating red blood cells (CMD 1997).
Asthma	A disease caused by increased responsiveness of the tracheobronchial tree to various stimuli, which results in paroxysmal constriction of the bronchial airways (CMD 1997). Also see paroxysm.
Atherogenic	Pertaining to the formation of degenerated or thickened walls of the larger arteries, marked by cholesterol-lipid-calcium deposits (CMD 1997).
Biomarker	Any parameter that can be used to measure an interaction between a biological system and an environment agent, which may be chemical, physical or biological (WHO 1993).
Biomass	Organic substance of biotic origin: either living organisms or dead substances such as wood, crop residues, or animal dung.
Biomass smoke	Term used for convenience for the smoke generated by burning biomass.
Biotic	Of or relating to life (Webster 1994).
Bronchi	The two main branches leading from the trachea to the lungs, providing a passageway for air (CMD 1997).
Bronchiole	One of the smaller subdivisions of the bronchial tube (CMD 1997).
Bronchiolitis	Inflammation of the bronchioles (CMD 1997).

Bronchitis	Inflammation of the mucous membrane of the bronchial airways (CMD 1997)
Bronchoconstriction	Constriction of the bronchial tubes (CMD 1997).
Bronchodilator	A drug that expands the bronchial tubes by relaxing bronchial muscle (CMD 1997).
Building related illness	Illness related to indoor exposures to biological agents (e.g. fungi, bacteria), biological and chemical substances (e.g. endotoxins, mycotoxins, radon, carbon monoxide, formaldehyde) which is experienced by some people working or living in a particular building and it does not disappear after leaving it.
Carbon dioxide	A colourless, odourless, non-combustible gas, formula CO_2 . It is approximately 50% heavier than air, of which it is a normal constituent. It is formed by certain natural processes (see carbon cycle) and by the combustion of fuels containing carbon, and it has been estimated that the amount in the air is increasing by 0.27% annually. Only in the most exceptional circumstances do local concentrations of carbon dioxide in air rise to levels that are dangerous to health, but it plays a significant role in the decay of building stones and in corrosion (WHO 1980).
Carbon monoxide	A colourless, almost odourless, tasteless, flammable gas, formula CO . It is produced, <i>inter alia</i> , by the incomplete combustion of organic materials (e.g. in automobile engines) and normally occurs in trace amounts in the atmosphere. At concentrations exceeding about $100 \text{ cm}^3/\text{m}^3$ (0.01%) it is highly toxic. Its affinity for hemoglobin (with which it forms carboxyhemoglobin) is between 200 and 300 times that of oxygen, and it has the effect of reducing the oxygen-transport capacity of hemoglobin and leading to death by asphyxiation. Concentrations of carbon monoxide in city streets (arising mainly from motor vehicle exhausts) can be sufficiently high to cause concern, as can those resulting from tobacco smoking in unventilated rooms (WHO 1980).
Carcinogenicity	The production of cancer, equivalent to carcinogenesis (CMD 1997)
Cardiovascular	Pertaining to the heart and blood vessels (CMD 1997).
Centri-acinar	Pertaining to the central terminal respiratory gas exchange unit of the lung, composed of airways and alveoli distal to a terminal bronchiole (CMD 1997).
Chemiluminescence	Cold light or light resulting from a chemical reaction and without heat production (CMD 1997).
Chromatography	The separation of two or more chemical compounds in solution by their removal from the solution at different rates (CMD 1997).
Chronic obstructive	

Pulmonary disease (COPD)	A disease process that decreases the ability of the lungs to perform ventilation. Diagnostic criteria include a history of persistent dyspnea on exertion, with or without chronic cough, and less than half of normal predicted maximum breathing capacity. Diseases that cause this condition are chronic bronchitis, pulmonary emphysema, chronic asthma, and chronic bronchiolitis (CMD 1997).
Coagulation, blood	The process of clumping together of blood cells to form a clot (CMD 1997).
Cognitive	Adjective to cognition. the awareness with perception, reasoning, judgement, intuition and memory, the mental process by which knowledge is acquired (CMD 1997).
Collagen	A strong, fibrous insoluble protein found in connective tissue (CMD 1997)
Combustion	A chemical reaction in which a material combines with oxygen with the evolution of heat: "burning". The combustion of fuels containing carbon and hydrogen is said to be complete when these two elements are all oxidized to carbon dioxide and water. Incomplete combustion may lead to (1) appreciable amounts of carbon remaining in the ash; (2) emission of some of the carbon as carbon monoxide; and (3) reaction of the fuel molecules to give a range of products of greater complexity than that of the fuel molecules themselves (if these products escape combustion they are emitted as smoke) (WHO 1980).
Contagion	A disease that is easily transmitted from host to host by casual dermal contact or respiratory droplets (CMD 1997).
Coproporphyrin	A porphyrin present in urine and feces (CMD 1997).
Cor pulmonale	Hypertrophy or failure of the cavity of the heart that receives blood from the right atrium and pumps it into the lungs via the pulmonary artery (CMD 1997).
Cough	A forceful and sometimes violent expiratory effort preceded by a preliminary inspiration (CMD 1997).
Cytochrome	An iron-containing protein found in the mitochondria (cell parts of rod or oval shape that perform a distinctive function) of eukaryotic cells (CMD 1997)
Cytochrome oxidase	An enzyme complex of two cytochromes and two copper atoms found in the mitochondria of eukaryotic cells (CMD 1997)
Cytochrome P-450	A group of enzymes, called hemethiolate protein P450, present on every type of cell in the body except red blood cells and skeletal muscle cells (CMD 1997).
Diesel exhaust	Diesel exhaust emissions contain hundreds of chemical compounds, which are emitted partly in the gaseous phase and partly in the particulate phase

	<p>of the exhaust. The major gaseous products are carbon dioxide, oxygen, nitrogen, and water vapour; carbon monoxide, sulphur dioxide, nitrogen oxides, and hydrocarbons and their derivatives are also present. Benzene and toluene are present in the lower range (percentage weight) in the gaseous part of the hydrocarbon fraction. Other gaseous exhaust compounds are low-relative-molecular-mass polycyclic aromatic hydrocarbons.</p> <p>A main characteristic of diesel exhaust is the release of particles at a rate about 20 times greater than that from gasoline-fuelled vehicles. The particles are composed of elemental carbon, organic compounds adsorbed from fuel and lubricating oil, sulphates from fuel-sulphur, and traces of metallic components. Most of the total particulate matter appears to occur in the submicrometre range, between 0.02 and 0.5 μm (WHO 1996b).</p>
Disease	A pathological condition of the body that presents a group of clinical signs, symptoms, and laboratory findings peculiar to it and setting the condition apart as an abnormal entity differing from other normal or pathological condition (CMD 1997).
Dry deposition	Removal of contaminants of air onto a substrate without involvement of rain, clouds or fog.
Dust	Small solid particles, conventionally taken as those particles below 75 μm in diameter, which settle out under their own weight but which may remain suspended for some time (ISO 1994). National standards may be more specific and include particle diameters or a definition in terms of a sieve of specified aperture. Dust occurs in the atmosphere both naturally and as a result of the activities of man (Willeke 1993).
Dyspnea	Air hunger resulting in laboured or difficult breathing, sometimes accompanied by pain (CMD 1997).
Effect	Change in morphology, physiology, growth, development of life span of an organism exposed to air pollution. It might be either an adverse effect or an alteration, which is not distinguishable from the range of a target variable observed in not exposed organisms of the same species (WHO 1994c).
Emergency Department	The portion of a hospital that treats patients experiencing an emergency (CMD 1997).
Emphysema	A chronic pulmonary disease marked by an abnormal increase in the size of air spaces distal (farthest from the centre) to the terminal bronchioles with destructive changes in their walls (CMD 1997)
Encephalopathic	Pertaining to any dysfunction of the brain (CMD 1997).
Endogenous	Produced or originating from within a cell or organism (CMD 1997).
Endometriosis	The presence of functioning ectopic (in an abnormal position) endometrial (pertaining to the lining of the uterus) glands and stroma (foundation-supporting tissues of an organ) outside the uterine cavity (CMD 1997).

Endotoxin	A lipopolysaccharide (linkage of molecules of lipids with polysaccharides) that is part of the cell wall of gram-negative bacteria (CMD 1997).
Environmental Tobacco Smoke (ETS)	ETS is generated by the combustion of tobacco products. ETS is a complex mixture of over 4000 compounds. These include over 40 known or suspected human carcinogen, such as 4-aminobiphenyls, 2-naphthylamine, benzene, nickel, and a variety of PAH and N-nitrosamines. A number of irritants, such as ammonia, nitrogen oxides, sulphur dioxide, various aldehydes, and cardiovascular toxicants, such as carbon monoxide and nicotine are also present (WHO 1999a).
Enzyme	An organic catalyst produced by living cells but capable of acting outside cells. Enzymes are proteins that change the rate of chemical reactions without needing an external energy source or being changed themselves (CMD 1997).
Epithelioma	A malignant tumour consisting primarily of epithelial cells (epidermis of the skin or a mucous membrane) (CMD 1997).
Epithelium	The layer of cells forming the epidermis of the skin and the surface layer of mucous and serous membranes (CMD 1997).
Erythrocyte	A mature red blood cell (CMD 1997).
Expiration	Expulsion of air from the lungs in breathing. Normally the duration of expiration is shorter than that of inspiration. In general, if expiration lasts longer than inspiration, a pathological condition such as emphysema or asthma is present (CMD 1997).
Exposure	Exposure to a chemical is the contact of that chemical with the outer boundary of the human body. The outer boundary of the human body is the skin and the openings into the body such as the mouth, the nostrils, and punctures and lesions in the skin (WHO 1999).
Exposure assessment	Quantitative or qualitative evaluation of the contact of a chemical with the outer boundary of the human body, which includes consideration of the intensity, frequency and duration of contact, the route of exposure (e.g. dermal, oral or respiratory), rates (chemical intake or uptake rates), the resulting amount that actually crosses the boundary (a dose), and the amount absorbed (internal dose) (WHO 1999).
Fibrotic	Marked by or pertaining to abnormal formation of fibrous tissues (CMD 1997).
Fine particles	Particles with aerodynamic diameters below 2.5 micrometer.
Fog	As international standard fog is a general term applied to a suspension of droplets in a gas. In meteorology, it refers to a suspension of water droplets resulting in a visibility of less than 1 km (ISO 1994). WMO defines fog as a suspension of very small, usually microscopic water

	droplets in the air, generally reducing the horizontal visibility at the earth's surface to less than 1 km (WMO 1992).
Folliculi	Small secretory sacs or cavities (CMD 1997).
Forced expiratory Volume (FEV)	The volume of air that can be expired after a full inspiration. The expiration is done as quickly as possible and the volume measured at precise times; at ½, 1, 2 and 3 seconds. This provides valuable information concerning the ability to expel air from the lungs (CMD 1997).
Fume	Aerosol of solid particles, usually from metallurgical processes, generated by condensation from the gaseous state, generally after volatilisation from melted substances and often accompanied by chemical reactions such as oxidation (ISO 1994). By extension, also the gases charged by particles resulting from a chemical process or a metallurgical operation (WHO 1980). Often used in the plural, <i>fumes</i> for visible clouds of gases, vapours, or aerosols that have an unpleasant and malodorous smell (WHO 1980; ISO 1994).
Function	The act of carrying on or performing a special activity. Normal function is the normal action of an organ. Abnormal activity or the failure of an organ to perform its activity is the basis of disease or disease processes (CMD 1997).
Genotoxic	Toxic to the genetic material in cells (CMD 1997).
Gestational	Pertaining to the length of time from conception to birth (CMD 1997).
Gram-negative	Losing the crystal violet stain and taking the colour of the red counterstain in Gram's method of staining bacteria (CMD 1997).
Gram-positive	Retaining the colour of the crystal violet stain in Gram's method of staining bacteria (CMD 1997).
Guideline	Any kind of recommendation or guidance on the protection of human beings or receptors in the environment from the adverse effects of air pollutants. As such, it is not restricted to a numerical value but might also be expressed in a different way, for example as exposure-response information or as a unit risk estimate (WHO 1998a).
Guideline value	A particular form of a guideline. It has a numerical value expressed either as a concentration in ambient air, a tolerable intake, or as a deposition level, which is linked to an averaging time (WHO 1998a). In the case of human health, the guideline value defines a concentration below which the risk for the occurrence of adverse effects is negligibly low. It does, however, not guarantee the absolute exclusion of effects at concentrations at or below the guideline value. For odorous compounds the guideline value represents an odour threshold.
Haze	A suspension in the atmosphere of extremely small (dry) particles, individually invisible to the naked eye, but which are numerous enough

to give the atmosphere an appearance of opalescence together with reduced visibility (ISO 1994, WMO 1992).

Heat	Means both thermal energy and thermal energy transfer.
Hemangiosarkoma	A malignant neoplasm (new and abnormal formation of tissue) originating from the blood vessels (CMD 1997).
Hematological	Pertaining to the science concerned with blood and blood-forming tissues (CMD 1997).
Heme	An iron-containing non-protein portion of the hemoglobin molecule (CMD 1997).
Hemoglobin	The iron-containing pigment of the red blood cells which carries oxygen from the lungs to the tissues (CMD 1997).
Hepatocellular	Concerning the cells of the liver (CMD 1997).
Hepatotoxic	Toxic to the liver (CMD 1997).
Hydrocarbon	An organic compound containing only the elements carbon and hydrogen. The carbon atoms may be arranged either in open-ended chains, which may or may not be branched or in closed rings. There are two types of ring hydrocarbons: <i>alicyclic compounds</i> , consisting of three or more carbon atoms arranged in a closed ring (and whose properties are similar to those of the open-chain compounds of the same molecular mass), and aromatic compounds. The molecular structure of aromatic compounds is based on that of benzene, the simplest member of the class, which contains six carbon atoms joined by three single and three double carbon-carbon bonds. Such compounds are described as <i>polycyclic</i> if they contain two or more rings; the term "polynuclear" (as in "polynuclear aromatic hydrocarbon", frequently abbreviated as PAH) is also used. The major constituents of gasoline and other petroleum fuels are hydrocarbons of the open-chain type. These compounds are not considered to be a hazard to health even at the concentrations at which they are encountered in city air. Many aromatic hydrocarbons, on the other hand, are highly toxic (WHO 1980; WHO 1997). Well known examples of polycyclic aromatic hydrocarbons are anthracene, naphthalene, and benzo[a]pyrene (WHO 1980).
Hydroxyproline	An amino acid found in collagen (CMD 1997).
Hyperplasia	Excessive proliferation of normal cells in the normal tissue arrangement of an organ (CMD 1997).
Hypoimmunity	Diminished immunity.
Hypoxia	An oxygen deficiency (CMD 1997).
Hypoxic	Oxygen deficient (CMD 1997).
Illness	The state of being sick (CMD 1997).

Immune function	Function of being protected from or resistant to a disease or infection by a pathogenic organism as a result of the development of antibodies or cell-mediated immunity (CMD 1997).
Immunoglobulin	One of a family of closely related though not identical proteins capable of acting as antibodies, abbreviation Ig (CMD 1997).
Immunoglobulin A	The principal immunoglobulin in external gland secretions such as respiratory and intestinal mucin (mucus glycoprotein), saliva, and tears (CMD 1997).
Immunoglobulin E	An immunoglobulin that attaches to mast cells in the respiratory and intestinal tracts and plays a major role in allergic reactions, abbreviation IgE (CMD 1997).
Immunoglobulin G	The principal immunoglobulin in human serum, important in producing immunity in the infant before birth, abbreviation IgG (CMD 1997).
Inflammation	The non-specific immune response that occurs in reaction to any type of bodily injury (CMD 1997).
Influenza	An acute, contagious respiratory infection characterized by the sudden onset of fever, chills, headache, tenderness or pain in the muscles, and sometimes absolute exhaustion (CMD 1997).
Interstitialium	The space or gap in a tissue or structure of an organ (CMD 1997).
Ischemic	Pertaining to a local and temporary deficiency of blood supply due to obstruction of the circulation to a part (CMD 1997).
Legionnaires' disease	A severe, often fatal disease characterized by pneumonia, dry cough, tenderness or pain in the muscles, and sometimes gastro-intestinal symptoms (CMD 1997).
Leukemia	A malignancy of the blood-forming cells in the bone marrow (CMD 1997).
Life expectancy	The number of years that an average person of a given age may be expected to live, according to mortality tables (CMD 1997).
Low birth weight	Abnormally low weight of a new-born, usually below 2000 g (CMD 1997).
Lower respiratory symptom	Symptom in the lower respiratory tract (i.e. the respiratory tract from trachea to bronchioles).
Lowest-observed-adverse-effect level	Lowest concentration or amount of a substance, found by observation or experiment, which causes an adverse effect (WHO 1994c).
Lowest-observed-effect level	Lowest concentration or amount of a substance, found by observation or experiment, which causes an effect.

Lung cancer	Cancer that may appear in the trachea, air sacs and other lung tubes. It may appear as an ulcer in the windpipe, as a nodule or small flattened lump, or on the surface blocking air tubes. It may extend into the lymphatic and blood vessels (CMD 1997).
Lysozyme	An enzyme found in white blood cells and in body secretions that destroys bacteria by breaking down their walls (CMD 1997).
Malaise Discomfort, uneasiness, or indisposition, often indicative of infection	(CMD 1997).
Metaplasia	Conversion of one kind of tissue into a form that is not normal for that tissue (CMD 1997).
Mist	Loose term applied to a suspension of droplets in a gas. In meteorology it relates to visibility of less than 2 km but greater than 1 km (ISO 1994). See also fog.
Morbidity	The number of sick persons or cases of disease in relationship to a specific population (CMD 1997).
Morphological	Pertaining to the science of structure and form of organisms without regard of function (CMD 1997).
Mortality	The death rate; the ratio of the number of deaths to a given population (CMD 1997).
Mutagenic	Pertaining to an agent that causes genetic mutations (CMD 1997).
Myoglobin	The iron-containing protein found in muscle cells that stores oxygen for use in cell respiration (CMD 1997).
Mycotoxin	Substance produced by mould growing in food or animal feed and causing illness or death when ingested by humans or animals (CMD 1997).
Nausea	An unpleasant sensation usually preceding vomiting (CMD 1997).
Neurological	Pertaining to the branch of medicine that deals with the nervous system and its diseases (CMD 1997).
Neurotoxicity	Having the capability of harming nerve tissue (CMD 1997).
Neutrophil	A granular white blood cell (CMD 1997).
Nitrate	See <i>nitric acid</i> .
Nitric acid	A colourless or yellowish fuming liquid, formula HNO_3 . It is highly corrosive and the vapour is very hazardous. Nitric acid and nitrates (mainly ammonium nitrate) occur in the atmosphere in the form of aerosols: the acid is formed from oxides of nitrogen and then reacts with ammonia to form ammonium nitrate (WHO 1997c).
Nitric oxide	See <i>nitrogen oxides</i> .

Nitrogen	A gaseous element, atomic number 7, relative atomic mass 14.0067, symbol N. It is the principal constituent of air (78% by volume).
Nitrogen dioxide	See <i>nitrogen oxides</i> .
Nitrogen oxides	<p>A series of seven compounds, of which only three are of any significance in the atmosphere. <i>Dinitrogen oxide</i> (nitrous oxide), formula N_2O, is a colourless gas that is believed to play an important role in the nitrogen cycle. It is the most abundant atmospheric nitrogen compound and a greenhouse gas but is of no significance as a pollutant. <i>Nitrogen oxide</i> (nitric oxide), formula NO, is a colourless poisonous gas that reacts readily with oxygen (and very rapidly with O_3) to form the dioxide. It is formed in combustion processes, e.g., in furnaces and internal combustion engines. NO is an active participant in the atmospheric reactions that lead to the production of <i>photochemical smog</i>. Nitrogen dioxide, formula NO_2, is a reddish-brown poisonous gas. At ordinary temperatures the vapour is an equilibrium mixture of NO_2 and the dimer N_2O_4 (dinitrogen tetroxide); on heating, the latter dissociates and the NO_2 content increases. Above $140^{\circ}C$, the NO_2 dissociates into NO and oxygen (WHO 1997).</p> <p>In the air pollution literature, the term "nitrogen oxides" and the formula NO_x are used for the mixture of NO and NO_2 in the air (WHO 1997).</p>
No-observed-adverse-effect Level	Greatest concentration or amount of a substance, found by observation or experiment, which causes no detectable adverse effect (WHO 1994c). Effects may be detected at this level, which are not judged to be adverse.
No-observed-effect level	Greatest concentration or amount of a substance, found by observation or experiment, which causes no detectable effect (WHO 1994c).
Nucleation	The process of forming a central point about which matter is gathered (CMD 1997).
Outpatient	One who receives treatment at a hospital, clinic, or dispensary but is not hospitalised (CMD 1997).
Oxidant (in atmospheric chemistry)	A very qualitative term which includes any and all trace gases which have a greater oxidation potential than oxygen (for example O_3 , peroxyacetyl nitrate, hydrogen peroxide, organic peroxides, NO_3 , etc.). It is recommended that alternative, more definitive terms be used which define the specific oxidant of interest whenever possible (IUPAC 1997).
Oxidant defense	Protective action against harm or injury from oxidants.
Oxygen	A gaseous element, atomic number 8, relative atomic mass 15.9994, symbol O. Oxygen is a colourless, odourless gas which supports combustion in air. Molecular oxygen (O_2) constitutes 20.95% by volume of dry air in the lower part of the atmosphere. O_2 is essential for the

	maintenance of almost all forms of life. Above an altitude of 20 km atomic oxygen appears in significant amounts and at 100 km it is in the predominant form. For the tri-atomic form of oxygen, see <i>ozone</i> .
Ozone	The tri-atomic allotrope of oxygen: a pale blue gas with a distinctive pungent odour, formula O ₃ . It is a highly reactive oxidising agent and is very poisonous, and is considered a serious pollutant at concentrations much in excess of 125 µg/m ³ (WHO 1980). It is naturally occurring in the atmosphere. It occurs at large concentrations in the upper atmosphere, where it is formed by the action of solar ultraviolet radiation. In the troposphere, O ₃ is mostly formed by photochemical reactions involving hydrocarbons and nitrogen oxides.
Paroxysm	A sudden, periodic attack or recurrence of symptoms of a disease; an exacerbation of the symptoms of a disease (CMD 1997)
Particle	Small discrete mass of solid or liquid matter (ISO 1994).
Particle aerodynamic diameter	Diameter of a sphere of density 1 g/cm ³ with the same terminal velocity due to gravitational force in calm air as the particle, under the prevailing conditions of temperature, pressure and relative humidity (ISO 1995).
Particle size distribution	The distribution of equivalent diameters of particles in a sample or the proportion of particles for which the equivalent diameter lies between defined limits (Willeke 1993).
Peak expiratory flow rate	See rate.
Perinatal	Concerning the period beginning after the 28 th week of pregnancy and ending 28 days after birth (CMD 1997).
Pharyngitis	Inflammation of the passageway for air from the nasal cavity to the larynx (CMD 1997).
Phytohemagglutinin	A protein substance derived from red kidney beans that agglutinates red blood cells, used to study the proliferation of lymphocytes, abbreviation PHA (CMD 1997).
Phlegm	Thick mucus, especially that from the respiratory passages (CMD 1997).
Photochemical smog	Result of reactions in the atmosphere between nitrogen oxides, organic compounds and oxidants under the influence of sunlight, leading to the formation of oxidising compounds or possibly causing poor visibility, eye irritation or damage to material and vegetation if sufficiently concentrated (ISO 1994).
Pneumonia	An inflammation of the alveoli, interstitial tissue, and bronchioles of the lungs due to infection by bacteria, viruses, or other pathogenic organisms,

or to irritation by chemicals or other agents (CMD 1997).

Pneumonitis	Inflammation of the lung, usually due to hypersensitivity (allergic) reactions to organic dust, such as wheat or other grains, or chemicals (CMD 1997).
Polycyclic aromatic Hydrocarbon	See hydrocarbon
Polynuclear aromatic hydrocarbon	See hydrocarbon
Protoporphyrin	A derivative of hemoglobin containing four pyrole nuclei (CMD 1997).
Rate	The speed or frequency of occurrence of an event, usually expressed with respect to time or some other known standard (CMD 1997). <i>Death rate</i> or <i>mortality rate</i> is the number of deaths in a specified population, usually expressed per 100 000 population, over a given period, usually 1 year. <i>Morbidity rate</i> is the number of cases per year of certain diseases in relation to the population in which they occur. <i>Infant mortality rate</i> is the number of deaths per year of live-born infants less than 1 year of age divided by the number of live births in the same year. <i>Peak expiratory flow rate</i> is the maximum rate of exhalation during forced expiration, measured in litres per second or litres per minute.
Renal	Pertaining to the kidney (CMD 1997).
Respiration	The act of breathing (i.e. inhaling and exhaling) during which the lungs are provided with air through inhaling and carbon dioxide is removed through exhaling (CMD 1997).
Respiratory	Pertaining to respiration (CMD 1997).
Retropharyngeal	Behind the passageway for air from the nasal cavity to the larynx (CMD 1997).
Rhinitis	Inflammation of the mucous membrane of the nose. Symptoms include nasal congestion, thin watery discharge from the nose, sneezing and itching of the nose (CMD 1997).
Rhino-conjunctivitis	Rhinitis and inflammation of the mucous membrane that lines the eyelids and is reflected onto the eyeball
Sampling	The collection of a representative portion for analysis and testing (WHO 1980). <i>Continuous sampling</i> is sampling, without interruptions, throughout an operation or for a predetermined time. <i>Grab sampling</i> or <i>spot sampling</i> is the taking of a sample in a very short time (ISO 1994).
Scavenging by precipitation	The process of removing pollutants from the atmosphere by precipitation (WMO 1992).

Sick building syndrome	Specific symptoms with unspecified aetiology which are experienced by a proportion of people working or living in a particular building and disappear after leaving it.
Spectrophotometry	An estimation of colouring matter in a solution (CMD 1997).
Standard	A level of an air pollutant, e.g. a concentration or a deposition value, which is adopted by a regulatory authority as enforceable. Unlike a guideline value, a number of elements in addition to the effect-based level and the averaging time must be specified in the formulation of a standard. These elements include the measurement strategy, data handling procedures, statistics used to derive, from measurements, the value to be compared with the standard. The numerical value of a standard may also include the permitted number of exceedings (WHO 1998a).
Symptom	Any perceptible change in the body or its functions that indicates disease or the kind or phases of disease (CMD 1997).
Teratogenicity	Causation of abnormal development of the embryo (CMD 1997).
Tolerable intake	An estimate of the intake of a substance over a lifetime that is considered to be without appreciable health risk (WHO 1994c)
Tonsillitis	Inflammation of a tonsil (CMD 1997).
Trachea	A cylindrical tube from the larynx to the primary bronchi (CMD 1997).
Tubular	Relating to or having the form of a tube (CMD 1997).
Ultra-fine particles	Particles with aerodynamic diameters below 0.1 micrometer.
Uncertainty factor	
Unit risk	The additional lifetime cancer risk occurring in a hypothetical population in which all individuals are exposed continuously from birth throughout their lifetimes to a concentration of $1 \mu\text{g}/\text{m}^3$ of the agent in the air they breathe (WHO 1987).
Viable organisms	An organism that is able to live outside a host (CMD 1997).
Vital capacity	The volume of air that can be quickly and forcibly breathed out (CMD 1997).
Vitamin D3	One of several vitamins having anti-rachitic activity (CMD 1997).
Wet deposition	Removal of pollutants from the air through the processes of wash-out, rain-out, fog, and dew
Wheeze	A continuous musical sound caused by narrowing of the space of a respiratory passageway (CMD 1997).

For references see the bibliographical reference list in Appendix 1.

Appendix 4 Environmental Health Criteria documents

Environmental Health Criteria	Volume number	Year
Acetaldehyde	167	1995
Acetone	207	1998
Acetonitrile	154	1993
Acrolein	127	1991
Acrylamide	49	1985
Acrylic acid	191	1997
Acrylonitrile	28	1983
Aged population principles for evaluating the effects of chemicals in the	144	1992
Aldicarb	121	1991
Aldrin and dieldrin	91	1989
Alkylbenzene sulphonates, linear and related compounds	169	1996
Allethrins	87	1989
Aluminium	194	1997
Amitrole	158	1994
Ammonia	54	1986
Anticoagulant rodenticides	175	1995
Arsenic	18	1981
Asbestos and other natural mineral fibres	53	1986
Barium	107	1990
Benomyl	148	1993
Benzene	150	1993
Beryllium	106	1990
Biomarkers and risk assessment: concepts and principles	155	1993
Biotoxins, aquatic (marine and freshwater)	37	1984
Boron	204	1998
Brominated diphenylethers	162	1994
Butanols - four isomers	65	1987
Cadmium	134	1992
Cadmium - environmental aspects	135	1992
Camphechlor	45	1984
Carbamate pesticides: a general introduction	64	1986
Carbaryl	153	1994
Carbendazim	149	1993
Carbon disulphide	10	1979
Carbon monoxide	13	1979
Carbon Tetrachloride	208	1999
Carcinogens, summary report on the evaluation of short-term in vitro tests	47	1985
Carcinogens, summary report on the evaluation of short-term in vivo tests	109	1990
Chlordane	34	1984
Chlordecone	43	1984
Chlordimeform	199	1998
Chlorendic acid and anhydride	185	1996
Chlorinated paraffins	181	1996
Chlorine and hydrogen chloride	21	1982
Chlorobenzene other than hexachlorobenzene	128	1991
Chlorofluorocarbons, fully halogenated	113	1990
Chlorofluorocarbons, partially halogenated (ethane derivatives)	139	1992
Chlorofluorocarbons, partially halogenated (methane derivatives)	126	1991

Chloroform	163	1994
Chlorothalonil	183	1996
Chlorophenols	93	1989
Chromium	61	1988
Chrysotile Asbestos	203	1998
Copper	200	1998
Cresols	168	1995
Cyhalothrin	99	1990
Cypermethrin	82	1989
Cypermethrin. alpha	142	1992
DDT and its derivatives	9	1979
DDT and its derivatives - environmental aspects	83	1989
Deltamethrin	97	1990
Diaminotoluenes	74	1987
Diazinon	198	1998
Dibromoethane, 1,2-	177	1996
Dibromopropyl (2,3-) phosphate	173	1995
Dichloroethane, 1,2- (1st edition)	62	1987
Dichloroethane. 1,2- (2nd edition)	176	1995
Dichloropropene, 1,3-, 1,2-dichloropropane and mixtures	146	1993
Dichlorophenoxyacetic acid, 2,4-	29	1984
Dichlorophenoxyacetic acid, 2,4-, - environmental aspects	84	1989
Dichlorvos	79	1988
Diesel fuel and exhaust emissions	171	1996
Diethylhexyl phthalate	131	1992
Diflubenzuron	184	1996
Dimethoate	90	1989
Dimethyl sulfate	48	1985
Dimethylformamide	114	1991
Dimeton-S-methyl	197	1997
Di-n-butyl phthalate	189	1997
Diseases of suspected etiology and their prevention, principles of studies on	72	1987
Dithiocarbamate pesticides, ethylenethiourea, and propylenethiourea: a general introduction	78	1988
Electromagnetic fields	137	1992
Endosulfan	40	1984
Endrin	130	1992
Environmental epidemiology, guidelines on studies in	27	1983
Epichlorohydrin	33	1984
Ethylbenzene	186	1996
Ethylene oxide	55	1985
Extremely low frequency (ELF) fields	35	1984
Fenitrothion	133	1992
Fenvalerate	95	1990
Flame retardants: a general introduction	192	1997
Flame Retardants: Tris (chloropropyl) Phosphate and Tris 2-chloroethyl) Phosphate	209	1998
Fluorine and fluorides	36	1984
Food additives and contaminants in food, principles for the safety assessment of	70	1987
Formaldehyde	89	1989
Genetic effects in human populations, guidelines for the study of	46	1985
Glyphosate	159	1994
Health Effects of Interactions between Tobacco Use and Exposure to other	211	1999

Agents		
Heptachlor	38	1984
Hexachlorobenzene	195	1997
Hexachlorobutadiene	156	1994
Hexachlorocyclohexanes, alpha- and beta-	123	1992
Hexachlorocyclopentadiene	120	1991
Hexan, n-	122	1991
Human exposure limits, guidance values	170	1994
Hydrazine	68	1987
Hydrogen sulfide	19	1981
Hydroquinone	157	1994
Immunotoxicity associated with exposure to chemicals, principles and methods for assessments	180	1996
Infancy and early childhood, principles for evaluating health risks from chemicals during	59	1986
Isobenzan	129	1991
Isophorone	174	1995
Kelevan	66	1986
Lasers and optical radiation	23	1982
Lead	3	1977
Lead, environmental aspects	85	1989
Lead, inorganic	165	1995
Lindane	124	1991
Magnetic fields	69	1987
Manganese	17	1981
Man-made mineral fibres	77	1988
Mercury	1	1976
Mercury - environmental aspects	86	1989
Mercury, inorganic	118	1991
Methanol	196	1997
Methomyl	178	1996
Methoxyethanol, 2-, 2-ethoxyethanol, and their acetates	115	1990
Methyl bromide	166	1995
Methyl ethyl ketone	143	1992
Methyl isobutyl ketone	117	1990
Methyl parathion	145	1992
Methyl tertiary-Butyl Ether	206	1998
Methylene chloride, 1st edition	32	1984
Methylene chloride, 2nd edition	164	1996
Methylmercury	101	1990
Mirex	44	1984
Morpholine	179	1996
Mutagenic and carcinogenic chemicals, guide to short-term tests for detecting	51	1985
Mycotoxins	11	1979
Mycotoxins, selected: ochratoxins, trichothecenes, ergot	105	1990
Nephrotoxicity associated with exposure to chemicals, principles and methods for the assessment of	119	1991
Neurotoxicity associated with exposure to chemicals, principles and methods for the assessment of	60	1986
Nickel	108	1991
Nitrates, nitrites, and N-nitroso compounds	5	1978
Nitrogen oxides, 1st edition	4	1977
Nitrogen oxides, 2nd edition	188	1997

Nitropropane, 2-	138	1992
Noise	12	1980
Organophosphorus insecticides: a general introduction	63	1986
Paraquat and diquat	39	1984
Pentachlorophenol	71	1987
Permethrin	94	1990
Pesticide residues in food, principles for the assessment of	104	1990
Petroleum products, selected	20	1982
Phenol	161	1994
Phenothrin, d-	96	1990
Phosgene	193	1997
Phosphine and selected metal phosphides	73	1988
Photochemical oxidants	7	1978
Platinum	125	1991
Polybrominated biphenyls	152	1994
Polybrominated Dibenzo-p-dioxins and Dibenzofurans	205	1998
Polychlorinated biphenyls and terphenyls, 1st edition	2	1976
Polychlorinated biphenyls and terphenyls, 2nd edition	140	1992
Polychlorinated dibenzo-p-dioxins and dibenzofurans	88	1989
Principles of the Assessment of Risks to Human Health from Exposure to chemicals	210	1999
Progeny, principles for evaluating health risks associated with exposure to chemicals during pregnancy	30	1984
Propachlor	147	1993
Propanol, 1-	102	1990
Propanol, 2-	103	1990
Propylene oxide	56	1985
Pyrrolizidine alkaloids	80	1988
Quality management for chemical safety testing	141	1992
Quintozene	41	1984
Radiofrequency and microwaves	16	1981
Radionuclides, selected	25	1983
Resmethrins	92	1989
Selected Chloroalkyl Ethers	201	1998
Selected Non-heterocyclic Polycyclic Aromatic Hydrocarbons	202	1998
Selenium	58	1986
Styrene	26	1983
Sulfur oxides and suspended particulate matter	8	1979
Synthetic organic fibres, selected	151	1993
Tecnazene	42	1984
Tetrabromobisphenol A and derivatives	172	1995
Tetrachloroethylene	31	1984
Tetradifon	67	1986
Tetramethrin	98	1990
Thallium	182	1996
Thiocarbamate pesticides: a general introduction	76	1988
Tin and organotin compounds	15	1980
Titanium	24	1982
Toluene	52	1986
Toluene diisocyanates	75	1987
Toxicity of chemicals (Part 1), principles and methods for evaluating the	6	1978
Toxicokinetic studies, principles of	57	1986
Tributyl phosphate	112	1991

Tributyltin compounds	116	1990
Trichlorfon	132	1992
Trichloroethane, 1,1,1-	136	1992
Trichloroethylene	50	1985
Tricresyl phosphate	110	1990
Triphenyl phosphate	111	1991
Ultrasound	22	1982
Ultraviolet radiation, 1st edition	14	1979
Ultraviolet radiation, 2nd edition	160	1994
Vanadium	81	1988
Vinylidene chloride	100	1990
White spirit	187	1996
Xylenes	190	1997

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DIRECTIVA 1999/30/CE DEL CONSEJO

de 22 de abril de 1999

relativa a los valores límite de dióxido de azufre, dióxido de nitrógeno y óxidos de nitrógeno, partículas y plomo en el aire ambiente

EL CONSEJO DE LA UNIÓN EUROPEA,

Visto el Tratado constitutivo de la Comunidad Europea y, en particular, el apartado 1 de su artículo 130 S,

Vista la propuesta de la Comisión ⁽¹⁾,Visto el dictamen del Comité Económico y Social ⁽²⁾,De conformidad con el procedimiento establecido en el artículo 189 C del Tratado ⁽³⁾,

- (1) Considerando que, basándose en los principios consagrados en el artículo 130 R del Tratado, el programa comunitario de política y actuación en materia de medio ambiente y desarrollo sostenible (quinto programa de acción en materia de medio ambiente) ⁽⁴⁾ prevé en particular la modificación de la legislación vigente sobre contaminantes atmosféricos; que el mencionado programa recomienda fijar objetivos a largo plazo en relación con la calidad del aire;
- (2) Considerando que el artículo 129 del Tratado establece que las exigencias en materia de protección de la salud deben constituir un componente de las demás políticas de la Comunidad; que la letra o) del artículo 3 del Tratado establece que la acción de la Comunidad debe implicar una contribución al logro de un alto nivel de protección de la salud;
- (3) Considerando que el apartado 5 del artículo 4 de la Directiva 96/62/CE del Consejo, de 27 de septiembre de 1996, sobre evaluación y gestión de la calidad del aire ambiente ⁽⁵⁾ dispone que el Consejo adopte la legislación contemplada en el apartado 1 y las normas contempladas en los apartados 3 y 4 de dicho artículo;
- (4) Considerando que los valores límite establecidos por la presente Directiva constituyen requisitos mínimos; que, de conformidad con el artículo 130 T del Tratado, los Estados miembros podrán mantener y adoptar valores límite más exigentes; que, en particular, se podrán establecer disposiciones más exigentes para proteger la salud de categorías de la población especialmente vulnerables, como los niños y los pacientes hospitalizados; que los Estados miembros podrán establecer valores

límite que deban alcanzarse en una fecha anterior a la establecida en la presente Directiva;

- (5) Considerando que es preciso proteger los ecosistemas frente a los efectos adversos del dióxido de azufre; que es preciso proteger la vegetación de los efectos perjudiciales de los óxidos de nitrógeno;
- (6) Considerando que los distintos tipos de partículas pueden tener distintos efectos nocivos en la salud de las personas; que se ha demostrado que los riesgos que supone para la salud de las personas la exposición a partículas producidas por las actividades humanas son superiores a los riesgos que lleva aparejados la exposición a partículas de origen natural en el aire ambiente;
- (7) Considerando que la Directiva 96/62/CE requiere la elaboración de planes de acción para las zonas en las que las concentraciones de uno o más contaminantes superan el valor o valores límite incrementados por el margen de tolerancia temporal en orden a asegurar el cumplimiento del valor o valores límite en la fecha especificada; que esos planes de acción y demás estrategias de reducción, cuando guarden relación con las partículas, deben tener por objeto reducir las concentraciones de partículas finas, como parte de la reducción global de las concentraciones de partículas;
- (8) Considerando que la Directiva 96/62/CE establece que los valores límite numéricos de los valores límite y de los umbrales de alerta deben basarse en los resultados de la labor realizada por grupos científicos internacionales que se ocupan de esta materia; que la Comisión debe tener en cuenta los datos más recientes sobre epidemiología y medio ambiente obtenidos en los trabajos de investigación científica, así como los últimos avances en métodos de medición, para reexaminar los elementos en los que se basan los valores límite y los umbrales de alerta;
- (9) Considerando que, para facilitar la revisión de la presente Directiva en el año 2003, la Comisión y los Estados miembros deberían considerar la posibilidad de alentar la investigación sobre los efectos de los contaminantes a los que la Directiva se refiere, es decir, el dióxido de azufre, el dióxido de nitrógeno y los óxidos de nitrógeno, las partículas y el plomo;

⁽¹⁾ DO C 9 de 14.1.1998, p. 6.⁽²⁾ DO C 214 de 10.7.1998, p. 1.⁽³⁾ Dictamen del Parlamento Europeo de 13 de mayo de 1998 (DO C 167 de 1.6.1998, p. 103), Posición común del Consejo de 24 de septiembre de 1998 (DO C 360 de 23.11.1998, p. 99) y Decisión del Parlamento Europeo de 13 de enero de 1999 (DO C 104 de 14.4.1999, p. 44).⁽⁴⁾ DO C 138 de 17.5.1993, p. 5.⁽⁵⁾ DO L 296 de 21.11.1996, p. 55.

- (10) Considerando que unas técnicas normalizadas de medición que permiten obtener resultados precisos y unos criterios comunes para la ubicación de los centros de medición son elementos importantes para la evaluación de la calidad del aire ambiente con vistas a obtener datos comparables en toda la Comunidad;
- (11) Considerando que, de conformidad con el apartado 1 del artículo 12 de la Directiva 96/62/CE, las modificaciones necesarias para la adaptación al progreso científico y técnico sólo podrán referirse a los criterios y técnicas de evaluación de las concentraciones de dióxido de azufre, dióxido de nitrógeno y óxidos de nitrógeno, partículas y plomo o a las disposiciones detalladas para la transmisión de información a la Comisión, y que dichas modificaciones no deberán suponer una modificación, directa o indirecta, de los valores límite ni de los umbrales de alerta;
- (12) Considerando que la población debe poder acceder con rapidez a información actualizada sobre las concentraciones de dióxido de azufre, dióxido de nitrógeno, partículas y plomo en el aire ambiente,

HA ADOPTADO LA PRESENTE DIRECTIVA:

Artículo 1

Objetivos

La presente Directiva tiene por objeto:

- establecer valores límite y, en su caso, umbrales de alerta con respecto a las concentraciones de dióxido de azufre, dióxido de nitrógeno y óxidos de nitrógeno, partículas y plomo en el aire ambiente para evitar, prevenir o reducir los efectos nocivos para la salud humana y para el medio ambiente en su conjunto;
- evaluar, a partir de métodos y criterios comunes, las concentraciones de dióxido de azufre, dióxido de nitrógeno, partículas y plomo en el aire ambiente;
- obtener información adecuada sobre las concentraciones de dióxido de azufre, dióxido de nitrógeno y óxidos de nitrógeno, partículas y plomo en el aire ambiente y velar por que la población tenga conocimiento de la misma;
- mantener la calidad del aire ambiente cuando ésta sea buena y mejorarla en los demás casos con respecto al dióxido de azufre, dióxido de nitrógeno y los óxidos de nitrógeno, las partículas y el plomo.

Artículo 2

Definiciones

A efectos de la presente Directiva se entenderá por:

- 1) «aire ambiente»: el aire exterior de la troposfera, excluidos los lugares de trabajo;
- 2) «contaminante»: cualquier sustancia introducida directa o indirectamente por el hombre en el aire ambiente que pueda tener efectos nocivos sobre la salud humana o el medio ambiente en su conjunto;
- 3) «nivel»: la concentración de un contaminante en el aire ambiente o su depósito en superficies en un momento determinado;
- 4) «evaluación»: cualquier método utilizado para medir, calcular, predecir o estimar el nivel de un contaminante en el aire ambiente;
- 5) «valor límite»: un nivel fijado basándose en conocimientos científicos, con el fin de evitar, prevenir o reducir los efectos nocivos para la salud humana y/o para el medio ambiente en su conjunto, que debe alcanzarse en un plazo determinado y no superarse una vez alcanzado;
- 6) «umbral de alerta»: un nivel a partir del cual una exposición de breve duración supone un riesgo para la salud humana y a partir del cual los Estados miembros deberán tomar medidas inmediatas como establece la Directiva 96/62/CE;
- 7) «margen de tolerancia»: el porcentaje del valor límite en el que éste puede sobrepasarse con arreglo a las condiciones establecidas en la Directiva 96/62/CE;
- 8) «zona»: la porción de su respectivo territorio delimitada por los Estados miembros;
- 9) «aglomeración»: un área que se caracteriza por una concentración de población de más de 250 000 habitantes o, cuando la concentración de población es inferior o igual a 250 000 habitantes, por una densidad de habitantes por km² que justifica que los Estados miembros evalúen y controlen la calidad del aire ambiente;
- 10) «óxidos de nitrógeno»: la suma, en partes por billón de óxido nítrico y dióxido de nitrógeno expresada como dióxido de nitrógeno, en microgramos por metro cúbico;
- 11) «PM₁₀»: las partículas que pasan a través de un cabezal de tamaño selectivo para un diámetro aerodinámico de 10 µm con una eficiencia de corte del 50 %;
- 12) «PM_{2,5}»: las partículas que pasan a través de un cabezal de tamaño selectivo para un diámetro aerodinámico de 2,5 µm con una eficiencia de corte del 50 %;
- 13) «Umbral de evaluación superior»: el nivel especificado en el anexo V, por debajo del cual puede utilizarse una combinación de mediciones y técnicas de modelización para evaluar la calidad del aire ambiente, con arreglo al apartado 3 del artículo 6 de la Directiva 96/62/CE;
- 14) «umbral de evaluación inferior»: el nivel especificado en el anexo V, por debajo del cual es posible limitarse al empleo de técnicas de modelización o de estimación objetiva para evaluar la calidad del aire ambiente, con arreglo al apartado 4 del artículo 6 de la Directiva 96/62/CE;

- 15) «fenómeno natural»: las erupciones volcánicas, las actividades sísmicas, actividades geotérmicas, o los incendios de zonas silvestres, los fuertes vientos o la resuspensión atmosférica o el transporte de partículas naturales procedentes de regiones áridas;
- 16) «mediciones fijas»: las mediciones realizadas con arreglo a lo dispuesto en el apartado 5 del artículo 6 de la Directiva 96/62/CE.

Artículo 3

Dióxido de azufre

1. Los Estados miembros adoptarán las medidas necesarias para que las concentraciones de dióxido de azufre en el aire ambiente, evaluadas con arreglo al artículo 7, no excedan de los valores límite fijados en la sección I del anexo I a partir de las fechas que en el mismo se indican.

Los márgenes de tolerancia que se especifican en la sección I del anexo I se aplicarán de conformidad con el artículo 8 de la Directiva 96/62/CE.

2. El umbral de alerta para las concentraciones de dióxido de azufre en el aire ambiente figura en la sección II del anexo I.

3. Para ayudar a la Comisión a preparar el informe que cita el artículo 10, los Estados miembros registrarán hasta el 31 de diciembre de 2003, donde es posible, las concentraciones de dióxido de azufre promediadas en períodos de diez minutos en algunas estaciones de medición seleccionadas por los Estados miembros como representativas de la calidad del aire en las áreas habitadas próximas a las fuentes y en las que se midan las concentraciones horarias. Al mismo tiempo que se suministren los datos sobre las concentraciones horarias de conformidad con lo dispuesto en el punto 1 del artículo 11 de la Directiva 96/62/CE, los Estados miembros comunicarán a la Comisión, respecto a las estaciones de medición seleccionadas, el número de las concentraciones promediadas durante períodos de diez minutos que excedan los 500 $\mu\text{g}/\text{m}^3$, el número de días dentro del año civil en que ocurrió tal hecho, el número de días simultáneos en que las concentraciones horarias de dióxido de azufre excedieron también los 350 $\mu\text{g}/\text{m}^3$ y la máxima concentración registrada en los períodos de diez minutos.

4. Los Estados miembros podrán designar zonas o aglomeraciones dentro de las que se rebasen los valores límite de dióxido de azufre a que se refiere la sección I del anexo I debido a concentraciones de dióxido de azufre en el aire ambiente producidas por fuentes naturales. Los Estados miembros remitirán a la Comisión una lista de cualesquiera de esas zonas o aglomeraciones junto con la información sobre las concentraciones y fuentes de dióxido de azufre dentro de las mismas. Cuando informen a la Comisión de conformidad con lo dispuesto en el apartado 1 del artículo 11 de la Directiva 96/62/CE, los Estados miembros facilitarán la justificación necesaria para demostrar que los rebasamientos se deben a fuentes naturales.

Dentro de dichas zonas o aglomeraciones los Estados miembros estarán obligados a ejecutar planes de actuación de conformidad con el apartado 3 del artículo 8 de la Directiva 96/62/CE sólo cuando se rebasen los valores

límite a que se refiere la sección I del anexo I debido a emisiones antropogénicas.

Artículo 4

Dióxido de nitrógeno y óxidos de nitrógeno

1. Los Estados miembros adoptarán las medidas necesarias para que las concentraciones de dióxido de nitrógeno y, en su caso, las concentraciones de óxidos de nitrógeno y en su caso de óxido nítrico en el aire ambiente, evaluadas con arreglo al artículo 7, no excedan de los valores límite fijados en la sección I del anexo II a partir de las fechas indicadas.

Los márgenes de tolerancia que se especifican en la sección I del anexo II se aplicarán de conformidad con el artículo 8 de la Directiva 96/62/CE.

2. El umbral de alerta para las concentraciones de dióxido de nitrógeno en el aire ambiente figura en la sección II del anexo II.

Artículo 5

Partículas

1. Los Estados miembros adoptarán las medidas necesarias para que las concentraciones de PM_{10} en el aire ambiente, evaluadas con arreglo al artículo 7, no excedan de los valores límite indicados en la sección I del anexo III a partir de las fechas indicadas.

Los márgenes de tolerancia que se especifican en la sección I del anexo III se aplicarán de conformidad con el artículo 8 de la Directiva 96/62/CE.

2. Los Estados miembros garantizarán que se instalen y exploten estaciones de medición que proporcionen datos sobre las concentraciones de $\text{PM}_{2,5}$. El número y situación de las estaciones en que se mida $\text{PM}_{2,5}$ serán elegidos por los Estados miembros para que sean representativos de las concentraciones de $\text{PM}_{2,5}$ en esos Estados miembros. Donde sea posible, los puntos de muestreo de $\text{PM}_{2,5}$ se ubicarán en el mismo lugar que los puntos de muestreo de PM_{10} .

Los Estados miembros presentarán cada año a la Comisión, a más tardar nueve meses después de finalizar cada año, la media aritmética, la mediana, el percentil 98 y la concentración máxima calculados a partir de las mediciones de $\text{PM}_{2,5}$ durante 24 horas en ese año. El percentil 98 se calculará con arreglo al procedimiento establecido en la sección 4 del anexo I de la Decisión 97/101/CE del Consejo, de 27 de enero de 1997, por la que se establece un intercambio recíproco de información y datos de las redes y estaciones aisladas de medición de la contaminación atmosférica en los Estados miembros⁽¹⁾.

3. Los planes de actuación correspondientes a las partículas PM_{10} preparados con arreglo al artículo 8 de la Directiva 96/62/CE y las estrategias generales de reducción de las concentraciones de PM_{10} también tendrán por objetivo reducir las concentraciones de $\text{PM}_{2,5}$.

⁽¹⁾ DO L 35 de 5.2.1997, p. 14.

4. Cuando se superen los valores límite de PM_{10} a que se refiere la sección I del anexo III debido a concentraciones de PM_{10} en el aire ambiente producidas por fenómenos naturales, que supongan concentraciones considerablemente superiores a los niveles de fondo procedentes de fuentes naturales, los Estados miembros informarán de ello a la Comisión de conformidad con el apartado 1 del artículo 11 de la Directiva 96/62/CE y facilitarán la justificación necesaria para demostrar que dichos rebasamientos se deben a fenómenos naturales. En estos casos, los Estados miembros tendrán la obligación de ejecutar planes de actuación con arreglo al apartado 3 del artículo 8 de la Directiva 96/62/CE sólo cuando se rebasen los valores límite a que se refiere la sección I del anexo III por causas que no sean tales fenómenos naturales.

5. Los Estados miembros podrán designar zonas o aglomeraciones en las cuales se rebasen los valores límite de PM_{10} a que se refiere la sección I del anexo III a causa de la existencia de concentraciones de PM_{10} en el aire ambiente debidas a la resuspensión de partículas a raíz del vertido invernal de arena para el mantenimiento de las carreteras. Los Estados miembros remitirán a la Comisión una lista de las posibles zonas o aglomeraciones de este tipo, junto con información sobre las concentraciones y fuentes de PM_{10} existentes en las mismas. Cuando informen a la Comisión con arreglo a lo dispuesto en la sección 1 del artículo 11 de la Directiva 96/62/CE, los Estados miembros suministrarán la información necesaria para demostrar que los rebasamientos se deben a la mencionada resuspensión de partículas y que se han adoptado medidas razonables para reducir las concentraciones.

Dentro de dichas zonas o aglomeraciones, los Estados miembros sólo estarán obligados a aplicar planes de actuación de conformidad con lo dispuesto en el apartado 3 del artículo 8 de la Directiva 96/62/CE en caso de que se rebasen los valores límite a que se refiere la sección I del anexo III debido a la presencia de niveles de PM_{10} distintos de los que se deriven del vertido invernal de arena para el mantenimiento de las carreteras.

Artículo 6

Plomo

Los Estados miembros adoptarán las medidas necesarias para que las concentraciones de plomo en el aire ambiente, evaluadas con arreglo al artículo 7, no excedan de los valores límite fijados en la sección I del anexo IV a partir de las fechas indicadas.

Los márgenes de tolerancia que se especifican en la sección I del anexo IV se aplicarán de conformidad con el artículo 8 de la Directiva 96/62/CE.

Artículo 7

Evaluación de las concentraciones

1. En la sección I del anexo V figuran los umbrales de evaluación superior e inferior correspondientes al dióxido de azufre, dióxido de nitrógeno y óxidos de nitrógeno, las

partículas y el plomo a los fines del artículo 6 de la Directiva 96/62/CE.

La clasificación de cada zona o aglomeración a efectos de lo dispuesto en el artículo 6 de la mencionada Directiva se revisará por lo menos cada cinco años con arreglo al procedimiento establecido en la sección II del anexo V. Esa revisión podrá tener lugar antes de lo establecido si se producen cambios significativos en las actividades que pueden tener una incidencia sobre las concentraciones en el ambiente de dióxido de azufre, dióxido de nitrógeno o, cuando proceda, óxidos de nitrógeno, partículas o plomo.

2. En el anexo VI se establecen los criterios que deben aplicarse para determinar el emplazamiento de los puntos de muestreo con vistas a la medición de dióxido de azufre, dióxido de nitrógeno y óxidos de nitrógeno, partículas y plomo. El anexo VII establece el número mínimo de puntos de muestreo para las mediciones fijas de concentraciones de cada contaminante pertinente.

3. En las zonas y aglomeraciones en las que la información proporcionada por las estaciones de medición fijas se complete con información procedente de otras fuentes, tales como, inventarios de emisiones, métodos de medición indicativa y modelos de la calidad del aire, el número de estaciones de medición fijas que deben instalarse y la resolución espacial de las demás técnicas deben ser suficientes para que sea posible determinar las concentraciones de los contaminantes atmosféricos establecidos con arreglo a la sección I del anexo VI y en la sección I del anexo VIII.

4. En las zonas y aglomeraciones en que no se requieran mediciones podrán utilizarse técnicas de modelización o de estimación objetivas.

5. En las secciones I a III del anexo IX figuran los métodos de referencia para el análisis de dióxido de azufre, dióxido de nitrógeno, óxidos de nitrógeno y plomo, y para el muestreo y el análisis de plomo.

El método de referencia para el muestreo y análisis de PM_{10} figura en la sección IV del anexo IX.

El método de referencia provisional para el muestreo y el análisis de $PM_{2,5}$ figura en la sección V del anexo IX.

La sección VI del anexo IX establece las técnicas de referencia para la modelización de la calidad del aire.

6. La fecha en que los Estados miembros informarán a la Comisión acerca de los métodos empleados para la evaluación preliminar de la calidad del aire con arreglo a la letra d) del punto 1 del artículo 11 de la Directiva 96/62/CE será de dieciocho meses después de la entrada en vigor de la Directiva.

7. Las modificaciones que sean necesarias para adaptar las disposiciones del presente artículo y de los anexos V a IX al progreso científico y técnico se adoptarán con arreglo al procedimiento establecido en el artículo 12 de la Directiva 96/62/CE.

*Artículo 8***Información al público**

1. Los Estados miembros garantizarán que periódicamente esté disponible información actualizada sobre las concentraciones de dióxido de azufre, dióxido de nitrógeno y óxidos de nitrógeno, partículas y plomo en el aire ambiente, para la población así como para las organizaciones interesadas, tales como organizaciones medioambientales, organizaciones de consumidores, organizaciones que representen los intereses de los grupos de población sensible y otros organismos sanitarios relacionados, a través de medios de difusión apropiados como, por ejemplo, la radio y la televisión, la prensa, pantallas de información o servicios de redes informáticas.

La información sobre las concentraciones de dióxido de azufre, dióxido de nitrógeno y partículas en el aire ambiente se actualizará, como mínimo, cada día, y cada hora por lo que respecta a los valores horarios de dióxido de azufre y de dióxido de nitrógeno, en caso de que resulte viable. La información sobre concentraciones de plomo en el aire ambiente se actualizará en base trimestral.

La información indicará, al menos, todos los casos en que las concentraciones superen los valores límite y los umbrales de alerta durante los períodos de promedio especificados en los anexos I a IV. También incluirá una breve evaluación en relación con los valores límite y con los umbrales de alerta, así como información adecuada en relación con las repercusiones para la salud.

2. Cuando los Estados miembros pongan a disposición de la población planes o programas realizados con arreglo al apartado 3 del artículo 8 de la Directiva 96/62/CE, incluyendo los planes o programas contemplados en el apartado 4 del artículo 3 y en los apartados 4 y 5 del artículo 5 de la presente Directiva los pondrán también a disposición de las organizaciones contempladas en el apartado 1.

3. Cuando se rebase el umbral de alerta citado en la sección II de los anexos I o II, los detalles difundidos al público con arreglo al artículo 10 de la Directiva 96/62/CE incluirán, como mínimo, los aspectos citados en la lista de la sección III de los anexos I y II.

4. La información disponible por el público y para las organizaciones en virtud de lo dispuesto en los anteriores apartados 1 y 3 deberá ser clara, comprensible y accesible.

*Artículo 9***Derogaciones y disposiciones transitorias**

1. La Directiva 80/779/CEE del Consejo, de 15 de julio de 1980, relativa a los valores límite y a los valores guía de calidad atmosférica para el anhídrido sulfuroso y las partículas en suspensión ⁽¹⁾ quedará derogada con efectos a partir del 19 de julio de 2001, excepto el artículo 1, el

apartado 1 del artículo 2, el apartado 1 del artículo 3, los artículos 9, 15 y 16 y los anexos I, III b y IV, que quedarán derogados con efectos a partir del 1 de enero de 2005.

2. La Directiva 82/884/CEE del Consejo, de 3 de diciembre de 1982, relativa al valor límite para el plomo contenido en la atmósfera ⁽²⁾ quedará derogada con efectos a partir del 19 de julio de 2001, excepto los artículos 1 y 2, el apartado 1 del artículo 3, y los artículos 7, 12 y 13, que quedarán derogados con efectos a partir del 1 de enero de 2005.

3. La Directiva 85/203/CEE del Consejo, de 7 de marzo de 1985, relativa a las normas de calidad del aire para el dióxido de nitrógeno ⁽³⁾ quedará derogada con efectos a partir del 19 de julio de 2001, excepto el primer guión del apartado 1 del artículo 1, el apartado 2 del artículo 1, el primer guión del artículo 2, el apartado 1 del artículo 3, los artículos 5, 9, 15 y 16 y el anexo I, que quedarán derogados con efectos a partir del 1 de enero de 2010.

4. A partir del 19 de julio de 2001, los Estados miembros utilizarán estaciones de medición y otros métodos de evaluación de la calidad del aire de conformidad con la presente Directiva para evaluar las concentraciones de dióxido de azufre, dióxido de nitrógeno y plomo en el aire ambiente con objeto de obtener los datos destinados a demostrar que se cumplen los valores límite establecidos en las Directivas 80/779/CEE, 82/884/CEE y 85/203/CEE hasta el momento en que dejen de aplicarse los valores límite establecidos en esas Directivas.

5. A partir del 19 de julio de 2001, los Estados miembros podrán utilizar estaciones de medición y otros métodos de evaluación de la calidad del aire de conformidad con la presente Directiva por lo que respecta al PM₁₀ para evaluar las concentraciones de partículas en suspensión a fin de demostrar el cumplimiento de los valores límite establecidos en el anexo IV de la Directiva 80/779/CEE, si bien, para demostrar dicho cumplimiento, los datos así recogidos deberán multiplicarse por un factor de 1,2.

6. Los Estados miembros informarán a la Comisión de todo rebasamiento de los valores límite establecidos por las Directivas 80/779/CEE, 82/884/CEE y 85/203/CEE, así como de los valores registrados, las razones de cada caso registrado y las medidas adoptadas para evitar cualquier posible repetición; dicha información se comunicará a la Comisión anualmente durante los nueve primeros meses de cada año de conformidad con el procedimiento establecido en el artículo 11 de la Directiva 96/62/CE, y hasta tanto dejen de aplicarse los valores límite pertinentes.

7. En las zonas en las que un Estado miembro considere necesario limitar o prevenir un incremento previsible de la contaminación causada por dióxido de azufre, dióxido de nitrógeno o partículas en suspensión, podrá seguir utilizando los valores guía para la protección de los ecosistemas que figuran en el anexo II de la Directiva 80/779/CEE y en el anexo II de la Directiva 85/203/CEE.

⁽¹⁾ DO L 229 de 30.8.1980, p. 30.

⁽²⁾ DO L 378 de 31.12.1982, p. 15.

⁽³⁾ DO L 87 de 27.3.1985, p. 1.

*Artículo 10***Informe y revisión**

A más tardar el 31 de diciembre de 2003 la Comisión presentará al Parlamento Europeo y al Consejo, un informe basado en la experiencia adquirida en la aplicación de la presente Directiva y, en particular, sobre los resultados de las investigaciones científicas más recientes acerca de los efectos en la salud humana y en los ecosistemas de la exposición al dióxido de azufre, dióxido de nitrógeno y óxidos de nitrógeno, las distintas fracciones de partículas y el plomo, así como sobre la evolución de la tecnología, incluidos los avances realizados en relación con los métodos de medición y otros tipos de evaluaciones de las concentraciones de partículas en el aire ambiente y de la sedimentación de las partículas y del plomo en superficies.

Con vistas a mantener un elevado nivel de protección de la salud humana y del medio ambiente y teniendo en cuenta la experiencia obtenida gracias a la aplicación de la Directiva en los Estados miembros, incluidas, en particular, las condiciones en que, de conformidad con lo dispuesto en el anexo VI, se hayan llevado a cabo las mediciones, dicho informe se acompañará, cuando proceda, de propuestas de modificación de la presente Directiva. En especial, la Comisión estudiará los valores límite de PM_{10} para la segunda fase con miras a hacerlos obligatorios, y considerará la posibilidad de confirmar o modificar los valores límite para la segunda fase y, si procede, para la primera. Además, la Comisión concederá especial atención al establecimiento de valores límite para $PM_{2,5}$ o para diferentes fracciones de partículas, según resulte adecuado y estudiará el valor límite anual para la protección de la salud humana para el dióxido de nitrógeno y presentará una propuesta que confirme o modifique dicho valor. También examinará el valor límite horario para el dióxido de nitrógeno a la luz de las directrices de la Organización Mundial de la Salud y considerará si el valor límite debe ser confirmado o modificado.

La Comisión prestará una atención especial a la fijación de umbrales de alerta, en consonancia con los fijados para los demás contaminantes contemplados en la presente Directiva, para las PM_{10} y $PM_{2,5}$ o para las fracciones específicas de partículas, según resulte adecuado.

*Artículo 11***Sanciones**

Los Estados miembros determinarán el régimen de sanciones aplicable a las infracciones de las disposiciones nacionales adoptadas en aplicación de la presente Directiva. Las sanciones serán eficaces, proporcionadas y disuasorias.

*Artículo 12***Aplicación**

1. Los Estados miembros adoptarán las disposiciones legales, reglamentarias y administrativas necesarias para cumplir la presente Directiva a más tardar el 19 de julio de 2001. Informarán inmediatamente de ello a la Comisión.

Cuando los Estados miembros adopten dichas disposiciones, éstas harán referencia a la presente Directiva o irán acompañadas de dicha referencia en su publicación oficial. Los Estados miembros establecerán las modalidades de la mencionada referencia.

2. Los Estados miembros comunicarán a la Comisión el texto de las disposiciones de Derecho interno que adopten en el ámbito regulado por la presente Directiva.

*Artículo 13***Entrada en vigor**

La presente Directiva entrará en vigor el vigésimo día siguiente al de su publicación en el *Diario Oficial de las Comunidades Europeas*.

*Artículo 14***Destinatarios**

Los destinatarios de la presente Directiva serán los Estados miembros.

Hecho en Luxemburgo, el 22 de abril de 1999.

Por el Consejo

El Presidente

W. MÜLLER

ANEXO I

VALORES LÍMITE Y UMBRAL DE ALERTA PARA EL DIÓXIDO DE AZUFRE

I. Valores límite del dióxido de azufre

Los valores límite se expresarán en $\mu\text{g}/\text{m}^3$. El volumen se normalizará a la temperatura 293 °K y a la presión de 101,3 kPa.

	Período de promedio	Valor límite	Margen de tolerancia	Fecha de cumplimiento del valor límite
1. Valor límite horario para la protección de la salud humana	1 hora	350 $\mu\text{g}/\text{m}^3$, valor que no podrá superarse en más de 24 ocasiones por año civil	150 $\mu\text{g}/\text{m}^3$ (43 %) a la entrada en vigor de la Directiva, con una reducción lineal a partir del 1 de enero de 2001 y posteriormente cada 12 meses hasta alcanzar el 0 % el 1 de enero de 2005	1 de enero de 2005
2. Valor límite diario para la protección de la salud humana	24 horas	125 $\mu\text{g}/\text{m}^3$, valor que no podrá superarse en más de 3 ocasiones por año civil	Ninguno	1 de enero de 2005
3. Valor límite para la protección de los ecosistemas	Año civil e invierno (del 1 de octubre al 31 de marzo)	20 $\mu\text{g}/\text{m}^3$	Ninguno	19 de julio de 2001

II. Umbral de alerta del dióxido de azufre

El valor correspondiente al umbral de alerta del dióxido de azufre se sitúa en 500 $\mu\text{g}/\text{m}^3$ registrados durante tres horas consecutivas en lugares representativos de la calidad del aire en una área de como mínimo 100 km^2 o en una zona o aglomeración entera, tomando la superficie que sea menor.

III. Informaciones mínimas que deberán comunicarse a la población en caso de superación del umbral de alerta del dióxido de azufre

La información que debe comunicarse a la población incluirá, como mínimo, los detalles siguientes:

- fecha, hora y lugar del episodio y causas del episodio si se conocen;
- previsiones:
 - modificación de las concentraciones (mejora, estabilización o deterioro), causa de la modificación prevista,
 - zona geográfica afectada,
 - duración;
- tipo de población potencialmente sensible al episodio;
- precauciones que debe adoptar la población sensible.

ANEXO II

VALORES LÍMITE PARA EL DIÓXIDO DE NITRÓGENO (NO₂) Y LOS ÓXIDOS DE NITRÓGENO Y UMBRAL DE ALERTA PARA EL DIÓXIDO DE NITRÓGENO

I. Valores límite del dióxido de nitrógeno y de los óxidos de nitrógeno

Los valores límite se expresarán en µg/m³. El volumen se normalizará a la temperatura 293 °K y a la presión de 101,3 kPa.

	Período de promedio	Valor límite	Margen de tolerancia	Fecha de cumplimiento del valor límite
1. Valor límite horario para la protección de la salud humana	1 hora	200 µg/m ³ de NO ₂ que no podrán superarse en más de 18 ocasiones por año civil	50 % a la entrada en vigor de la Directiva, con una reducción lineal a partir del 1 de enero de 2001 y posteriormente cada 12 meses en un porcentaje anual idéntico hasta alcanzar el 0 % el 1 de enero de 2010	1 de enero de 2010
2. Valor límite anual para la protección de la salud humana	1 año civil	40 µg/m ³ de NO ₂	50 % a la entrada en vigor de la presente Directiva, con una reducción lineal a partir del 1 de enero de 2001 y posteriormente cada 12 meses hasta alcanzar el 0 % el 1 de enero de 2010	1 de enero de 2010
3. Valor límite anual para la protección de la vegetación	1 año civil	30 µg/m ³ NO _x	Ninguno	19 de julio de 2001

II. Umbral de alerta del dióxido de nitrógeno

El valor correspondiente al umbral de alerta del dióxido de nitrógeno se sitúa en 400 en µg/m³ registrados durante tres horas consecutivas en lugares representativos de la calidad del aire en una área de como mínimo 100 km² o en una zona o aglomeración entera, tomando la superficie que sea menor.

III. Informaciones mínimas que deberán comunicarse a la población en caso de superación del umbral de alerta del dióxido de nitrógeno

La información que debe comunicarse a la población incluirá, como mínimo, los datos siguientes:

- fecha, hora y lugar del episodio y causa del episodio si se conocen;
- previsiones:
 - modificación de las concentraciones (mejora, estabilización o deterioro), causa de la modificación prevista,
 - zona geográfica afectada,
 - duración;
- tipo de población potencialmente sensible al episodio;
- precauciones que debe adoptar la población sensible.

ANEXO III

VALORES LÍMITE PARA LAS PARTÍCULAS (PM₁₀)

	Período de promedio	Valor límite	Margen de tolerancia	Fecha de cumplimiento del valor límite
FASE 1				
1. Valor límite diario para la protección de la salud humana	24 horas	50 µg/m ³ de PM ₁₀ que no podrán superarse en más de 35 ocasiones por año	50 % a la entrada en vigor de la presente Directiva, con una reducción lineal para el 1 de enero de 2001 y a continuación cada 12 meses hasta alcanzar el 0 % para el 1 de enero de 2005	1 de enero de 2005
2. Valor límite anual para la protección de la salud humana	1 año civil	40 µg/m ³ de PM ₁₀	20 % a la entrada en vigor de la presente Directiva, una reducción lineal para el 1 de enero de 2001 y a continuación cada 12 meses hasta alcanzar el 0 % para el 1 de enero de 2005	1 de enero de 2005
FASE 2⁽¹⁾				
1. Valor límite diario para la protección de la salud humana	24 horas	50 µg/m ³ de PM ₁₀ que no podrán superarse en más de 7 ocasiones por año	Se derivará de los datos y será equivalente al valor límite de la fase 1	1 de enero de 2010
2. Valor límite anual para la protección de la salud humana	1 año civil	20 µg/m ³ de PM ₁₀	50 % el 1 de enero de 2005 y a continuación cada 12 meses en un porcentaje anual idéntico hasta alcanzar el 0 % para el 1 de enero de 2010	1 de enero de 2010
⁽¹⁾ Los valores límites indicativos que deberán revisarse a la luz de una mayor información acerca de los efectos sobre la salud y el medio ambiente, la viabilidad técnica y la experiencia en la aplicación de los valores límite de la fase 1 en los Estados miembros.				

ANEXO IV

VALOR LÍMITE PARA EL PLOMO

	Período de promedio	Valor límite	Margen de tolerancia	Fecha en que debe cumplirse el valor límite
Valor límite anual para la protección de la salud humana	1 año civil	0,5 µg/m ³ ⁽¹⁾	100 % cuando entre en vigor la presente Directiva, con una reducción lineal a partir del 1 de enero de 2001 y posteriormente cada 12 meses hasta alcanzar el 0 % el 1 de enero de 2005 o el 1 de enero de 2010 en las inmediaciones de fuentes específicas, que se notificarán a la Comisión	1 de enero de 2005 o el 1 de enero de 2010, en las inmediaciones de fuentes industriales específicas, situadas en lugares contaminados a lo largo de decenios de actividad industrial. Dichas fuentes se notificarán a la Comisión el 19 de julio de 2001 ⁽²⁾ . En tales casos, el valor límite a partir del 1 de enero de 2005 será de 1,0 µg/m ³

⁽¹⁾ En la revisión de la presente Directiva, mencionada en el artículo 10, se tendrá en cuenta la posibilidad de completar o sustituir el valor límite mediante un valor límite de sedimentación en las inmediaciones de fuentes puntuales.

⁽²⁾ Dicha notificación deberá ir acompañada de una justificación apropiada. La zona en que sean aplicables valores límite superiores no sobrepasará un radio de 1 000 metros a contar de dichas fuentes específicas.

ANEXO V

DETERMINACIÓN DE LOS REQUISITOS NECESARIOS PARA LA EVALUACIÓN DE LAS CONCENTRACIONES DE DIÓXIDO DE AZUFRE, DIÓXIDO DE NITRÓGENO (NO₂), Y ÓXIDOS DE NITRÓGENO (NO_x), PARTÍCULAS (PM₁₀) Y PLOMO EN EL AIRE AMBIENTE DENTRO DE UNA ZONA O ÁGLOMERACIÓN

I. Umbrales superior e inferior de evaluación

Serán aplicables los siguientes umbrales de evaluación superior e inferior:

a) DIÓXIDO DE AZUFRE

	Protección de la salud	Protección de los ecosistemas
Umbral de evaluación superior	60 % del valor límite diario (75 µg/m ³ que no podrán superarse en más de 3 ocasiones por año civil)	60 % del valor límite de invierno (12 µg/m ³)
Umbral de evaluación inferior	40 % del valor límite diario (50 µg/m ³ que no podrán superarse en más de 3 ocasiones por año civil)	40 % del valor límite de invierno (8 µg/m ³)

b) DIÓXIDO DE NITRÓGENO Y ÓXIDOS DE NITRÓGENO

	Valor límite horario para la protección de la salud humana (NO ₂)	Valor límite anual para la protección de la salud humana (NO ₂)	Valor límite anual para la protección de la vegetación (NO _x)
Umbral de evaluación superior	70 % del valor límite (140 µg/m ³ que no podrán superarse en más de 18 ocasiones por año civil)	80 % del valor límite (32 µg/m ³)	80 % del valor límite (24 µg/m ³)
Umbral de evaluación inferior	50 % del valor límite (100 µg/m ³ que no podrán superarse en más de 18 ocasiones por año civil)	65 % del valor límite (26 µg/m ³)	65 % del valor límite (19,5 µg/m ³)

c) PARTICULAS

Los umbrales superior e inferior de evaluación correspondientes a PM₁₀ se basan en los valores límite que deben cumplirse para el 1 de enero de 2010.

	Media diaria	Media anual
Umbral de evaluación superior	60 % del valor límite (30 µg/m ³ que no podrán superarse en más de 7 ocasiones por año civil)	70 % del valor límite (14 µg/m ³)
Umbral de evaluación inferior	40 % del valor límite (20 µg/m ³ que no podrán superarse en más de 7 ocasiones por año civil)	50 % del valor límite (10 µg/m ³)

d) PLOMO

	Media anual
Umbral de evaluación superior	70 % del valor límite (0,35 $\mu\text{g}/\text{m}^3$)
Umbral de evaluación inferior	50 % del valor límite (0,25 $\mu\text{g}/\text{m}^3$)

II. Determinación del rebasamiento de los umbrales superior e inferior de evaluación

El rebasamiento de los umbrales superior e inferior de evaluación se determinará sobre la base de las concentraciones registradas durante los cinco años anteriores, si se dispone de datos suficientes. Se considerará que se ha rebasado un umbral de evaluación si el número total de casos de rebasamiento del valor numérico del umbral en esos cinco años es tres veces superior al número de casos anuales de rebasamiento autorizados.

Cuando los datos disponibles se refieran a un período inferior a cinco años, los Estados miembros podrán combinar las campañas de medición de corta duración realizadas durante el período del año y en los lugares susceptibles de registrar los niveles más altos de contaminación con los resultados obtenidos de los inventarios de emisiones y modelización para determinar los casos de rebasamiento de los umbrales superior e inferior de evaluación.

ANEXO VI

UBICACIÓN DE LOS PUNTOS DE MUESTREO PARA LA MEDICIÓN DE LAS CONCENTRACIONES DE DIÓXIDO DE AZUFRE, DIÓXIDO DE NITRÓGENO Y ÓXIDOS DE NITRÓGENO, PARTÍCULAS Y PLOMO EN EL AIRE AMBIENTE

Las consideraciones que a continuación se exponen se aplican a la medición fija.

I. Macroimplantación**a) Protección de la salud humana**

Los puntos de muestreo orientados a la protección de la salud humana estarán situados de manera que:

- i) proporcionen datos sobre las áreas situadas dentro de las zonas y aglomeraciones que registren las concentraciones más altas a las que la población puede llegar a verse expuesta directa o indirectamente durante un período significativo en comparación con el período de promedio utilizado para el cálculo del valor o valores límite;
- ii) proporcionen datos sobre los niveles registrados en otras áreas dentro de las zonas y aglomeraciones que sean representativas del grado de exposición de la población.

Por regla general, los puntos de muestreo estarán situados de tal manera que se evite la medición de microambientes muy pequeños en las inmediaciones. A título indicativo, un punto de muestreo estará situado de manera que sea representativo de la calidad del aire en sus alrededores dentro de un área de, al menos, 200 m² para emplazamientos orientados al tráfico y de varios kilómetros cuadrados para emplazamientos orientados al fondo urbano.

Cuando sea posible, los puntos de muestreo deberán ser también representativos de emplazamientos similares que no estén en las inmediaciones.

Deberá tenerse en cuenta la necesidad de situar los puntos de muestreo en islas cuando ello sea necesario para la protección de la salud humana.

b) Protección de los ecosistemas y de la vegetación

Los puntos de muestreo dirigidos a la protección de los ecosistemas y de la vegetación estarán situados a una distancia superior a 20 km de las aglomeraciones o a más de 5 km de otras zonas edificadas, instalaciones industriales o carreteras. A título indicativo, un punto de muestreo estará situado de manera que sea representativo de la calidad del aire en sus alrededores dentro de un área de al menos 1 000 km². Los Estados miembros podrán establecer que un punto de muestreo esté situado a una distancia menor o que sea representativo de la calidad del aire en una zona de menor superficie, teniendo en cuenta las condiciones geográficas.

Deberá tenerse en cuenta la necesidad de evaluar la calidad del aire en las zonas insulares.

II. Microimplantación

En la medida de lo posible, deberían seguirse las recomendaciones siguientes:

- no deberían existir restricciones al flujo alrededor de la entrada del muestreo ni obstrucciones que afecten al flujo de aire en la vecindad del sistema de muestreo (se colocará, por regla general, a varios metros de edificios, balcones, árboles y otros obstáculos y, como mínimo, a 0,5 m del edificio más próximo en el caso de puntos de muestreo representativos de la calidad del aire en la línea de edificios);
- en general, el punto de entrada del muestreo debería estar situado entre 1,5 m (zona de respiración) y 4 m sobre el nivel del suelo. En algunos casos podrá resultar necesaria una posición más elevada (hasta 8 m). Posiciones más elevadas pueden ser adecuadas si la estación representa a una zona extensa;
- la entrada del muestreo no debería estar situada en las proximidades de fuentes de emisión para evitar la entrada directa de emisiones sin mezclar con el aire ambiente;
- la salida del sistema de muestreo debería colocarse de tal manera que se evite la recirculación del aire saliente hacia la entrada del sistema;

- situación de los sistemas de muestreo orientados al tráfico:
 - para todos los contaminantes, deberían estar por lo menos a más de 25 m de los grandes cruces y al menos a 4 m del centro del carril más próximo;
 - para el dióxido de nitrógeno, las entradas de aire no deberían estar a más de 5 m del bordillo de la acera;
 - para partículas y plomo, las entradas de aire deberían estar situadas de tal manera que fueran representativas de la calidad del aire cercana a la línea de edificios.

Además, podrán tenerse en cuenta los factores siguientes:

- fuentes de interferencias,
- seguridad,
- accesos,
- posibilidad de conexión a la red eléctrica y telefónica,
- visibilidad del lugar en relación con su entorno,
- seguridad de la población y de los técnicos,
- interés de una implantación común de puntos de muestreo de distintos contaminantes,
- normas urbanísticas.

III. Documentación y revisión de la elección del emplazamiento

Los procedimientos de elección del emplazamiento deberían documentarse completamente en la fase de clasificación, por ejemplo mediante fotografías del area circundante con indicación de la orientación y un mapa detallado. La elección del emplazamiento debería revisarse a intervalos regulares con nueva documentación para demostrar que los criterios de selección siguen siendo válidos.

ANEXO VII

CRITERIOS DE DETERMINACIÓN DEL NÚMERO MÍNIMO DE PUNTOS DE MUESTREO PARA LA MEDICIÓN FIJA DE LAS CONCENTRACIONES DE DIÓXIDO DE AZUFRE (SO₂), DIÓXIDO DE NITRÓGENO (NO₂) Y ÓXIDOS DE NITRÓGENO, PARTÍCULAS Y PLOMO EN EL AIRE AMBIENTE

- I. Número mínimo de puntos de muestreo para la medición fija dirigida a evaluar el cumplimiento de los valores límite establecidos para la protección de la salud humana y sobre los umbrales de alerta en zonas y aglomeraciones donde la medición fija es la única fuente de información

a) *Fuentes difusas*

Población de la zona o aglomeración (miles)	Si las concentraciones superan el umbral de evaluación superior	Si las concentraciones máximas se encuentran entre los umbrales de evaluación superior e inferior	Para SO ₂ y el NO ₂ , en aglomeraciones donde las concentraciones máximas son inferiores al umbral de evaluación inferior
0-250	1	1	no aplicable
250-499	2	1	1
500-749	2	1	1
750-999	3	1	1
1 000-1 499	4	2	1
1 500-1 999	5	2	1
2 000-2 749	6	3	2
2 750-3 749	7	3	2
3 750-4 749	8	4	2
4 750-5 999	9	4	2
> 6 000	10	5	3
	Con respecto al NO ₂ y las partículas: deben instalarse, como mínimo, una estación urbana de fondo y una estación orientada al tráfico		

b) *Fuentes puntuales*

Para evaluar la contaminación en las proximidades de fuentes puntuales el número de puntos de muestreo para la medición fija debe calcularse teniendo en cuenta las densidades de emisión, las pautas probables de distribución de la contaminación del aire ambiente y la exposición potencial de la población.

II. Número mínimo de puntos de muestreo para la medición fija destinada a evaluar el cumplimiento de los valores límite para la protección de ecosistemas y de vegetación en zonas que no sean aglomeraciones

Si las concentraciones máximas son superiores al umbral de evaluación superior	Si las concentraciones máximas se encuentran entre los umbrales de evaluación superior e inferior
1 estación por 20 000 km ²	1 estación por 40 000 km ²

En las zonas insulares el número de puntos de muestreo se calculará teniendo en cuenta las pautas probables de distribución de la contaminación del aire ambiente y la exposición potencial de los ecosistemas y de la vegetación.

ANEXO VIII

OBJETIVOS DE CALIDAD DE LOS DATOS Y PRESENTACIÓN DE LOS RESULTADOS DE LA EVALUACIÓN DE LA CALIDAD DEL AIRE
I. Objetivos de calidad de los datos

A título orientativo para los programas de garantía de la calidad, se han establecido los siguientes objetivos de calidad de los datos, para la exactitud requerida de los métodos de evaluación, la periodicidad mínima y la captura mínima de datos.

	Dióxido de azufre, dióxido de nitrógeno y óxidos de nitrógeno	Partículas y plomo
Medición fija		
Exactitud	15 %	25 %
Captura mínima de datos	90 %	90 %
Medición indicativa		
Exactitud	25 %	50 %
Mínimo número de datos	90 %	90 %
Periodicidad mínima	14 % (una medición por semana al azar, distribuidas uniformemente a lo largo del año, u 8 semanas distribuidas uniformemente a lo largo del año)	14 % (un medición por semana al azar, distribuidas uniformemente a lo largo del año, u 8 semanas distribuidas uniformemente a lo largo del año)
Modelización		
Exactitud:		
Medias horarias	50 - 60 %	sin definir por el momento (!)
Medias diarias	50 %	
Medias anuales	30 %	
Estimación objetiva		
Exactitud	75 %	100 %

(!) Las modificaciones necesarias para adaptar este punto al progreso científico y técnico se adoptarán de conformidad con el procedimiento establecido en el apartado 2 del artículo 12 de la Directiva 96/62/CE.

La exactitud de las mediciones queda definida como se establece en la «Guía de la expresión de la incertidumbre de las medidas» (ISO 1993), o en la ISO 5725-1, «Exactitud (veracidad y precisión) de los métodos de medición y de sus resultados» (1994). Los porcentajes de la tabla se refieren a mediciones individuales, promediadas en el período considerado para el valor límite, para un intervalo de confianza del 95 % (sesgo + 2 veces la desviación estándar). La exactitud de las mediciones en continuo se debería interpretar como aplicable en la región del valor límite apropiado.

La exactitud de la modelización y la estimación objetiva se definen como la desviación máxima de los niveles de concentración medidos y calculados durante el período considerado por el valor límite, sin tener en cuenta la periodicidad de los fenómenos.

Los requisitos para la toma mínima de datos y la periodicidad mínima no incluyen las pérdidas de datos debido a la calibración regular o al mantenimiento normal de la instrumentación.

Como excepción, los Estados miembros podrán aplicar mediciones al azar en lugar de mediciones continuas para las partículas y el plomo, si pueden demostrar a la Comisión que la exactitud con respecto a las mediciones continuas se encuentra dentro del 10 % con un nivel de confianza del 95 %. El muestreo al azar deberá distribuirse uniformemente a lo largo del año.

II. Resultados de la evaluación de la calidad del aire

Debería reunirse la información siguiente para las zonas o aglomeraciones donde se emplean otras fuentes que complementan los datos de la medición o son los únicos medios de evaluación de la calidad del aire:

- descripción de las actividades de evaluación realizadas;
- métodos específicos utilizados, con referencias a descripciones del método;
- fuentes de datos e información;
- descripción de los resultados, incluida la exactitud y los datos sobre la exactitud y, en particular, la extensión de cada área o, si procede, la longitud de la carretera en el interior de la zona o aglomeración en la que las concentraciones superan el valor o valores límite o, según el caso, el valor o valores límite incrementados por el margen o márgenes de tolerancia de cada zona donde las concentraciones superen el umbral de evaluación superior o el umbral de evaluación inferior;
- con respecto a los valores límite cuyo objeto es la protección de la salud humana, la población potencialmente expuesta a concentraciones superiores al valor límite.

Cuando sea posible, los Estados miembros deberían elaborar mapas que indiquen la distribución de las concentraciones dentro de cada zona y aglomeración.

III. Normalización

Respecto al dióxido de azufre y a los óxidos de nitrógeno, el volumen deberá normalizarse temperatura a una de 293°K y presión de 101,3 kPa.

ANEXO IX

MÉTODOS DE REFERENCIA PARA LA EVALUACIÓN DE LAS CONCENTRACIONES DE DIÓXIDO DE AZUFRE, DIÓXIDO DE NITRÓGENO Y ÓXIDOS DE NITRÓGENO, PARTÍCULAS (PM₁₀ Y PM_{2,5}) Y PLOMO**I. Método de referencia para el análisis del dióxido de azufre**

ISO/FDIS 10498 (proyecto de norma) Aire ambiente — Determinación del dióxido de azufre — Método de fluorescencia ultravioleta.

Los Estados miembros podrán utilizar cualquier otro método si pueden demostrar que da resultados equivalentes al método anterior.

II. Método de referencia para el análisis del dióxido de nitrógeno y los óxidos de nitrógeno

ISO 7996: 1985 Aire ambiente — Determinación de la concentración másica de los óxidos de nitrógeno — Método de quimiluminiscencia.

Los Estados miembros podrán utilizar cualquier otro método si pueden demostrar que dicho método da resultados equivalentes al método anterior.

III.A. Método de referencia para el muestreo de plomo

El método de referencia para el muestreo de plomo será el descrito en el anexo de la Directiva 82/884/CEE hasta la fecha en que debe cumplirse el valor límite especificado en el anexo IV de la presente Directiva, a partir de entonces el método de referencia será el del PM₁₀, como se especifica en la sección IV del presente anexo.

Los Estados miembros podrán utilizar cualquier otro método si pueden demostrar que dicho método da resultados equivalentes al método anterior.

III.B. Método de referencia para el análisis del plomo

ISO 9855: 1993 Aire ambiente — Determinación del contenido particulado de plomo en aerosoles capturados en filtros. Método de espectroscopia de absorción atómica.

Los Estados miembros podrán utilizar cualquier otro método si pueden demostrar que dicho método da resultados equivalentes al método anterior.

IV. Método de referencia para el muestreo y análisis de PM₁₀

El método de referencia para el muestreo y análisis de PM₁₀ será el descrito en la norma EN 12341 «Calidad del aire — Procedimiento de ensayo en campo para demostrar la equivalencia de referencia de los métodos de muestreo para la fracción PM₁₀ de materia en suspensión». El principio de medición se basa en la captación en un filtro de la fracción de PM₁₀ de materia en suspensión del ambiente y en la determinación gravimétrica de la masa.

Los Estados miembros podrán utilizar cualquier otro método si pueden demostrar que dicho método da resultados equivalentes al método anterior, o cualquier otro método si el Estado miembro de que se trate puede demostrar que muestra una relación coherente con el método de referencia. En tal caso, los resultados obtenidos con dicho método deberán corregirse mediante un factor pertinente para producir resultados equivalentes a los que se habrían obtenido con el método de referencia.

Los Estados miembros informarán a la Comisión del método utilizado para el muestreo y análisis de PM₁₀. La Comisión llevará a cabo, lo antes posible, ejercicios de intercomparación de los métodos de muestreo y análisis de PM₁₀ con el objeto de suministrar información para la revisión de las disposiciones de la presente Directiva de conformidad con el artículo 10.

V. Método de referencia provisional para el muestreo y análisis de PM_{2,5}

La Comisión, en consulta con el comité mencionado en el artículo 12 de la Directiva 96/62/CE, presentará directrices para un método de referencia provisional adecuado para el muestreo y análisis de PM_{2,5}, en la fecha estipulada en el artículo 12, de la presente Directiva.

Los Estados miembros podrán utilizar cualquier otro método que consideren adecuado.

Los Estados miembros informarán a la Comisión del método utilizado para el muestreo y análisis de PM_{2,5}. La Comisión llevará a cabo, lo antes posible, ejercicios de intercomparación de los métodos de muestreo y análisis de PM_{2,5} con el objeto de suministrar información para la revisión de las disposiciones de la presente Directiva de conformidad con el artículo 10.

VI. Técnicas de modelización de referencia

Las técnicas modelización de referencia no pueden especificarse en este momento. Las modificaciones para adaptar este punto al progreso científico y técnico se adoptarán de conformidad con el procedimiento establecido en el apartado 2 del artículo 12 de la Directiva 96/62/CE.

● COLEGIO
DE INGENIEROS
DE CHILE A.G.

000437

318 # 18846 -
COMISION NACIONAL DEL MEDIO AMBIENTE
OFICINA DE PARTES Y ARCHIVO

Nº INGRESO: 3521 / 3186

FECHA: 10 ABR 2000

DESPACHADO:

CPS:

A Sapag

Santiago, 7 de Abril de 2000

G/175

Señor
Alvaro Sapag R.
Director Ejecutivo (S)
Comisión Nacional del Medio Ambiente
PRESENTE

De nuestra consideración:

Acusamos recibo de ORD. OF. N° 00172 en el que nos informa que se ha dado inicio al proceso de revisión de las normas primarias de calidad de aire, con la publicación en el Diario Oficial de la Resolución Exenta N° 1514 de esa Comisión y nos solicita la nominación de un representante oficial y un reemplazante, para integrar un Comité Ampliado que intervenga en su elaboración.

Por medio de la presente comunicamos a usted la nominación del Ing. Aníbal Mege Thierry como representante oficial del Colegio de Ingenieros de Chile A.G. al Comité Ampliado antes mencionado.

Saluda atentamente a usted,



Ing. PEDRO TORRES OJEDA
Gerente

c.c. Ing. Anibal Mege Thierry

ACTA DE REUNION DE COMITÉ OPERATIVO
1ª Reunión del Grupo de Trabajo Anhídrido Sulfuroso

FECHA REUNION : 17 de Abril de 2000

LUGAR : CONAMA. Obispo Donoso 6. Santiago

ASISTENCIA : Se adjunta hoja de asistencia

Tabla :

1. Presentación de antecedentes sobre normativa internacional (Rodrigo Cerda, OPS)
2. Discusión

Discusión :

- En relación a las normativas internacionales presentadas se comenta que Argentina ha sido, en general, muy renovadora en su normativa. En el caso de Venezuela, se sostiene que sus normas aportan al tema de los picks, y que no se sabe bien si tienen incorporado niveles de emergencia. Se informa que Venezuela tiene una red nacional de calidad del aire desde 1981, con 11 estaciones, 4 de ellas en Caracas. Se aclaran los valores de norma para el caso de Japón.
- **R.Vargas** (*S.Salud VIII*) menciona que sería importante contar con una análisis de la relación entre emisión y calidad en otros países. **F.Farías** (*CONAMA*) sostiene que sería muy complejo establecer esas relaciones, sin embargo informa que para los casos de las fundiciones de cobre en Chile se cuenta con ese tipo de relación. **R.Cerda** (*OPS*) informa que se cuenta con antecedentes de emisiones al aire de SO₂ en Costa Rica.
- **I.Olaeta** (*SESMA*) consulta si se considerará en la normativa el sinergismo entre SO₂ y PM₁₀. **F.Farías** (*CONAMA*) indica que, si bien es cierto, la OMS al definir los valores guías para SO₂ ponía una nota al pie de página respecto a su relación con el material particulado, en su última revisión las guías de la OMS, establecen que SO₂ por sí solo presenta problemas y se mantiene los valores recomendados pero sin la nota al pie de la página.
- **C.Salvo** (*SONAMI*) consulta qué información se tiene en Chile respecto al impacto del SO₂ en la salud de las personas, como realidad nacional. **F.Farías** (*CONAMA*) sostiene que los procesos normativos actuales en Chile están recogiendo la realidad local y esos serán los temas a discutir en el presente proceso. Indica que si bien la OMS fija valores estrictos, ésta no se refiere a condiciones de excedencia. En la Comunidad Europea, en tanto, se dan varios años para el cumplimiento de las metas. En el caso de Chile se evaluará la realidad nacional. Anuncia que se contempla la revisión de distintos ámbitos en las próximas reuniones, tales como salud nacional e internacional, emisiones, etc. **C.Santana** (*CONAMA RM*) a su vez, señala que no hay que caer en el inmovilismo. Un inicio básico es la existencia de efectos y que se debe avanzar en la regulación del contaminante a la par con la obtención de mayores antecedentes. **A.Tchernitchin** (*Colegio Médico*), señala que no existe mucha diferencia en la sensibilidad entre un grupo de personas y otros, en lo que se refiere a adaptación o acostumbramiento a un contaminante. Pueden existir deferencias en cuanto a los efectos agudos. En ese sentido es muy válida la consideración de antecedentes y estudios internacionales. **A.Muñoz** (*ASIMET*) a su vez, señala no estar de acuerdo con CONAMA RM, por cuanto él estima que es necesario contar con los estudios pertinentes, a objeto de tener una norma justificable científicamente y ésta debe ser aplicable en Chile.

- **R.Pedrerros (CODELCO)** sostiene que ha escuchado de otros procesos normativos que hacer un estudio requiere gran tiempo. Si uno toma la normativa extranjera hay que revisar el tema económico. Por ejemplo, uno podría ser muy estricto en normar uranio, pero en SO2 hay que considerar la realidad chilena.



Rodrigo Lucero Ch.
Depto. Descontaminación, Planes y Normas
CONAMA

Revisión Normas de Calidad del Aire

ACTA DE REUNION DE COMITÉ OPERATIVO
1ª Reunión del Grupo de Trabajo Ozono y Dióxido de Nitrógeno

FECHA REUNION : 17 de Abril de 2000

LUGAR : CONAMA. Obispo Donoso 6. Santiago

ASISTENCIA : Se adjunta hoja de asistencia

Tabla :

1. Introducción (Fernando Farías, Depto. Descontaminación, Planes y Normas)
2. Presentación de antecedentes sobre normativa internacional (Rodrigo Cerda, OPS)
3. Discusión

Discusión :

- En relación a los antecedentes de la OMS presentados se señala que corresponden al documento de guías emitido en 1999, el cual está disponible en la página web. En cuanto a los datos de la EPA, los datos presentados también corresponden a 1999.
- **C.Santana** (CONAMA RM) consulta, en relación a la norma horaria y a la de 8 horas, cuál de ellas es más estricta o más difícil de cumplir en EEUU. **F.Farías** (CONAMA) indica que, en general, una vez que se cumple la horaria, después se puede cumplir la de 8 horas. **C.Santana** (CONAMA RM) sostiene que en Santiago, pareciese darse una situación distinta, dado que las variaciones en las concentraciones son muy bruscas. **F.Farías** (CONAMA) indica que se presentarán los datos de la red MACAM en una futura reunión.
- **I.Olaeta** (SESMA) comenta que la problemática del ozono contempla diferentes factores y es bastante compleja. Informa que en Santiago, gran parte de las excedencias ocurren en primavera y verano, con peaks en septiembre y marzo. Sin embargo, también en invierno se supera la normas. **C.Santana** (CONAMA RM) agrega que en las 8 estaciones de la red se ha superado la norma, por lo que no se trata de una situación local. En Peldehue, en la zona norte no urbana, en Talagante también se ha estado superando la norma. Sostiene que las mayores concentraciones se han registrado en la zona nororiental y hacia el Cajón del Mapocho, sin embargo, informa que en el resto de la ciudad las concentraciones no son bajas. Las mayores concentraciones en el resto de la ciudad no ocurren en verano. En relación a situaciones de pre-emergencia por ozono, se aclara que actualmente no se tienen valores críticos asociados a la norma.
- **A.Mege** (SOFOFA) coincide en que se trata de un problema difícil por la complejidad de las emisiones. Aclara que las emisiones de la industria son más complicadas de controlar en comparación con las fuentes móviles. Se tiene emisiones de COV a través de escapes de gas licuado, bencineras, etc. Los causantes del O₃ son difíciles de controlar y de gran dispersión. **P.Oyola** (CONAMA RM) sostiene que no se conoce ningún país que haya logrado controlar el problema de la formación de O₃, pero que si se ha reducido. En Chile aún se desconoce cuál de los precursores (COV o NO_x) controla realmente la formación del ozono. Los efectos en la formación del ozono no se han visto claramente con la reducción de uno de los precursores. Por otro lado opina que es importante definir claramente el objetivo de protección de la norma.



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COMISION NACIONAL DEL MEDIO AMBIENTE
 DEPTO. DESCONTAMINACION, PLANES Y NORMAS

Reunión "Revisión Normas Primarias de Calidad de Aire para SO2, PTS, CO, NO2 Y O3"
 Santiago, Abril 17 de 2000

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Normas Primarias de Calidad de Aire NO₂, O₃ y SO₂

Organización Panamericana de la Salud

El Proceso Normativo a nivel Internacional

- El objetivo del proceso de fijación y revisión de normas de calidad del aire en exteriores es establecer puntos de referencia cuantitativos de los niveles de contaminación coherentes con un riesgo aceptable para la protección de la salud y el ambiente que tengan fuerza legal.
- Las normas se pueden clasificar de varias formas. Una forma de clasificarlas es en primarias y secundarias. Las normas primarias constituyen niveles máximos permisibles de concentración de contaminantes del aire en exteriores para tiempos promedio de muestreo variables coherentes con un riesgo aceptable para la protección de la salud pública.
- Las normas secundarias constituyen los niveles máximos permisibles de concentración de contaminantes del aire en exteriores para tiempos promedio de muestreo variables coherentes con un riesgo aceptable para la protección de los recursos naturales y el patrimonio ambiental.
- Otra forma de clasificar las normas es de acuerdo a las áreas en donde se deben cumplir estableciendo valores para áreas sensibles de protección especial, áreas urbanas y rurales típicas y áreas industriales especiales.

•“En México, la normatividad con respecto a calidad del aire establece valores límite que se dividen en los de exposición aguda y los de exposición crónica, estos últimos para la protección de la salud de la población susceptible , además de que se cuenta con valores de alerta.

•La Comisión de Comunidades Europeas, presenta valores límites para la protección de la salud, valores límite para ecosistemas y vegetación y umbrales de alerta .

•En Estados Unidos de Norteamérica se cuenta con estándares nacionales primarios y secundarios de calidad de aire, definiéndose a los estándares primarios como los niveles de calidad de aire a los cuales el administrador de la EPA juzga necesario, con un adecuado margen de seguridad, proteger la salud pública, y los secundarios que definen niveles de calidad de aire a los cuales este mismo administrador juzga necesario proteger el bienestar público de cualquier efecto adverso anticipado o conocido de un contaminante .”

- En algunos países como Estados Unidos y la Unión Europea, la ley fija plazos específicos para el cumplimiento de las normas y sanciones para las zonas afectadas que no los cumplan.

- En otros países como Canadá y Japón, las normas de calidad del aire en exteriores son tratadas como objetivos a lograr a largo plazo sin fecha límite. Sin embargo, se requiere que las instituciones fiscalizadoras y las fuentes de emisión lleguen a consensos sobre las formas y fechas para el cumplimiento de los planes de acción para mejorar la calidad del aire.

Las normas son un instrumento muy poderoso no sólo por su capacidad de regular y controlar los procesos productivos, sino particularmente por su capacidad de inducir cambios de conducta e internalizar costos ambientales, lo que las convierte en un mecanismo que promueve cambios tecnológicos. (Kork ,M; Farias F, 2000)

Valor de la norma

- El valor de la norma es el límite máximo permisible o rango de límites máximos permisibles especificados para la concentración de un contaminante en un tiempo promedio de muestreo determinado.
- La norma de Brasil para dióxido de nitrógeno para un tiempo promedio de muestreo de 1 año tiene un solo valor límite de $100 \mu\text{g}/\text{m}^3$.
- La norma de Canadá tiene dos valores límites, un nivel máximo aceptable de $100 \mu\text{g}/\text{m}^3$ y un nivel máximo deseable de $60 \mu\text{g}/\text{m}^3$.
- El nivel máximo aceptable intenta proveer una protección adecuada contra los efectos adversos en humanos, animales, vegetación, suelos, agua, materiales y visibilidad.
- El nivel máximo deseable define una meta a largo plazo y provee una base para las políticas de prevención del deterioro de la calidad del aire en áreas no contaminadas.
- Las normas de China. para cada contaminante y tiempo promedio de muestreo la norma establece tres valores. Un valor para las regiones definidas como áreas de protección especial como parques nacionales y sitios históricos (Región Tipo I), un valor para regiones definidas como áreas urbanas y rurales típicas (Región Tipo II) y un valor para regiones definidas como áreas industriales especiales (región Tipo III). La norma china para dióxido de nitrógeno para un tiempo promedio de muestreo de un año tiene un valor para las Regiones Tipo I y II de $40 \mu\text{g}/\text{m}^3$ y para la Región Tipo III de $80 \mu\text{g}/\text{m}^3$.

Umbral de alerta

- El umbral de alerta es un nivel de concentración de un contaminante a partir del cual una exposición de breve duración supone un riesgo para la salud humana y por encima del cual se deben tomar medidas inmediatas de reducción de emisiones y de precaución para la población.
- Algunos países como Canadá o la Unión Europea ha establecido un umbral de alerta. Las directivas de la Unión Europea establecen un umbral de alerta para dióxido de nitrógeno de $400 \mu\text{g}/\text{m}^3$ registrados durante tres horas consecutivas
- En el caso de países como Brasil, Chile, México y Estados Unidos, han establecido varios umbrales de alerta por encima de los cuales se toman medidas cada vez más estrictas.
- La norma de Brasil establece tres umbrales de alerta: $1130 \mu\text{g}/\text{m}^3$ (atención), $2260 \mu\text{g}/\text{m}^3$ (alerta) y $3000 \mu\text{g}/\text{m}^3$ (emergencia) para un tiempo promedio de muestreo de una hora.

Frecuencia de la excedencia permitida

- La frecuencia de la excedencia permitida es el número máximo de excedencias del valor de la norma para un tiempo promedio de muestreo determinado permitido en un período de tiempo, generalmente un año.
- La frecuencia de excedencia permitida depende de la forma en que se implementa la norma dentro de la estrategia de manejo de la calidad del aire.
- Por ejemplo, en los Estados Unidos, la ley demanda grandes cambios en las estructuras de los programas de calidad del aire para las zonas que pasan del cumplimiento al incumplimiento de una norma.
- En estos casos, es fundamental que la frecuencia máxima permitida sea definida en una forma estadísticamente sólida para que zonas no tengan el potencial de pasar del cumplimiento al incumplimiento de una norma de un año a otro como resultado de las fluctuaciones aleatorias en las concentraciones del contaminante en el ambiente, a pesar del hecho de que las emisiones permanecían inalteradas.
- En otros países como Canadá y Japón, las normas de calidad del aire en exteriores son tratadas como objetivos a lograr a largo plazo sin fechas fijas para su cumplimiento y no hay demandas legales especiales para las zonas que pasan del cumplimiento al incumplimiento de la norma. Por lo tanto, en estos casos, no es tan necesario definir la frecuencia máxima permitida en una forma estadísticamente sólida.

Guías de calidad del Aire de OMS

- La publicación de la OMS titulada “Guías globales sobre calidad del aire” consolida los resultados de los estudios del impacto de los contaminantes del aire en la salud y ofrece recomendaciones sobre valores guía para los niveles de los contaminantes en el aire y sus tiempos promedio de exposición coherentes con un riesgo aceptable para la protección de la salud desde un punto de vista estrictamente científico. Los valores guía representan metas ideales hacia las cuales los países deberían avanzar

Criterios Estalecidos por OMS para determinación de peligro de contaminante

- La OMS recomienda cinco criterios para determinar el peligro de un contaminante (OMS, 1976):
 - .Severidad y frecuencia de los efectos adversos en la salud observados o sospechosos.
 - .Ubicuidad y abundancia del contaminante en el aire.
 - .Persistencia del contaminante en el ambiente.
 - .Transformaciones del contaminante en el ambiente y alteraciones metabólicas.
 - .Tamaño de la población expuesta.

Idealmente, al concluir esta etapa debería ser posible establecer valores guías para los niveles de los contaminantes y sus tiempos promedio de exposición que no ponen ningún peligro a la salud y el ambiente. Sin embargo, los juicios y consensos científicos son inevitables por la falta de información e incertidumbres en los resultados de los estudios.

Lineamientos OMS periodo 1987-1997

Componente	Lineamiento OMS, 1987 $\mu\text{g}/\text{m}^3$	Lineamiento OMS, 1997 $\mu\text{g}/\text{m}^3$	Intervalo Promedio
SO ₂		500	10 min.
	125	125	24 h.
NO ₂		50	1 año
		40	1 año
	400	200	1h.
	150		24h.
O ₃	100-120	120	8 h.
	150-200		1 h.

El proceso Normativo de calidad del Aire en la Región de las Américas

- En 13 países de América Latina y el Caribe se han fijado normas de calidad del aire en exteriores para contaminantes tradicionales: Argentina, Belice, Bolivia, Brasil, Chile, Colombia, Costa Rica (aprobado por el Ministerio de Salud y en consulta pública para su promulgación definitiva), Cuba, Ecuador, Guatemala, Jamaica, México, Perú (propuesta) y Venezuela.

Normas Primarias de Calidad de Aire - NO₂

Organización Panamericana de la Salud

Características del NO₂

- El NO₂ es un gas de color marrón claro que se produce directa e indirectamente por la quema de combustibles a altas temperaturas como los automóviles o las plantas termoeléctricas. En el proceso de combustión, el nitrógeno en el combustible y aire se oxida para formar principalmente óxido nítrico (NO) y en menor proporción NO₂.
- El NO emitido se convierte en NO₂ mediante reacciones fotoquímicas condicionadas por la luz solar. El NO₂ se combina con compuestos orgánicos volátiles en presencia de luz solar para formar ozono. También, se combina con agua para formar ácido nítrico y nitratos. Esto contribuye a la producción de lluvia ácida y al aumento de los niveles de MP₁₀ y MP_{2,5}.
- El NO es relativamente inofensivo. Sin embargo, el NO₂ puede causar problemas respiratorios principalmente en asmáticos y niños. Estudios en animales han reportado que una exposición de corto plazo a NO₂ puede debilitar los mecanismos de defensa e incrementar la susceptibilidad a infecciones respiratorias. Estudios de exposición de largo plazo han demostrado cambios estructurales en los pulmones de animales.

Umbrales de alerta para NO₂

- Cuando las concentraciones de NO₂ sobrepasan los umbrales de alerta, se toman medidas inmediatas para reducir emisiones y prevenir a la población.
- Por ejemplo, la Unión Europea ha establecido el umbral de alerta en 400 µg/m³ para un tiempo promedio de muestreo de una hora registrados durante tres horas consecutivas.
- Otros países han establecido varios umbrales de alerta por encima de los cuales se toman medidas cada vez más estrictas. Por ejemplo, los umbrales de alerta establecidos en la norma de Brasil son: 1.130 µg/m³ (atención), 2.260 µg/m³ (alerta) y 3.000 µg/m³ (emergencia) para un tiempo promedio de muestreo de una hora.
- Los planes de acción para mejorar la calidad del aire deben especificar las medidas que se deben tomar en caso de que los niveles de contaminación sobrepasen los umbrales de alerta.

Métodos de referencia para el muestreo y análisis de NO₂

- Estos pueden ser automáticos o manuales.
- Por ejemplo, el método de referencia establecido en las normas de Chile es el método automático para la toma continua de muestras de NO₂ basado en quimiluminiscencia.
- En Venezuela son el método automático basado en quimiluminiscencia y el método manual basado en colorimetría usando una muestra tomada en arsenito de sodio en forma continua durante 24 horas.
- Generalmente, la frecuencia mínima de muestreo usando el método manual es cada 3 días. Información detallada sobre los métodos de referencia pueden obtenerse en los documentos de la ISO.

Valores guía para NO₂ recomendados por la OMS

Efectos sobre la salud	Nivel de efecto observable ($\mu\text{g}/\text{m}^3$)	Factor de incertidumbre	Valor guía ($\mu\text{g}/\text{m}^3$)	Tiempo promedio de exposición
Ligeros cambios en función pulmonar de individuos asmáticos	365 - 565	0.5	200	1 hora
			40	1 año

Estándares de Calidad de Aire Para Diferentes Comunidades en $\mu\text{g}/\text{m}^3$ (ppm)

Contaminante	Tiempo promedio	Brasil	Chile	Colombia	México	Perú	Venezuela
Bióxido de Azufre (SO_2).	Anual ^b	80 (0.03)	80 (0.03)	100 (0.04)	79 (0.03)	160 (0.06)	80 (0.03)
	24 Horas 1 Hora	365 (0.14)	365 (0.14)	400 (0.15)	341 (0.13)		365 (0.14)
Bióxido de Nitrógeno (NO_2).	Anual ^b	100 (0.05)	100 (0.05)	100 (0.05)			100 (0.05)
	24 Horas 1 Hora	320	470 (0.25)		395 (0.21)		

Nota : Todos los valores horarios y de 24 horas, no deberán excederse más de una vez por año.

^a Media Geométrica.

^b Media Aritmética.

Fuente : Martínez P. Romieu I. Introducción al monitoreo atmosférico; ECO- OPS/OMS, México, 1997

Estándares de Calidad de Aire SO₂ y NO₂ 2 µg/m³ (ppm)

Contaminante	Tiempo promedio	Guías OMS	E.U.A. EPA	E.U.A. Estado De California	Japón	Alemania	Guías CE, hasta 1996	
							Actuales	Consideradas para 1997
Bióxido de Azufre (SO ₂)	Anual ^b	50 (0.02)	79			140	140	125
	24 Horas	125 (0.04)	(0.03)			400 ^c	400 ^c	350 ^c
	1 Hora 10 min.	500 (0.18)	341(0.13) 1046(0.40)		125 (0.04) (0.1)			
Bióxido de Nitrógeno, NO ₂	Anual ^c	40-50 (0.02)	100 (0.05)		(0.04 - 0.06)	80		40
	24 Horas 1 Hora	200 (0.11)	300 (0.16)	(0.25)		200 ^c	200 ^c	200 ^c

^a Media Geométrica.

^b Media Aritmética

^c 98 Percentil.

^d Valores de alerta.

Valores límite para la protección de la salud pública, tiempos promedio de muestreo y frecuencias de excedencia permitida para las normas de NO₂ en América Latina y el Caribe, Canadá, China, Estados Unidos, Japón y la Unión Europea.

País	Valor límite (µg/m ³) ¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Argentina ^{2,3}	846	1 hora	El valor límite no podrá superarse en ninguna ocasión
	282	24 horas	
Belice ^{4,5}	30 (I), 80 (II), 120 (III)		El valor límite no podrá superarse en ninguna ocasión
Bolivia	400	1 hora	El valor límite no podrá superarse en ninguna ocasión
	150	24 horas	

País	Valor límite ($\mu\text{g}/\text{m}^3$) ¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
México	395	1 hora	El valor límite no podrá superarse en más de una ocasión por año
Venezuela	100 – 300	24 horas	El valor $100\mu\text{g}/\text{m}^3$ límite no podrá superarse en más de 50% de las mediciones y el valor $300\mu\text{g}/\text{m}^3$ límite no podrá superarse en más de 5% de las mediciones por año.

País	Valor límite ($\mu\text{g}/\text{m}^3$) ¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Canadá ⁷	400 (acceptable) 1.000 (tolerable)	1 hora	
	200 (acceptable) 300 (tolerable)	24 horas	
	60 ⁶ (deseable) 100 ⁶ (acceptable)	1 año	
China ⁴	120 (I, II), 240 (III)	1 hora	El valor límite no podrá superarse en ninguna ocasión
	80 (I, II), 120 (III)	24 horas	
	40 (I, II), 80 (III) ⁶	1 año	

País	Valor límite ($\mu\text{g}/\text{m}^3$) ¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Estados Unidos	100⁶	1 año	El valor límite no podrá superarse en ninguna ocasión
Japón	80-110	24 horas	El valor límite no podrá superarse en ninguna ocasión
Unión Europea	200	1 hora	El valor límite no podrá superarse en más de 18 ocasiones por año
	40⁶	1 año	El valor límite no podrá superarse en ninguna ocasión

1 Las concentraciones de los contaminantes se calculan para condiciones de 1 atmósfera y 298 K.

2 Óxidos de nitrógeno medidos como dióxido de nitrógeno

3 Valores de la norma son aproximados: 0,45 ppm (1 hora) y 0,15 ppm (24 horas)

4 (I) áreas sensibles de protección especial; (II) áreas urbanas y rurales típicas y (III) áreas industriales especiales.

5 El tiempo promedio de muestreo no está estipulado en la norma

6 Promedio aritmético anual

7 El nivel máximo deseable define una meta a largo plazo y provee una base para las políticas de prevención del deterioro de la calidad del aire en áreas no contaminadas. El nivel máximo aceptable intenta proveer una adecuada protección contra los efectos adversos en humanos, animales, vegetación, suelos, agua, materiales y visibilidad. El nivel máximo tolerable indica concentraciones de contaminantes por encima de las cuales se deben tomar medidas inmediatas para proteger la salud de la población en general.

Normas Primarias de Calidad de Aire - O₃

Organización Panamericana de la Salud

Características del Ozono (O₃)

- El O₃ es un gas incoloro que se forma mediante una serie de complejas reacciones en la troposfera. En términos sencillos, se forma mediante la reacción química del NO₂ y compuestos orgánicos volátiles (COV) en presencia de luz solar.
- La concentración de ozono en una determinada localidad depende de varios factores, incluida las emisiones de óxidos de nitrógeno y COV en la zona, el tipo de COV emitidos, la intensidad de la luz solar y las condiciones del clima.
- Cabe anotar que el ozono producido naturalmente en la estratosfera es beneficioso porque protege a la tierra de la nociva radiación ultravioleta del sol.

Efectos en la Salud del O₃

- La población de mayor riesgo a la contaminación por O₃ son los ancianos, neonatos y nonatos.
- El O₃ irrita las membranas de la mucosa de la nariz, garganta y tracto respiratorio.
- Los síntomas asociados a la exposición a O₃ incluyen: tos, dolores en el pecho e irritación de la garganta. Los efectos son más severos en individuos con sistemas respiratorios sensibles.
- Un tema de gran preocupación es la posibilidad de efectos crónicos causados por exposiciones repetidas a O₃.
- Estudios en el laboratorio muestran que personas expuestas a bajos niveles de ozono por un período mayor de 6 a 8 horas pueden desarrollar una inflamación pulmonar y estudios en animales indican que si las exposiciones a O₃ son repetidas a lo largo de la vida, la inflamación pulmonar puede causar un daño permanente al tejido pulmonar, causar una disminución de la función pulmonar y reducir la elasticidad de los tejidos pulmonares.

Umbrales de alerta para O₃

- Cuando las concentraciones de O₃ sobrepasan estos umbrales, se toman medidas inmediatas para reducir emisiones y prevenir a la población.
- Brasil ha establecido varios umbrales de alerta por encima de los cuales se toman medidas cada vez más estrictas. Los umbrales de alerta establecidos en la norma de Brasil son: 400 µg/m³ (atención), 800 µg/m³ (alerta) y 1.000 µg/m³ (emergencia) para un tiempo promedio de muestreo de una hora.
- Los planes de acción para mejorar la calidad del aire deben especificar las medidas que se deben tomar en caso de que los niveles de contaminación sobrepasen los umbrales de alerta.

Métodos de referencia para el muestreo y análisis de O₃

- Los métodos de referencia para el muestreo y análisis de O₃ establecidos en las normas son generalmente los métodos automáticos para la medición continua de O₃ basados en quimiluminiscencia o absorción ultravioleta.
- Información detallada sobre los métodos de referencia pueden obtenerse en los documentos de la ISO y en los documentos criterio para contaminantes tradicionales de la U.S. EPA

Valores Guía para O₃ Recomendados por la OMS

Efectos sobre la salud	Nivel de efecto observable (µg/m ³)	Factor de incertidumbre	Valor guía (µg/m ³)	Tiempo promedio de exposición
Respuestas de la función del sistema respiratorio	n.a	n.a	120	8 horas

n.a. no aplicable

Estándares de calidad de aire para O₃ en mg/m³

Contaminante	Tiempo promedio	Brasil	Chile	Colombia	México	Perú	Venezuela
Ozono (O ₃).	8 Horas 1 Hora	160 (0.08)	160 (0.08)	170 (0.09)	216 (0.11)		200 (0.10)

Estándares de calidad del aire O₃ug/m³ (ppm)

Contaminante	Tiempo promedio	Guías OMS	E.U.A.E PA	E.U.A. Estado De California	Japón	Alemania	Guías CE, hasta 1996	
							Actuales	Consideradas para 1997
Ozono (O ₃).	8 Horas 1 Hora	120 (0.06)	235 (0.12)	(0.10)	118 (0.06)	180 - 360 ^d		

Todos los valores horarios y de 24 horas no deberán excederse más de una vez por año.

^d Valores de alerta

Fuente: , Martínez P. Romieu I, Introducción al monitoreo atmosférico; ECO- OPS/OMS, México. 1997

- Los valores de ozono que utiliza Alemania son valores de alerta, correspondiendo el valor de 180 al primer umbral, que al rebasarse se notificará a la población, y el valor de 360, al segundo umbral, que al rebasarse se recomendará a la población permanecer en casa.

Valores límite para la protección de la salud pública, tiempos promedio de muestreo y frecuencias de excedencia permitida para las normas de O₃ en América Latina y el Caribe, Canadá, China, Estados Unidos, Japón y la Unión Europea.

País	Valor límite (µg/m ³) ¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Argentina ₂	195	1 hora	El valor límite no podrá superarse en ninguna ocasión
Bolivia	236	1 hora	El valor límite no podrá superarse en ninguna ocasión
Brasil	160	1 hora	El valor límite no podrá superarse en más de una ocasión por año

País	Valor límite ($\mu\text{g}/\text{m}^3$) ¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Chile ⁴	160	1 hora	El valor límite no podrá superarse en más de una ocasión por año
Colombia ⁴	170	1 hora	El valor límite no podrá superarse en más de una ocasión por año
Costa Rica	160	1 hora	El valor límite no podrá superarse en ninguna ocasión
Cuba	160	20 minutos	El valor límite no podrá superarse en ninguna ocasión
	30	24 horas	

País	Valor límite ($\mu\text{g}/\text{m}^3$) ¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Ecuador ⁴	200	1 hora	El valor límite no podrá superarse en más de una ocasión por año
México	216	1 hora	El valor límite no podrá superarse en más de una ocasión por año en un período de tres años.
Venezuela ⁴	240	1 hora	El valor límite no podrá superarse en más de 0.02% de las mediciones por año.

País	Valor límite ($\mu\text{g}/\text{m}^3$) ¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Canadá ⁵	100 (deseable) 160 (aceptable) 300 (tolerable)	1 hora	
	30 (deseable) 50 (aceptable) 30⁶ (aceptable)	24 horas	
		1 año	
China ⁷	120 (I), 160 (II), 200 (III)	1 hora	El valor límite no podrá superarse en ninguna ocasión

País	Valor límite ($\mu\text{g}/\text{m}^3$) ¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Estados Unidos	235 ⁸	1 hora	El valor límite no podrá superarse en más de tres ocasiones por el máximo diario en un período de tres años consecutivos
	160 ⁹	8 horas	El promedio de tres años consecutivos del cuarto valor más alto anual del máximo diario no debe superar la norma.
Japón ¹⁰	120	1 hora	El valor límite no podrá superarse en ninguna ocasión
Unión Europea ¹¹	110	8 horas	El valor límite no podrá superarse en ninguna ocasión

- 1 Las concentraciones de los contaminantes se calculan para condiciones de 1 atmósfera y 298 K.
- 2 Valores de la norma son aproximados: 0,10 ppm (1 hora)
- 3 No tiene normas para O_3
- 4 Oxidantes totales expresados como ozono
- 5 El nivel máximo deseable define una meta a largo plazo y provee una base para las políticas de prevención del deterioro de la calidad del aire en áreas no contaminadas. El nivel máximo aceptable intenta proveer una adecuada protección contra los efectos adversos en humanos, animales, vegetación, suelos, agua, materiales y visibilidad. El nivel máximo tolerable indica concentraciones de contaminantes por encima de las cuales se deben tomar medidas inmediatas para proteger la salud de la población en general.
- 6 Promedio aritmético
- 7 (I) áreas sensibles de protección especial; (II) áreas urbanas y rurales típicas y (III) áreas industriales especiales.
- 8 Esta norma no se aplicará más para una zona una vez que la Agencia de Protección Ambiental determine que la zona está por debajo de la norma.
- 9 Valor es aproximado: 0.08 ppm
- 10 Oxidantes fotoquímicos totales
- 11 Umbral de protección de la salud. El promedio de 8 horas es de tipo móvil sin traslape; se calcula cuatro veces al día sobre la base de 8 valores horarios comprendidos entre 0 y 9 horas, 8 y 17 horas, 16 y 1 horas y 12 y 21 horas. El umbral de información a la población $180 \mu\text{g}/\text{m}^3$ en un tiempo promedio de muestreo de 1 hora.

Normas Primarias de Calidad de Aire - SO_2

Organización Panamericana de la Salud

Características del SO₂

- El SO₂ es un gas incoloro e inodoro en concentraciones bajas y de olor acre en concentraciones altas. Es producido por la combustión de combustibles fósiles que contienen azufre como el carbón y el petróleo y por varios procesos industriales, como la fundición de metales no ferrosos, la producción de ácido sulfúrico y la conversión de pulpa en papel.
- Cuando el SO₂ y los oxidantes fotoquímicos reaccionan en la atmósfera, se forma el trióxido de azufre, el cual se combina con agua para formar ácido sulfúrico y partículas sulfatadas. Esto contribuye a la producción de lluvia ácida y al aumento de los niveles de MP con diámetro aerodinámico menor o igual a 10 micrómetros (MP₁₀) y 2.5 micrómetros (MP_{2,5}).

Impacto en la Salud del SO₂

- La exposición a SO₂ puede causar un decrecimiento de la función pulmonar, agravación de enfermedades respiratorias pre-existentes (especialmente bronquitis) y decrecimiento de la habilidad de los pulmones de liberar partículas extrañas.
- También puede contribuir al incremento de la mortalidad, especialmente si las concentraciones de MP también son elevadas.
- Los asmáticos, personas con otras enfermedades pulmonares obstructivas crónicas (EPOC) y con problemas cardíacos son los más sensibles a los efectos del SO₂.
- También es probable que los adultos mayores y niños sean sensibles a los efectos del SO₂.
- La exposición a corto plazo a altas concentraciones de SO₂ puede irritar el tracto respiratorio y congestionar los conductos bronquiales en asmáticos.

Valores guías para SO₂ Recomendados por OMS

Efectos sobre la salud	Nivel de efecto observable ($\mu\text{g}/\text{m}^3$)	Factor de incertidumbre	Valor guía ($\mu\text{g}/\text{m}^3$)	Tiempo promedio de exposición
Cambios en la función pulmonar de individuos asmáticos	1000	2	500	10 minutos
Exacerbaciones de los síntomas respiratorios en individuos sensibles	250	2	125	24 horas
	100	2	50	1 año

Estándares de Calidad de Aire Para Diferentes

Comunidades en $\mu\text{g}/\text{m}^3$ (ppm)

Contaminante	Tiempo promedio	Brasil	Chile	Colombia	México	Perú	Venezuela
Bióxido de Azufre (SO ₂).	Anual ^b	80 (0.03)	80	100	79	160	80 (0.03)
	24 Horas	365	(0.03)	(0.04)	(0.03)	(0.06)	365
	1 Hora	(0.14)	365	400	341		(0.14)
Bióxido de Nitrógeno (NO ₂).	Anual ^b	100	100	100			100
	24 Horas	(0.05)	(0.05)	(0.05)			(0.05)
	1 Hora	320	470		395		
			(0.25)		(0.21)		

Nota : Todos los valores horarios y de 24 horas, no deberán de excederse más de una vez por año.

^a Media Geométrica.

^b Media Aritmética.

Fuente: .Martínez P. Romieu I. Introducción al monitoreo atmosférico: ECO- OPS/OMS, México, 1997

Estándares de Calidad de Aire SO₂ y NO₂ 2 µg/m³ (ppm)

Contaminante	Tiempo promedio	Guías OMS	E.U.A. EPA	E.U.A. Estado De California	Japón	Alemania	Guías CE, hasta 1996	
							Actuales	Consideradas para 1997
Bióxido de Azufre (SO ₂)	Anual ^b	50 (0.02)	79 (0.03)			140	140	125
	24 Horas	125 (0.04)	341(0.13)		125 (0.04)	400 ^c	400 ^c	350 ^c
	1 Hora 10 min.	500 (0.18)	1046(0.40)					
Bióxido de Nitrógeno, NO ₂	Anual ^c	40-50 (0.02)	100 (0.05)			80		40
	24 Horas 1 Hora		300 (0.16)	(0.25)	(0.04 - 0.06)	200 ^c	200 ^c	200 ^c

^a Media Geométrica.

^b Media Aritmética

^c 98 Percentil.

^d Valores de alerta.

Umbrales de alerta para SO₂

- Cuando las concentraciones de SO₂ sobrepasan estos umbrales, se toman medidas inmediatas para reducir emisiones y prevenir a la población.
- La Unión Europea ha establecido el umbral de alerta en 500 µg/m³ registrados durante tres horas consecutivas.
- Otros países han establecido varios umbrales de alerta por encima de los cuales se toman medidas cada vez más estrictas.
- Por ejemplo, los umbrales de alerta establecidos en la norma de Brasil son: 800 µg/m³ (atención), 1.600 µg/m³ (alerta) y 2.100 µg/m³ (emergencia) para un tiempo promedio de muestreo de 24 horas. Los planes de acción para mejorar la calidad del aire deben especificar las medidas que se deben tomar en caso de que los niveles de contaminación sobrepasen los umbrales de alerta.

Métodos de referencia manuales y automáticos para el muestreo y análisis de SO₂

- El método de referencia establecido en las directivas de la Unión Europea es el método automático basado en fluorescencia ultravioleta.
- Ecuador ha establecido es el método manual basado en colorimetría usando una muestra tomada en pararosanilina en forma continua durante 24 horas, al menos cada tres días.
- Información detallada sobre los métodos de referencia pueden obtenerse en los documentos de la Organización Internacional de Estándares (ISO por sus siglas en inglés) y en los documentos criterio para contaminantes tradicionales de la U.S. EPA

Valores límite para la protección de la salud pública, tiempos promedio de muestreo y frecuencias de excedencia permitida para las normas de SO₂ en América Latina y el Caribe, Canadá, Estados Unidos, Japón y la Unión Europea.

País	Valor límite (µg/m³)¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Argentina	2620²	1 hora	El valor límite no podrá superarse en ninguna ocasión
	780²	8 horas	
	70³	1 mes	
Belice^{4,5}	30 (I), 80 (II), 120 (III)		El valor límite no podrá superarse en ninguna ocasión
Bolivia	365	24 horas	El valor límite no podrá superarse en ninguna ocasión
	80⁶	1 año	

País	Valor límite ($\mu\text{g}/\text{m}^3$)¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Brasil	365	24 horas	El valor límite no podrá superarse en más de una ocasión por año
	80⁶	1 año	El valor límite no podrá superarse en ninguna ocasión
Chile	365	24 horas	El valor límite no podrá superarse en más de una ocasión por año
	80⁶	1 año	El valor límite no podrá superarse en ninguna ocasión
Colombia	1500	3 horas	El valor límite no podrá superarse en más de una ocasión por año
	400	24 horas	
	100⁶	1 año	El valor límite no podrá superarse en ninguna ocasión

País	Valor límite ($\mu\text{g}/\text{m}^3$)¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Costa Rica	1500	3 horas	El valor límite no podrá superarse en más de una ocasión por año
	365	24 horas	
	80⁶	1 año	El valor límite no podrá superarse en ninguna ocasión
Cuba	500	20 minutos	El valor límite no podrá superarse en ninguna ocasión
	50	24 horas	
Ecuador	1500	3 horas	El valor límite no podrá superarse en más de una ocasión por año
	400	24 horas	
	80⁶	1 año	El valor límite no podrá superarse en ninguna ocasión

País	Valor límite ($\mu\text{g}/\text{m}^3$) ¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
México	341	24 horas	El valor límite no podrá superarse en más de una ocasión por año
	79 ⁶	1 año	El valor límite no podrá superarse en ninguna ocasión
Venezuela	80 – 365	24 horas	El valor 80 $\mu\text{g}/\text{m}^3$ no podrá superarse en más de 50% de las mediciones, el valor 200 $\mu\text{g}/\text{m}^3$ no podrá superarse en más de 5% de las mediciones, el valor 250 $\mu\text{g}/\text{m}^3$ no podrá superarse en más de 2% de las mediciones y el valor 365 $\mu\text{g}/\text{m}^3$ no podrá superarse en más de 0.5% de las mediciones por año.

País	Valor límite ($\mu\text{g}/\text{m}^3$) ¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Canadá ⁷	450 (deseable) 900 (aceptable)	1 hora	
	150 (deseable) 300 (aceptable) 800 (tolerable)	24 horas	
	30 ⁶ (deseable) 60 ⁶ (aceptable)	1 año	
China ⁴	150 (I), 500 (II), 700 (III)	1 hora	El valor límite no podrá superarse en ninguna ocasión
	50 (I), 150 (II), 250 (III)	24 horas	
	20 (I), 60 (II), 100 (III) ⁶	1 año	

País	Valor límite ($\mu\text{g}/\text{m}^3$) ¹	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Estados Unidos	365	24 horas	El valor límite no podrá superarse en más de una ocasión por año
	80⁶	1 año	El valor límite no podrá superarse en ninguna ocasión
Japón	260	1 hora	El valor límite no podrá superarse en ninguna ocasión
	110	24 horas	
Unión Europea	350	1 hora	El valor límite no podrá superarse en más de 24 ocasiones por año
	125	24 horas	El valor límite no podrá superarse en más de 3 ocasiones por año

1 Las concentraciones de los contaminantes se calculan para condiciones de 1 atmósfera y 298 K.

2 Valores de la norma son aproximados: 1ppm (1 hora) y 0,3 ppm (8 horas)

3 Promedio aritmético mensual

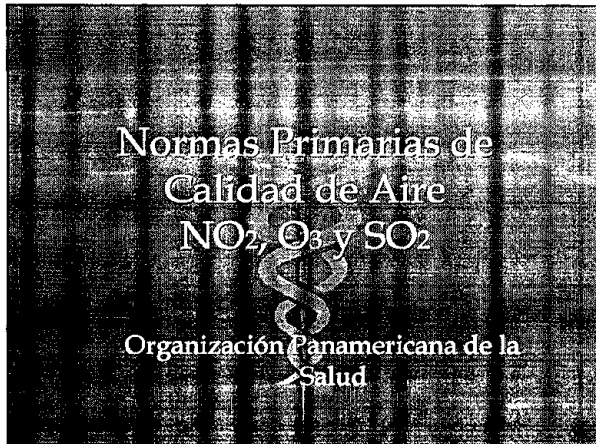
4 (I) áreas sensibles de protección especial; (II) áreas urbanas y rurales típicas y (III) áreas industriales especiales.

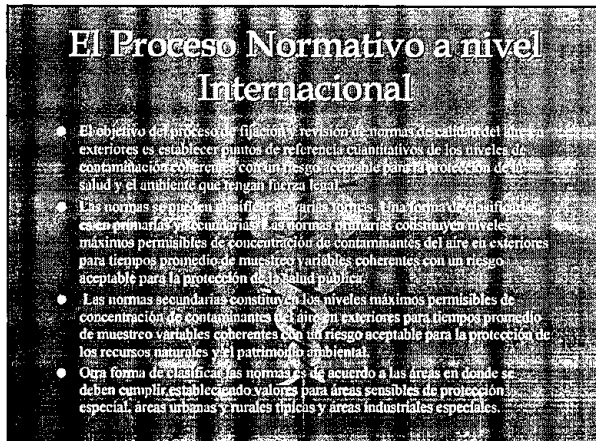
5 El tiempo promedio de muestreo no está estipulado en la norma

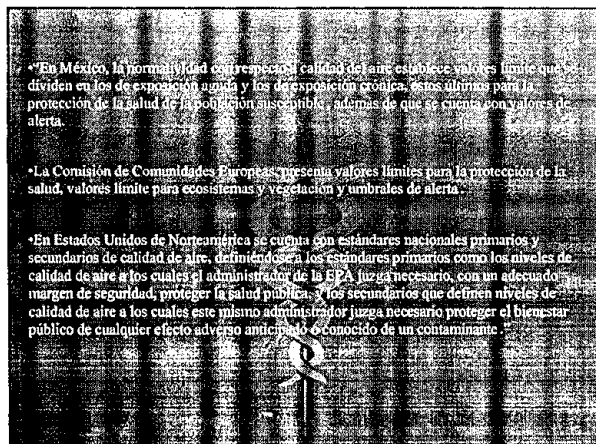
6 Promedio aritmético anual

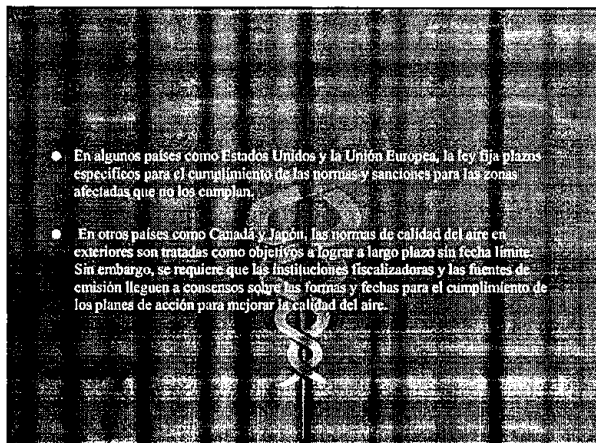
7 El nivel máximo deseable define una meta a largo plazo y provee una base para las políticas de prevención del deterioro de la calidad del aire en áreas no contaminadas. El nivel máximo aceptable intenta proveer una adecuada protección contra los efectos adversos en humanos, animales, vegetación, suelos, agua, materiales y visibilidad. El nivel máximo tolerable indica concentraciones de contaminantes por encima de las cuales se deben tomar medidas inmediatas para proteger la salud de la población en general.

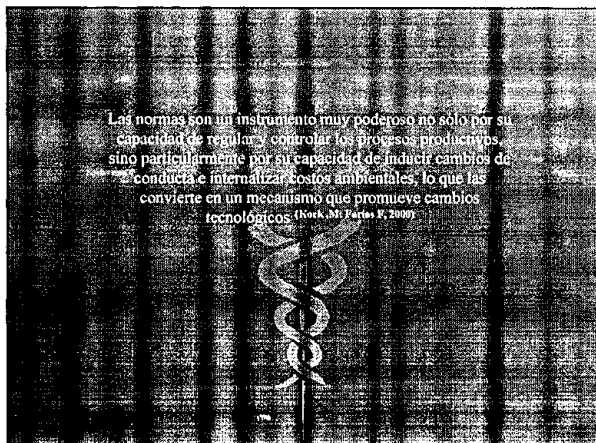
Fuente: Korc, M. Farías. El Proceso de Fijación y Revisión de Normas de Calidad del Aire. OPS-OMS/CONAMA. Cepis.2000

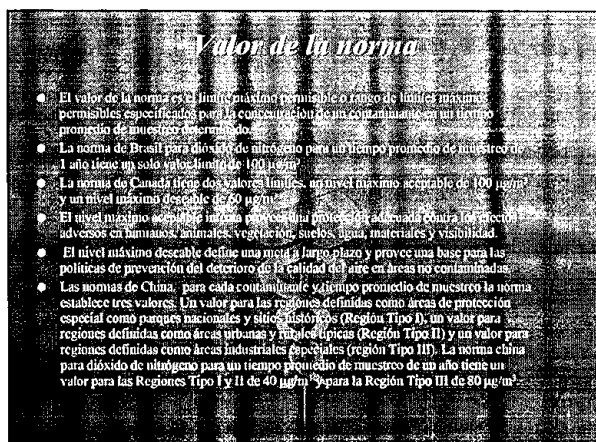












Umbral de alerta

- El umbral de alerta es un nivel de concentración de un contaminante a partir del cual una exposición de breve duración supone un riesgo para la salud humana y por encima del cual se deben tomar medidas inmediatas de reducción de emisiones y de precaución para la población.
- Algunos países como Canadá o la Unión Europea ha establecido un umbral de alerta. Las directivas de la Unión Europea establecen un umbral de alerta para dióxido de nitrógeno de $400 \mu\text{g}/\text{m}^3$ registradas durante tres horas consecutivas.
- En el caso de países como Brasil, Chile, México y Estados Unidos, han establecido varios umbrales de alerta por encima de los cuales se toman medidas cada vez más estrictas.
- La norma de Brasil establece tres umbrales de alerta: $1130 \mu\text{g}/\text{m}^3$ (atención), $2260 \mu\text{g}/\text{m}^3$ (alerta) y $3390 \mu\text{g}/\text{m}^3$ (emergencia) para un tiempo promedio de muestreo de una hora.

Frecuencia de la excedencia permitida

- La frecuencia de la excedencia permitida es el número máximo de excedencias del valor de la norma para un tiempo promedio de muestreo determinado permitido en un periodo de tiempo, generalmente un año.
- La frecuencia de excedencia permitida depende de la forma en que se implementa la norma dentro de la estrategia de manejo de la calidad del aire.
- Por ejemplo, en los Estados Unidos, la ley demanda grandes cambios en las estructuras de los programas de calidad del aire para las zonas que pasan del cumplimiento al incumplimiento de una norma.
- En estos casos, es fundamental que la frecuencia máxima permitida sea definida en una forma estadísticamente sólida para que zonas no tengan el potencial de pasar del cumplimiento al incumplimiento de una norma de un año a otro como resultado de las fluctuaciones aleatorias en las concentraciones del contaminante en el ambiente, a pesar del hecho de que las emisiones permanecían inalteradas.
- En otros países como Canadá y Japón, las normas de calidad del aire en exteriores son tratadas como objetivos a lograr a largo plazo sin fechas fijas para su cumplimiento y no hay demandas legales especiales para las zonas que pasan del cumplimiento al incumplimiento de la norma. Por lo tanto, en estos casos, no es tan necesario definir la frecuencia máxima permitida en una forma estadísticamente sólida.

Guías de calidad del Aire de OMS

- La publicación de la OMS titulada "Guías globales sobre calidad del aire" consolida los resultados de los estudios del impacto de los contaminantes del aire en la salud y ofrece recomendaciones sobre valores guía para los niveles de los contaminantes en el aire y sus tiempos promedio de exposición coherentes con un riesgo aceptable para la protección de la salud desde un punto de vista estrictamente científico. Los valores guía representan metas ideales hacia las cuales los países deberían avanzar.

Criterios Establecidos por OMS para determinación de peligro de contaminante

- La OMS recomienda cinco criterios para determinar el peligro de un contaminante (OMS, 1976):
- Severidad y frecuencia de los efectos adversos en la salud observados o sospechados.
- Ubicuidad y abundancia del contaminante en el aire.
- Persistencia del contaminante en el ambiente.
- Transformaciones del contaminante en el ambiente y alteraciones metabólicas.
- Tamaño de la población expuesta.

Idealmente, al concluir esta etapa debería ser posible establecer valores guías para los niveles de los contaminantes y sus tiempos promedio de exposición que no ponen ningún peligro a la salud y el ambiente. Sin embargo, los juicios y consensos científicos son inevitables por la falta de información e incertidumbres en los resultados de los estudios.

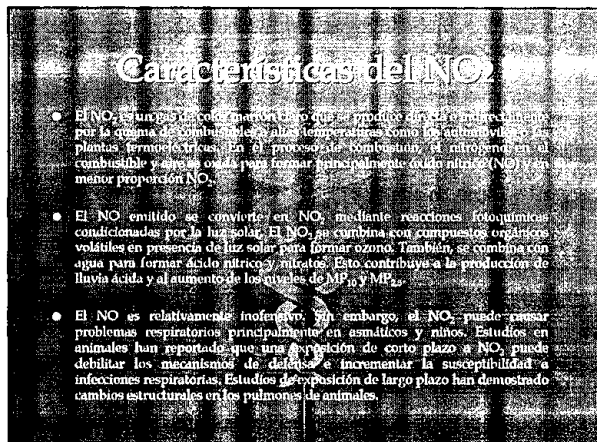
Lineamientos OMS período 1987-1997

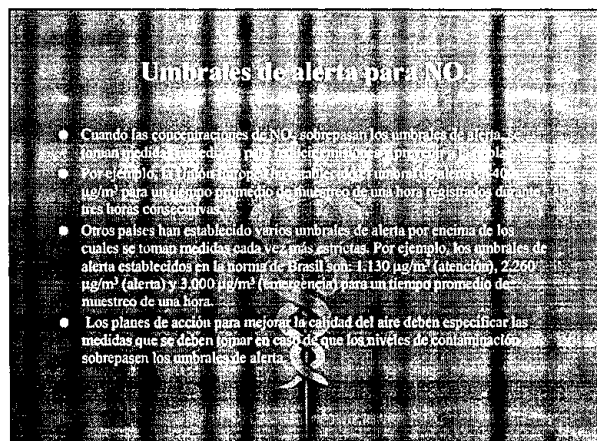
Componente	Lineamiento OMS, 1987 ug/m ³	Lineamiento OMS, 1997 ug/m ³	Intervalo Promedio
SO ₂	125	500	10 min
		125	24 h.
NO ₂	400	50	1 año
	150	40	1 año
O ₃	100-120	200	1h.
			24h.
	150-200	120	8 h.
			1 h.

El proceso Normativo de calidad del Aire en la Región de las Américas

- En 13 países de América Latina y el Caribe se han fijado normas de calidad del aire en exteriores para contaminantes tradicionales: Argentina, Belice, Bolivia, Brasil, Chile, Colombia, Costa Rica (aprobado por el Ministerio de Salud y en consulta pública para su promulgación definitiva), Cuba, Ecuador, Guatemala, Jamaica, México, Perú (propuesta) y Venezuela.







Métodos de referencia para el muestreo y análisis de NO_x

- Estos pueden ser automáticos o manuales.
- Por ejemplo, el método de referencia establecido en las normas de Chile es el método automático para la toma continua de muestras de NO_x basado en quimiluminiscencia.
- En Venezuela son el método automático basado en quimiluminiscencia y el método manual basado en colorimetría usando una muestra tomada en arsenito de sodio en forma continua durante 24 horas.
- Generalmente, la frecuencia mínima de muestreo usando el método manual es cada 3 días. Información detallada sobre los métodos de referencia pueden obtenerse en los documentos de la ISO.

Valores guía para NO_x recomendados por la OMS

Efectos sobre la salud	Nivel de efecto observable (µg/m ³)	Frecuencia de muestreo	Valor guía (µg/m ³)	Tiempo promedio de exposición
Ligeros cambios en la función pulmonar de individuos asmáticos	365 - 565	0.5	200 40	1 hora 1 año

Estándares de Calidad de Aire Para Diferentes Comunidades en R_c/m (ppm)

Contaminante	Medio Ambiente	Urbano	Suburbano	Residencial	Industrial	Centro	Alto
Dióxido de Azufre (SO ₂)	Anual	100 (0.25)	100 (0.25)	100 (0.25)	100 (0.25)	100 (0.25)	100 (0.25)
	24 Horas	365 (0.14)	365 (0.14)	365 (0.14)	365 (0.14)	365 (0.14)	365 (0.14)
Dióxido de Nitrógeno (NO _x)	Anual	100 (0.05)	100 (0.05)	100 (0.05)	100 (0.05)	100 (0.05)	100 (0.05)
	24 Horas	320 (0.25)	320 (0.25)	320 (0.25)	320 (0.25)	320 (0.25)	320 (0.25)

Nota: Todos los valores horarios y de 24 horas no deberán excederse más de una vez por año.

^a Media Geométrica
^b Media Aritmética

Fuentes: Ministerio de Ambiente y Energía y Ministerio de Salud, 1999

Estándares de Calidad de Aire SO ₂ y NO ₂ (µm ³)							
Contaminante	Tiempo promedio	Concentración (µg/m ³)	EEA (EEA)	EEA (WHO)	EEA (OIEA)	EEA (WHO)	EEA (WHO)
Dióxido de Azufre (SO ₂)	Annual*	50 (0.02)	79	-	140	140	125
	24 Horas	125 (0.04)	243 (0.03)	-	400	400	125
	1 Hora	500 (0.18)	243 (0.1)	-	400	400	125
Dióxido de Nitrógeno (NO ₂)	Annual*	40 (0.02)	70	70	90	90	40
	24 Horas	80 (0.02)	150	150	200	200	200
	1 Hora	200 (0.11)	150	150	200	200	200

* Media Geométrica.
 * Media Aritmética.
 * 98 Percentil.
 * Valores de alerta.

Valores límite para la protección de la salud pública, tiempo promedio de muestra y frecuencia de excedencia permitida para las normas de NO₂ en América Latina, El Caribe, Canadá, China, Estados Unidos, Europa, Unión Europea, Asia, África y Oceanía.

País	Valor límite (µg/m ³)	Tiempo promedio de muestra	Frecuencia de excedencia permitida
Argentina	846	24 horas	El valor límite no podrá superarse en ninguna ocasión
Belice**	30 (I), 80 (II), 120 (III)	24 horas	El valor límite no podrá superarse en ninguna ocasión
Bolivia	400	24 horas	El valor límite no podrá superarse en ninguna ocasión

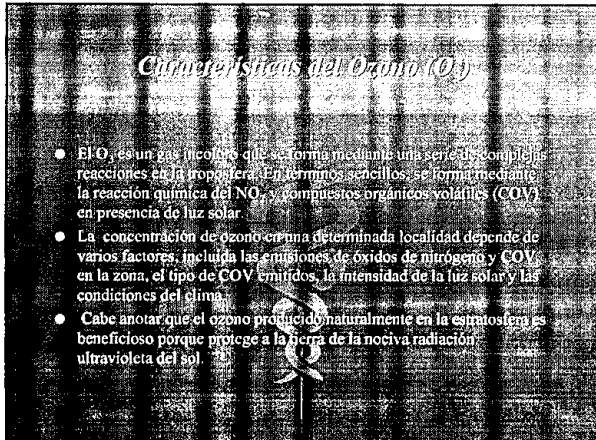
País	Valor límite (µg/m ³)	Tiempo promedio de muestra	Frecuencia de excedencia permitida
México	300	1 hora	El valor límite no podrá superarse en más de una ocasión por año.
Venezuela	100 - 300	24 horas	El valor 100 µg/m ³ límite ni podrá superarse en más de 50% de las mediciones y el valor 300 µg/m ³ límite no podrá superarse en más de 5% de las mediciones por año.

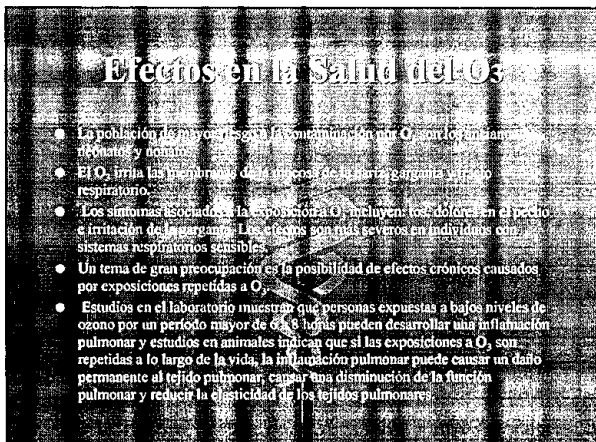
País	Valor límite (µg/m ³)	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Canadá	400 (aceptable)	1 hora	
	1,000 (tolerable)		
	200 (aceptable) 300 (tolerable)	24 horas	
China*	60 ⁵ (desable) 100 (aceptable)	1 año	
	120 (I, II), 240 (III)	1 hora	El valor límite no podrá superarse en ninguna ocasión
	80 (I, II), 120 (III)	24 horas	
	40 (I, II), 60 (III)	1 año	

País	Valor límite (µg/m ³)	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Estados Unidos	100	1 año	El valor límite no podrá superarse en ninguna ocasión
Japón	80-110	24 horas	El valor límite no podrá superarse en ninguna ocasión
Unión Europea	200	1 hora	El valor límite no podrá superarse en más de 18 ocasiones por año
	40 ⁶	1 año	El valor límite no podrá superarse en ninguna ocasión

1 Las concentraciones de los contaminantes se calculan para condiciones de 27°C y 298 K.
 2 Óxidos de nitrógeno medidos como dióxido de nitrógeno.
 3 Valores de la norma son aritméticos: 0,45 ppm (1 hora) y 0,15 ppm (24 horas).
 4 (I) áreas sensibles de protección especial, (II) áreas urbanas y rurales típicas y (III) áreas industriales especiales.
 5 El tiempo promedio de muestreo no está estipulado en la norma.
 6 Promedio aritmético anual.
 7 El nivel máximo deseable define una meta a largo plazo y provee una base para las políticas de prevención del deterioro de la calidad del aire en áreas no contaminadas. El nivel máximo aceptable intenta proveer una adecuada protección contra los efectos adversos en humanos, animales, vegetación, suelos, agua, materiales y visibilidad. El nivel máximo tolerable indica concentraciones de contaminantes por encima de las cuales se deben tomar medidas inmediatas para proteger la salud de la población en general.







Umbral de alerta para O_3

- Cuando las concentraciones de O_3 sobrepasan estos umbrales, se toman medidas inmediatas para reducir emisiones y prevenir la salud de la población.
- Brasil ha establecido varios umbrales de alerta por encima de los cuales se toman medidas cada vez más estrictas. Los umbrales de alerta establecidos en la norma de Brasil son: 400 $\mu\text{g}/\text{m}^3$ (atención), 800 $\mu\text{g}/\text{m}^3$ (alerta) y 1,000 $\mu\text{g}/\text{m}^3$ (emergencia) para un tiempo promedio de muestreo de una hora.
- Los planes de acción para mejorar la calidad del aire deben especificar las medidas que se deben tomar en caso de que los niveles de contaminación sobrepasen los umbrales de alerta.

Métodos de referencia para el muestreo y análisis de O_3

- Los métodos de referencia para el muestreo y análisis de O_3 establecidos en las normas, generalmente los métodos químicos para la medición continua de O_3 basados en quimiluminiscencia o absorción ultravioleta.
- Información detallada sobre los métodos de referencia pueden obtenerse en los documentos de la ISO y en los documentos criterio para contaminantes tradicionales de la U.S. EPA.

Valores Guía para O_3 Recomendados por la OMS

Efectos sobre la salud	Nivel de efecto observable ($\mu\text{g}/\text{m}^3$)	Factor de incertidumbre	Valor guía ($\mu\text{g}/\text{m}^3$)	Tiempo promedio de exposición
Respuestas de la función del sistema respiratorio	n.a.	n.a.	120	8 horas
	n.a. no aplicable			

**Estándares de calidad de aire para
O₃ en mg/m³**

Contaminante	Tiempo promedio	Brasil	Chile	Colombia	México	Perú	Venezuela
Ozono (O ₃)	8 Horas 1 Hora	160 (0.09)	160 (0.09)	170 (0.09)	216 (0.11) ^a		200 (0.10)

* No debe excederse más de una vez cada tres años. Todos los demás valores horarios y de 24 horas, así como la frecuencia de excederse más de una vez por año.

Estándares de calidad del aire O₃ µg/m³ (ppm)

Contaminante	Tiempo promedio	Guatemala	E.U.A. EPA	E.U.A. EPA California	Japón	Alemania	Guatemala hasta 1997
Ozono (O ₃)	8 Horas 1 Hora	120 (0.06)	235 (0.12)	(0.10)	118 (0.06)	180 360 ^d	Actualizado para 1997

Todos los valores horarios y de 24 horas no deberán excederse más de una vez por año.
^d Valores de alerta
 Fuente: Martínez P. Marcelo L. Introducción al monitoreo atmosférico. ECU-OPS/OMS, México, 1997.

- Los valores de ozono que utiliza Alemania son valores de alerta, correspondiendo el valor de 180 al primer umbral que al rebasarse se notificará a la población, y el valor de 360 al segundo umbral que al rebasarse se recomendará a la población permanecer en casa.

Valores límite para la protección de la salud pública. Tiempo promedio de muestreo y frecuencias de excedencia permitida para las normas de O₃ en América Latina y el Caribe, Canadá, China, Estados Unidos, Japón y la Unión Europea.

Pais	Valor límite (ppb/m ³)	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Argentina	195	1 hora	El valor límite no podrá superarse en ninguna ocasión
Bolivia	236	1 hora	El valor límite no podrá superarse en ninguna ocasión
Brasil	160	1 hora	El valor límite no podrá superarse en más de una ocasión por año

Pais	Valor límite (ppb/m ³)	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Chile	160	1 hora	El valor límite no podrá superarse en más de una ocasión por año
Colombia	170	1 hora	El valor límite no podrá superarse en más de una ocasión por año
Costa Rica	160	1 hora	El valor límite no podrá superarse en ninguna ocasión
Cuba	160 30	20 minutos 24 horas	El valor límite no podrá superarse en ninguna ocasión

Pais	Valor límite (ppb/m ³)	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Ecuador	200	1 hora	El valor límite no podrá superarse en más de una ocasión por año
México	216	1 hora	El valor límite no podrá superarse en más de una ocasión por año en un periodo de tres años.
Venezuela	240	1 hora	El valor límite no podrá superarse en más de 0.02% de las mediciones por año.

País	Valor límite ($\mu\text{g}/\text{m}^3$)	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Canadá ⁵	100 (deseable)	1 hora	
	160 (aceptable)		
	300 (tolerable)	24 horas	
	30 (deseable)		
50 (aceptable)	1 año		
30 ⁶ (aceptable)		8 horas	El valor límite no podrá superarse en ninguna ocasión.
China ⁷	120 (I), 160 (II), 200 (III)		

País	Valor límite ($\mu\text{g}/\text{m}^3$)	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Estados Unidos ⁸	150	3 horas	El valor límite no podrá superarse en ninguna ocasión. El promedio de tres años consecutivos del cuarto valor más alto no debe superar la máxima.
	120	3 horas	El valor límite no podrá superarse en ninguna ocasión.
Japón ¹⁰	120	3 horas	El valor límite no podrá superarse en ninguna ocasión.
Unión Europea ¹¹	110	3 horas	El valor límite no podrá superarse en ninguna ocasión.

1 Las concentraciones de los contaminantes se calculan para condiciones de 1 atmósfera y 298 K.

2 Valores de la norma los aproximados: 0,10 ppm (1 hora).

3 No tiene normas para O₃.

4 Oxidantes totales expresados como ozono.

5 El nivel máximo deseable define una meta a largo plazo y provee una base para las políticas de prevención del deterioro de la calidad del aire en áreas no contaminadas. El nivel máximo aceptable intenta proveer una adecuada protección contra los efectos adversos en la salud humana y el medio ambiente, en algunas circunstancias y situaciones. El nivel máximo tolerable indica condiciones de contaminación por encima de las cuales se deben tomar medidas inmediatas para disminuir los efectos de la población en general.

6 Umbral de protección de la salud.

7 (I) Áreas sensibles de protección especial; (II) áreas urbanas y zonas turísticas; (III) áreas industriales especiales.

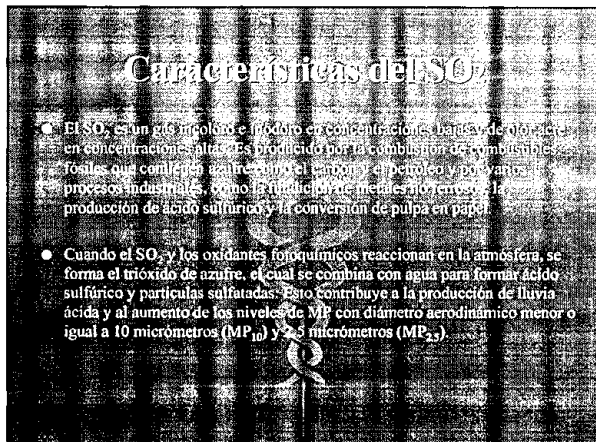
8 Esta norma no se aplicará más para una zona una vez que la Agencia de Protección Ambiental determine que la zona está por debajo de la norma.

9 Valor es aproximado: 0,03 ppm.

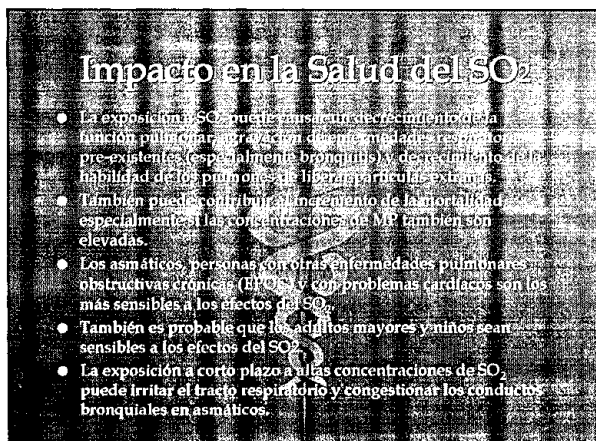
10 Oxidantes fotoquímicos totales.

11 Umbral de protección de la salud. El promedio de 3 horas de un nivel sin traslape se calcula cuatro veces al día sobre la base de 8 valores horarios comprendidos entre 0 y 9 horas, 8 y 17 horas, 16 y 1 horas y 12 y 21 horas. El umbral de información a la población 180 $\mu\text{g}/\text{m}^3$ en un tiempo promedio de muestreo de 1 hora.





- El SO_2 es un gas incoloro e inodoro en concentraciones bajas de donde se encuentran en concentraciones altas es producido por la combustión de combustibles fósiles que contiene a otros como el carbón y el petróleo y por varios procesos industriales, como la fundición de metales no ferrosos, la producción de ácido sulfúrico y la conversión de pulpa en papel.
- Cuando el SO_2 y los oxidantes fotoquímicos reaccionan en la atmósfera, se forma el trióxido de azufre, el cual se combina con agua para formar ácido sulfúrico y partículas sulfatadas. Esto contribuye a la producción de lluvia ácida y al aumento de los niveles de MP con diámetro aerodinámico menor o igual a 10 micrómetros (MP_{10}) y 2.5 micrómetros ($\text{MP}_{2.5}$).



- La exposición a SO_2 puede causar un decrecimiento de la función pulmonar, irritación de las vías respiratorias pre-existentes (especialmente bronquitis) y decrecimiento de la habilidad de los pulmones de liberar partículas vivas.
- También puede contribuir al incremento de la mortalidad, especialmente si las concentraciones de MP también son elevadas.
- Los asmáticos, personas con otras enfermedades pulmonares obstructivas crónicas (EPOC) y con problemas cardíacos son los más sensibles a los efectos del SO_2 .
- También es probable que los adultos mayores y niños sean más sensibles a los efectos del SO_2 .
- La exposición a corto plazo a altas concentraciones de SO_2 puede irritar el tracto respiratorio y congestionar los conductos bronquiales en asmáticos.

Valores guías para SO₂
Recomendados por OMS

Efectos sobre la salud	Nivel de riesgo observable (µg/m ³)	Factor de incertidumbre	Valor guía (µg/m ³)	Tiempo promedio de exposición
Cambios en la función pulmonar de individuos asmáticos	100 ^a	2	50	10 minutos
Exacerbaciones de los síntomas respiratorios en individuos sensibles	250 ^b 100 ^c	2 2	125 50	24 horas 1 año

Estándares de Calidad de Aire Para Diferentes Comunidades en µg/m³ (ppm)

Contaminante	Tiempo Promedio	Brasil ^a	Chile ^b	Colombia ^c	México ^d	Perú ^e	Valor guía
Dióxido de Azufre (SO ₂)	Annual ^f 24 Horas	30 (0.07)	50 (0.07)	100 (0.24)	75 (0.03)	160 (0.05)	30 (0.03)
	1 Hora ^g	365 (0.14)	365 (0.14)	400 (0.15)	341 (0.13)	414 (0.14)	365 (0.14)
Dióxido de Nitrógeno (NO ₂)	Annual ^f 24 Horas	100 (0.05)	100 (0.05)	150 (0.05)	15	100	100 (0.05)
	1 Hora ^g	320 (0.12)	320 (0.12)	370 (0.14)	395 (0.21)	320	320 (0.12)

Nota: Todos los valores horarios y de 24 horas no deberán exceder más de una vez por año.
^a Media Geométrica
^b Media Aritmética
^c Media Aritmética
^d Fuente: Maritosa P, Rosales L, Introducción al monitoreo de la calidad del aire. ECO-OPI-OMS, México, 1997.

Estándares de Calidad de Aire SO₂ y NO₂ µg/m³ (ppm)

Contaminante	Tiempo promedio	China OMS	E.U.A. EPA	E.U.A. Estado de California	Japón	Alemania	China CE
							China CE para 1995
Dióxido de Azufre (SO ₂)	Annual ^a 24 Horas	50 (0.02)	75 (0.03)	100	140	140	140
	1 Hora	125 (0.04)	341 (0.1)	400	400 ^b	400 ^b	400 ^b
	10 min. ^c	500 (0.18)	1040 (0.29)	1040	125 (0.1)		125
Dióxido de Nitrógeno (NO ₂)	Annual ^a 24 Horas	40-50 (0.02)	100 (0.05)	100 (0.28)	80 (0.04)	80	80
	1 Hora ^b	200 (0.11)	200 (0.11)	200	200 (0.06)	200	200

^a Media Geométrica
^b Media Aritmética
^c 98 Percentil
^d Valores de alerta.

Umbrales de alerta para SO₂

- Cuando las concentraciones de SO₂ sobrepasan estos umbrales, se toman medidas inmediatas para reducir emisiones y prevenir a la población.
- La Unión Europea ha establecido el umbral de alerta en 500 µg/m³ registrados durante tres horas consecutivas.
- Otros países han establecido varios umbrales de alerta por encima de los cuales se toman medidas cada vez más estrictas.
- Por ejemplo, los umbrales de alerta establecidos en la norma de Brasil son: 800 µg/m³ (atención), 1.600 µg/m³ (alerta) y 2.100 µg/m³ (emergencia) para un tiempo promedio de muestreo de 24 horas. Los planes de acción para mejorar la calidad del aire deben especificar las medidas que se deben tomar en vista de que los niveles de contaminación sobrepasen los umbrales de alerta.

Métodos de referencia manuales y automáticos para el muestreo y análisis de SO₂

- El método de referencia establecido en la directiva de la Unión Europea es el método automático basado en fluorescencia ultravioleta.
- Ecuador ha establecido es el método manual basado en colorimetría usando una muestra tomada en pararasnilina en forma continua durante 24 horas al menos cada tres días.
- Información detallada sobre los métodos de referencia pueden obtenerse en los documentos de la Organización Internacional de Estándares (ISO por sus siglas en inglés) y en los documentos criterio para contaminantes tradicionales de la U.S. EPA

Valores límites de calidad ambiental para el contaminante dióxido de azufre (SO₂) en el aire ambiente

Estados Unidos, Unión Europea, Unión Europea

País	Valor límite (µg/m ³)	Tiempo promedio	Propósito de la restricción
Argentina	200	1 hora	El valor límite no podrá superarse en ninguna ocasión
Brasil	700	3 horas	El valor límite no podrá superarse en ninguna ocasión
Bolivia	30 (I), 80 (II), 120 (III)	24 horas	El valor límite no podrá superarse en ninguna ocasión
Bolivia	365	24 horas	El valor límite no podrá superarse en ninguna ocasión
	80	1 año	El valor límite no podrá superarse en ninguna ocasión

País	Valor límite (mg/dl)	Tiempo promedio de análisis	Observaciones
Brasil	365	24 horas	El valor límite no podrá superarse en más de una ocasión por año.
	50°	1 día	El valor límite no podrá superarse en ninguna ocasión.
Chile	365	24 horas	El valor límite no podrá superarse en más de una ocasión por año.
	50°	1 día	El valor límite no podrá superarse en ninguna ocasión.
Colombia	1500 400	3 horas 24 horas	El valor límite no podrá superarse en más de una ocasión por año.
	100°	1 día	El valor límite no podrá superarse en ninguna ocasión.

País	Valor límite (µg/ml)	Tiempo promedio de análisis	Observaciones
Costa Rica	1500	24 horas	El valor límite no podrá superarse en más de una ocasión por año.
	50°	1 día	El valor límite no podrá superarse en ninguna ocasión.
Cuba	500	20 minutos	El valor límite no podrá superarse en ninguna ocasión.
	50°	24 horas	El valor límite no podrá superarse en ninguna ocasión.
Ecuador	1500 400	3 horas 24 horas	El valor límite no podrá superarse en más de una ocasión por año.
	80°	1 día	El valor límite no podrá superarse en ninguna ocasión.

País	Valor límite (mg/dl)	Tiempo promedio de análisis	Observaciones
México	345	24 horas	El valor límite no podrá superarse en más de una ocasión por año.
	50°	1 día	El valor límite no podrá superarse en ninguna ocasión.
Venezuela	80 - 365	24 horas	El valor límite no podrá superarse en más de una ocasión por año. El valor límite no podrá superarse en más de una ocasión por año. El valor límite no podrá superarse en más de una ocasión por año. El valor límite no podrá superarse en más de una ocasión por año.

Pais	Valor límite (ppm*)	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Canadá	450 (deseable)	1 hora	
	900 (aceptable)	3 horas	
	150 (deseable)	24 horas	
China*	150 (I), 500 (II), 700 (III)	1 año	El valor límite no podrá superarse en ninguna ocasión
	50 (I), 150 (II), 250 (III)	1 hora	
	20 (I), 50 (II), 100 (III)	24 horas	
	30° (deseable)	1 año	
	60° (aceptable)	1 hora	
	90° (tolerable)	24 horas	

Pais	Valor límite (µg/m³)	Tiempo promedio de muestreo	Frecuencia de excedencia permitida
Estados Unidos	365	24 horas	El valor límite no podrá superarse en más de una ocasión por año
	80	1 año	El valor límite no podrá superarse en ninguna ocasión
Japón	260	1 hora	El valor límite no podrá superarse en ninguna ocasión
	110	24 horas	
Unión Europea	350	1 hora	El valor límite no podrá superarse en más de 24 ocasiones por año
	125	24 horas	El valor límite no podrá superarse en más de 3 ocasiones por año

1 Las concentraciones de los contaminantes se calculan para condiciones de 1 atmósfera y 498 K.
 2 Valores de la norma son aproximados: 1ppm (1 hora) y 0.3 ppm (3 horas)
 3 Promedio aritmético mensual
 4 (I) áreas sensibles de protección especial; (II) áreas urbanas y rurales típicas y (III) áreas industriales especiales.
 5 El tiempo promedio de muestreo no está estipulado en la norma
 6 Promedio aritmético anual
 7 El nivel máximo deseable define una meta a largo plazo y provee una base para las políticas de prevención del deterioro de la calidad del aire en áreas no contaminadas. El nivel máximo aceptable intenta proveer una adecuada protección contra los efectos adversos en humanos, animales, vegetación, suelos, aguas, materiales y visibilidad. El nivel máximo tolerable indica concentraciones de contaminantes por encima de las cuales se deben tomar medidas inmediatas para proteger la salud de la población en general.

COMISIÓN NACIONAL DEL MEDIO AMBIENTE
DEPARTAMENTO DE DESCONTAMINACIÓN, PLANES Y NORMAS

Revisión Norma de Calidad Primaria contenidas en
la Resolución N° 1215/78
Grupo de Trabajo Monóxido de carbono -COMITÉ OPERATIVO Y AMPLIADO

18 de abril de 2000. CONAMA: Obispo Donoso 6. Santiago
Hora inicio: 9:30 hrs

Asistentes: Se adjunta hoja de asistencia

Tema de la reunión: Efectos en la salud del contaminante Monóxido de carbono. Presentación de la Dra. Jeanette Vega (Facultad de Medicina, P.U.Católica de Chile)

La **Dra. Vega** (*P.U.CatólicaChile*) presentó los resultados de sus investigaciones en el tema, e hizo llegar para difusión dentro del grupo de trabajo una primera versión de su documento "Efectos de la contaminación atmosférica en la salud humana. Evidencias de estudios recientes. Abril 2000". Los principales temas tratados durante su exposición fueron: Efectos en mortalidad. Efectos en admisiones hospitalarias y consultas de emergencia. Efectos fisiopatológicos. Estudios internacionales. Estudios chilenos.

A continuación de la presentación, se abrió una ronda de preguntas y respuestas y de opiniones en general:

Representantes de la ONG **Renace**, consultaron acerca del mecanismo de ingreso del CO al cuerpo humano, y presentaron material al respecto para el Grupo de Trabajo. También consultaron por efectos neurológicos por la presencia de este contaminante, lo que fue respondido por la **Dra.Vega** (*P.U.CatólicaChile*) en términos que hay que distinguir efectos por dosis altas (intoxicaciones agudas con consecuencias mortales) de dosis bajas, que son las que se encuentran en el aire, y éstas corresponden principalmente a efectos sobre los sistemas cardiovasculares y respiratorios


Se trató también el tema de cómo a través de la evaluación de las concentraciones de carboxihemoglobina en la sangre se podía registrar la presencia en el cuerpo humano de este contaminante. Al respecto el **Dr.Tchernitchin** (*Colegio Médico*) indicó que la vida media en la sangre de este compuesto orgánico es de 120 días. La **Dra.Vega** (*P.U.CatólicaChile*) acotó que no ha encontrado que se hayan descrito efectos de largo plazo o acumulativos en la literatura. **M.Adonis** (*UdeChile*) indicó que se están estudiando efectos a nivel celular a través de la evaluación sobre la citocromo oxidasa. El **Dr.Tchernitchin** (*Colegio Médico*) indicó que en casos de exposición perinatal, pueden generarse secuelas irreversibles para distintos contaminantes, y que el CO podría ser uno de ellos.

I.Olaeta (*SESMA*) consultó si existía información acerca de mecanismos somáticos de adaptación a la presencia del contaminante CO. La **Dra.Vega** (*P.U.CatólicaChile*) indicó al respecto que el CO interfiere procesos básicos del individuo y que no se han encontrado beneficios asociados a la inhalación de CO, cuyo efecto se encuentra a nivel celular principalmente.

En cuanto a la exposición a distintos plazos de este contaminante, **C.Santana** (*CONAMA*) consultó que tan adecuadas son las normas horarias, de 8 horas, etc. Al respecto **L.Cifuentes** (*P.U.CatólicaChile*) indicó que los estándares actuales de corto plazo para el CO están basados en estudios clínicos y no en epidemiología.

J.Sánchez (SESMA) consultó respecto a la existencia de estudios en que aparezca correlación del CO con otros contaminantes. Al respecto, la **Dra.Vega** (P.U.CatólicaChile) indicó que cuando se analizan contaminantes en pares, el CO se mantiene constante, incluso más que el material particulado.

Finalmente, se indicó que en las próximas reuniones se verían los temas de normativa internacional, monitoreo e inventarios de emisiones de CO, así como metodologías de medición.



Rodrigo Lucero Ch.
Depto. Descontaminación, Planes y Normas
CONAMA

COMISION NACIONAL DEL MEDIO AMBIENTE
 DEPTO. DESCONTAMINACION, PLANES Y NORMAS

Reunión "Revisión Normas Primarias de Calidad de Aire para SO2, PTS, CO, NO2 Y O3"
 Santiago, Abril 18 de 2000

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<p>Delfino et al (1) Montreal, Quebec. Periodo: 1992- 1993</p>	<p>Visitas diarias a la Sala de Emergencias (SE) por enfermedades respiratorias.</p>	<p>1992, no hubo asociación significativa con las visitas a la SE. 1993, ozono máximo 1-h, PM10, PM2.5, y SO4 se asociaron con visitas respiratorias para pacientes > 64 años. Un incremento en el nivel promedio de ozono máximo 1-h (36 ppb) se asoció con un incremento de 21% sobre el número promedio de visitas diarias a la SE (95% intervalo de confianza [IC]: 8 a 34%). El efecto de las partículas fue menor, con incrementos promedio de 16% (4 a 28%), 12% (2 a 21%) y 6% (1 a 12%) para PM10, PM2.5, y SO4, respectivamente.</p>
<p>Delfino et al (ii) Montreal, Quebec Periodo: junio-agosto, 1989-1990</p>	<p>Visitas diarias a la Sala de Emergencias (SE) por enfermedades respiratorias</p>	<p>1989: Asociación entre visitas respiratorias a la SE (>64 años) y ozono máximo 1- y 8-h. (1 día antes de la visita a la SE, en verano). Las visitas a SE incrementaron 18.7% y 21.8% sobre el promedio, para un aumento promedio de 44 ppb ozono (máximo 1-h) y 38 ppb ozono (máximo 8-h). PM2.5 se asocia con visitas respiratorias a la SE de los adultos mayores..</p>
<p>Gordian et al (iii) Anchorage, Alaska mayo 1992 a marzo 1994</p>	<p>Visitas diarias de pacientes ambulatorios por enfermedades respiratorias, incluyendo asma, bronquitis, y enfermedades del tracto superior</p>	<p>Un incremento de 10 (ug/m³) en PM10 arrojó un incremento de 3-6% en las visitas por asma y un incremento de 1-3% en las visitas por enfermedades del tracto respiratorio superior. CO se asoció con bronquitis, enfermedades del tracto respiratorio superior. No con asma (invierno).</p>

i Delfino RJ, Murphy-Moulton AM, Burnett RT, Brook JR, Becklake MR. Effects of air pollution on emergency room visits for respiratory illnesses in Montreal, Quebec. Am J Respir Crit Care Med 1997; 155:568-76.

ii Delfino RJ, Murphy-Moulton AM, Becklake MR. Emergency room visits for respiratory illnesses among the elderly in Montreal: association with low level ozone exposure. Environ Res 1998; 76:67-77.

iii Gordian ME, Ozkaynak H, Xue J, Morris SS, Spengler JD. Particulate air pollution and respiratory disease in Anchorage, Alaska. Environ Health Perspect 1996; 104:290-7.

Hernandez Garduno et al (ⁱ) Ciudad de México	Visitas al consultorio por infecciones del tracto respiratorio superior	La contaminación del aire se asoció con 10 a 16% de las visitas al consultorio.. O ₃ y NO ₂ incrementaron las visitas al consultorio entre 19 y 43% sobre el promedio. Otros contaminantes y el grupo control no demostraron asociaciones significativas.
Anderson et al (ⁱⁱ) Amsterdam, Barcelona, Londres, Milán, París, Róterdam	Ingresos hospitalarios por enfermedad pulmonar obstructiva crónica (EPOC)	La contaminación del aire (SO ₂ , BS, PMT, NO ₂ , O ₃) se asoció con lo ingresos diarios por EPOC.
Burnett et al (ⁱⁱⁱ) 16 ciudades en Canadá 1981-1991	Ingresos hospitalarios por enfermedades respiratorias	O 3 se asocia con admisiones respiratorias (excepto en los meses de invierno). PM, CO se asocian con hospitalizaciones respiratorias.
Choudhury et al (^{iv}) Anchorage, (Alaska) Periodo: 1992-1994	Visitas médicas por asma, bronquitis, infecciones del tracto respiratorio superior.	PM10 se asocia con la morbilidad. Las asociaciones son mas poderosas con niveles PM10 en días concurrentes.

Hernandez-Garduno E, Perez-Neria J, Paccagnella AM, Pina-Garcia M, Munguia-Castro M, Catalan-Vazquez M, Rojas-Ramos M. Air pollution and respiratory health in Mexico City. *J Occup Environ Med* 1997; 39:299-307.

ⁱ Anderson HR, Spix C, Medina S, Schouten JP, Castellsague J, Rossi G, Zmirou D, Touloumi G, Wojtyniak B, Ponka A, Bacharova L, Schwartz J, Katsouyanni K. Air pollution and daily admissions for chronic obstructive pulmonary disease in 6 European cities: results from the APHEA project. *Eur Respir J* 1997; 10:1064-71.

ⁱⁱⁱ Burnett RT, Brook JR, Yung WT, Dales RE, Krewski D. Association between ozone and hospitalization for respiratory diseases in 16 Canadian cities. *Environ Res* 1997; 72:24-31.

^{iv} Choudhury AH, Gordian ME, Morris SS. Associations between respiratory illness and PM10 air pollution. *Arch Environ Health* 1997; 52:113-7.

Tellez Rojo et al (i) Ciudad de México, 1993	Visitas médica por infecciones respiratorias en niños	Un incremento de 50 ppb en le promedio diario de ozono causa un incremento de 9.9% en las visitas a emergencias por infecciones del tracto respiratorio superior (invierno), que podría elevarse hasta un 30% si el incremento dura 5 días consecutivos.
Swartz J. ⁱⁱ 8 condados de EEUU, 1988-1990	Ingresos por enfermedades cardiovasculares	2,5% de aumento de ingresos en mayores de 65 años para rango intercuartil de aumento de PM10.. Incrementos de 1,75 ppm de CO asociados a 2,8% de aumento en admisiones.
Sheppard et al ⁱⁱⁱ Seattle 1987-1994	Ingresos por asma en pacientes menores de 65 años.	4- 5% de aumento en tasa de ingreso por asma bronquial con aumentos de PM10 de 19 ug/m3, PM2,5 11,8 ug/m3 y 9,3 ug/m3 de PM10-2,5 (IQR). 6% de aumento asociado a aumentos de CO de 924 ppb (IQR).
Norris et al ^{iv} . Seattle 1995-1996	Consultas de urgencia por asma en niños menores de 18 años.	Aumento de 11 ug/m3 de partículas finas asociados con aumento de 15% de consultas por asma.

i Tellez-Rojo MM, Romieu I, Polo-Pena M, Ruiz-Velasco S, Meneses-Gonzalez F, Hernandez-Avila M. [Effect of environmental pollution on medical visits for respiratory infections in children in Mexico City]. Salud Publica Mex 1997; 39:513-22.

ii Swartz J. Air pollution and hospital admissions for heart disease in eight US counties. Epidemiology 1999;10(1):17-22.

iii Sheppard L, Levy D, Norris G, Larson T and Koenig J. Effects of ambient air pollution on nonelderly asthma hospital admissions in Seattle, Washington 1987-1994. Epidemiology 1999;10(1):23-30.

iv Norris G, Young S, Koenig J, Larson T, Sheppard L and Stout J. An association between fine particles and asthma emergency department visits for children in Seattle. Environmental Health Perspectives 1999;107(6):489-493.

Riesgos Relativos y Mortalidad Diaria por PM-10 Exposición Tipo Santiago 1988-1991.

Estudio	Riesgo Relativo a 100 µg/m ³ PM-10	Mortalidad (Casos Anuales)
CIFUENTES Y LAVE (88-91)	MORTALIDAD TOTAL: 1,058 +CO: 1,027 MORTALIDAD MAYOR 65 AÑOS +CO: 1,036 MORTALIDAD RESPIRATORIA: 1,14 MORTALIDAD CARDIOVASCULAR: 1,08	542
OSTRO, ET AL (89-91)	+OTROS: MORTALIDAD TOTAL: 1,035 MORTALIDAD RESPIRATORIA: 1,13 MORTALIDAD CARDIOVASCULAR: 1,08 MORTALIDAD MENOR 64 AÑOS: 1,09	
SALINAS Y VEGA (88-91)	+CO MORTALIDAD TOTAL: 1,030	602
SANHUEZA ET AL (89-93)	+SO ₂ + O ₃ MORTALIDAD MAYOR 65 AÑOS: 1,046 MORTALIDAD CARDIOVASCULAR: 1,024 MORTALIDAD RESPIRATORIA: 1,054	600

Efectos cardiovasculares del CO

- **Disminución tiempo max ejercicio y VO2 max.**
- **Reducción en tiempo para desarrollo angina y depresión ST.**
- **Aparición de arritmias.**
- **Aumento síntomas y admisiones por enfermedades CV.**
- **Aumento mortalidad diaria por enfermedades CV.**

Efectos respiratorios del CO

- Disminución capacidad difusión CO en sujetos sanos
- Disminución capacidad de ejercicio en pacientes con EBOC

**Efectos de la Contaminación
Atmosférica en la Salud Humana.
Evidencias de Estudios Recientes**

Dra. Jeanette Vega M.

Abril 2000

000471

Resultados estudios transversales

Referencia	Año	N ciudades	<u>% incr 50 ug/m3 PM10</u> Media	intervalo 95%
Lave & Seskin 1977	1960	117	4.2%	1.0% - 7.3%
Lave & Seskin 1977	1969	112	6.9%	3.0% - 10.7%
Ozkaynak & Thurston 1988	1988	98	6.4%	1.8% - 10.9%

Estudio de seis ciudades

- **Datos de probabilidad de sobrevida de 8111 adultos reclutados a mediados de los 70 en seis ciudades del Este de EEUU: Portage WI, St Louis MO, Topeka KS, Steubenville OH, Watertown MA y Kingston TN.**

- **Alrededor de 1500 adultos de cada ciudad seguidos por 14-16 años. Datos incluyen ocupación, tabaquismo, IMC.**

- **Datos de exposición a través de monitoreo rutinario y campañas.**

- **De las 1430 muertes se localizaron 98% de los certificados de defunción.**

Estudio de la American Cancer Society

- **Datos de probabilidad de supervida de 550.000 voluntarios seguidos entre 1982 y 1989**
- **Análisis utilizando modelo de COX. Datos incluyen NSE, tabaquismo, ocupación, alcohol, e IMC.**
- **39.000 muertes asignadas a localidad geográfica utilizando ZIP code (3 dígitos).**

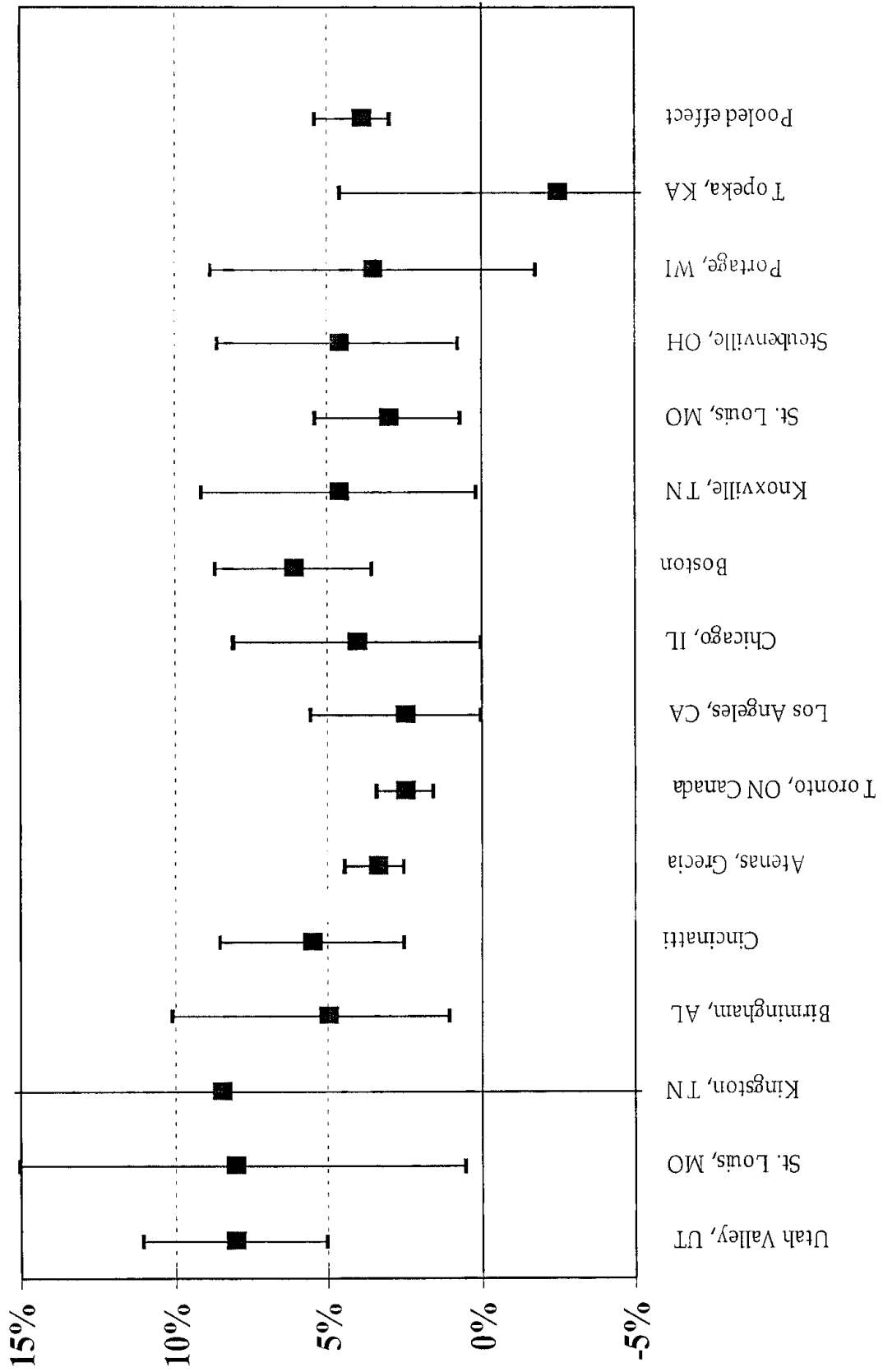
Resultados estudios prospección

Estudio de 6 Ciudades Estudio de ACS
Media Intervalo 95% Media Intervalo 95%

Población

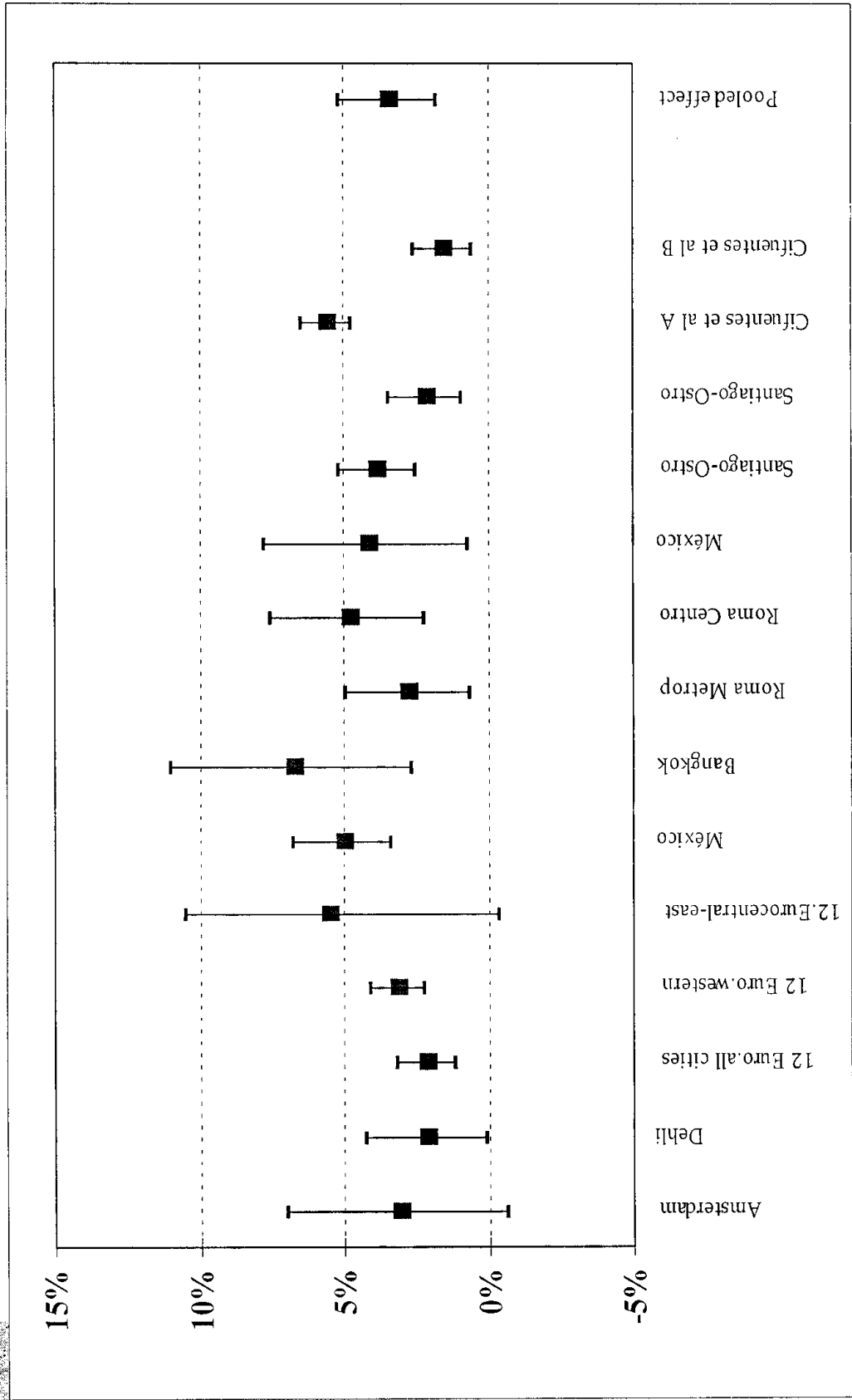
Total	26%	8% - 47%	17%	9%	- 26%
No Fumadores	19%	-10% - 57%	22%	7%	- 39%
Fumadores anteriores	35%	2% - 77%			
Fumadores activos (*)	32%	4% - 68%	15%	5%	- 26%

000475



Estudios hasta 1996

Estudios recientes



Riesgos Relativos de Morbilidad Exposición Tipo Santiago 1988-1991.

Estudio

PM-10
100 mg/m³

ILABACA
(95-96)

URGENCIAS INFANTILES
PM10: 1,08

BELMAR a)
(88)

FLUJOMETRIA, AUSENTISMO, RONQUERA

BELMAR b)
(88)

CONSULTA ATENCION PRIMARIA EN SALUD
NO SIGNIFICATIVA

SANCHEZ
(96)

SIBILANCIAS. MEDIA MOVIL 3 DIAS PM10: 1,78

000478

Mortalidad diaria en 8 ciudades canadienses 1986-1996 (Burnett 2000)

Contaminante	Concentración media	Modelo I (efecto individual)	Modelo II (efecto combinado)	Modelo III (efecto con análisis de componentes principales)
PM ₁₀ (ug/m ³)	25,9	1,9 (2,8)	NI	NI
PM _{2,5} (ug/m ³)	13,3	1,6 (3,1)	1,0 (2,9)	NI
PM _{10-2,5} (ug/m ³)	12,6	0,9 (1,4)	0,6 (1,6)	NI
O ₃ (ppb)	31	3,4 (2,6)	1,6 (3,4)	2,0 (3,2)
NO ₂ (ppb)	22	3,9 (3,0)	1,1 (3,2)	1,2 (2,7)
SO ₂ (ppb)	4,7	1,1 (1,6)	0,7 (2,1)	NI
CO (ppm)	0,9	2,1 (2,1)	0,7 (1,9)	0,7 (1,7)
SO ₄ (ug/m ³)	2,6	1,2 (3,5)	NI	1,3 (3,5)
Zn (ng/m ³)	26	0,8 (2,4)	NI	0,8 (2,1)
Ni (ng/m ³)	1,6	0,7 (1,8)	NI	0,8 (1,9)
Fe (ng/m ³)	81	1,2 (2,3)	NI	0,8 (1,8)

Estudio, Lugar y Fecha	Efecto	Resultados Resumidos
Burnet et al (1) 10 ciudades en Canadá Periodo:1981-1991	Admisiones diarias por insuficiencia cardiaca congestiva en ancianos	El monóxido de carbono (CO) mostró asociación consistente con tasa de hospitalización.
Poloniecki et al (ii) Londres, Inglaterra	Admisiones de urgencia por enfermedades cardiovasculares (C.I.E. 390-459)	No se encontró asociación con el Ozono. Sin embargo 4 contaminantes estuvieron significativamente asociados a Infarto al Miocardio y Enfermedades Cardiovasculares. No se encontró asociación con insuficiencia cardiaca. Se encontró asociación entre sulfatos y angina y entre NO2 y enfermedades CV totales y por arritmias.
Wordley et al (iii) Birmingham, Reino Unido. Periodo 1992-1994	Mortalidad. Egresos hospitalarios por asma, bronquitis, neumonía, EPOC, enfermedad coronaria aguda, enfermedad cerebrovascular aguda, todas las condiciones respiratorias y todas las condiciones circulatorias.	PM ₁₀ diario se asoció con todos los ingresos por cuadros respiratorios, cerebrovasculares y bronquitis. PM ₁₀ promedio (últimos 3 días) se asoció con neumonía, asma, y admisiones respiratorias. La mortalidad por todas las causas se asoció con PM10 de las 24 horas anteriores.

ⁱ Burnett RT, Dales RE, Brook JR, Raizenne ME, Krewski D. Association between ambient carbon monoxide levels and hospitalizations for congestive heart failure in the elderly in 10 Canadian cities. *Epidemiology* 1997; 8:162-7.

ⁱⁱ Poloniecki JD, Atkinson RW, de Leon AP, Anderson HR. Daily time series for cardiovascular hospital admissions and previous day's air pollution in London, UK. *Occup Environ Med* 1997; 54:535-40.

ⁱⁱⁱ Wordley J, Walters S, Ayres JG. Short term variations in hospital admissions and mortality and particulate air pollution. *Occup Environ Med* 1997; 54:108-16.

Efectos de la Contaminación Atmosférica en la Salud Humana. Evidencias de Estudios Recientes

**Dra. Jeanette Vega M.
Abril 2000**

Las concentraciones elevadas de contaminantes del aire, especialmente partículas menores de 10 micrones y dentro de esta menores de 2,5 micrones producen efectos adversos en salud que van desde efectos fisiopatológicos, aumento de consultas, aumento de admisiones hospitalarias totales y por enfermedades respiratorias y cardiovasculares y aumento de mortalidad por enfermedades respiratorias y cardiovasculares. Los efectos en salud asociados a episodios de alta contaminación tales como aquellos que ocurrieron en Londres en 1952 y en Donora Pennsylvania en 1948, han sido descritos en detalle en la literatura en los últimos 20 años^{i ii}.

La contaminación atmosférica (CA) se asocia a efectos nocivos en la salud humana que van desde efectos fisiopatológicos, aumento de síntomas respiratorios, consultas diarias y hospitalizaciones a aumento de mortalidad. Numerosos estudios en el mundo se han realizado en los últimos años con un crecimiento explosivo de los artículos a partir de la década de los 90. En este artículo se resumen los principales estudios de los últimos años que muestran la evidencia de asociación entre distintos daños en salud y la contaminación del aire

1. Efectos en mortalidad asociados a contaminación del aire

La contaminación atmosférica, provoca aumento de mortalidad diarias y específicamente por enfermedades cardiovasculares y respiratorias. Estos efectos comenzaron a ser mostrados a través de estudios transversales en los cuales se comparaban los niveles promedio de contaminación y las cifras de mortalidad a comienzos de los años setenta. Lave y Seskinⁱⁱⁱ publicaron en 1970 el primero de una serie de estudios que relacionaban la contaminación por partículas de diámetro pequeño y mortalidad en distintas ciudades de Estados Unidos. A partir de entonces ha habido numerosos otros estudios transversales que han mostrado la misma relación en todo el mundo. Esta evidencia ha sido posteriormente corroborada por estudios de seguimiento entre los que destacan el estudio de la American Cancer Society^{iv} y el estudio de las seis ciudades^v. En el estudio de las seis ciudades se estudió probabilidad de sobrevivida de 8111 adultos reclutados a mediados de los 70 en seis ciudades del Este de EEUU. Alrededor de 1500 adultos de cada ciudad fueron seguidos por 14-16 años. Los datos recolectados incluyeron ocupación, tabaquismo, IMC y se obtuvieron datos de exposición a través de monitoreo rutinario y campañas. Los resultados mostraron aumentos de entre 3 y 8% de la mortalidad por cada 50 ug/m³ de aumento del nivel de partículas de tamaño menor a 10 micrones (PM10).

Resultados estudios transversales de efectos de la contaminación atmosférica en salud

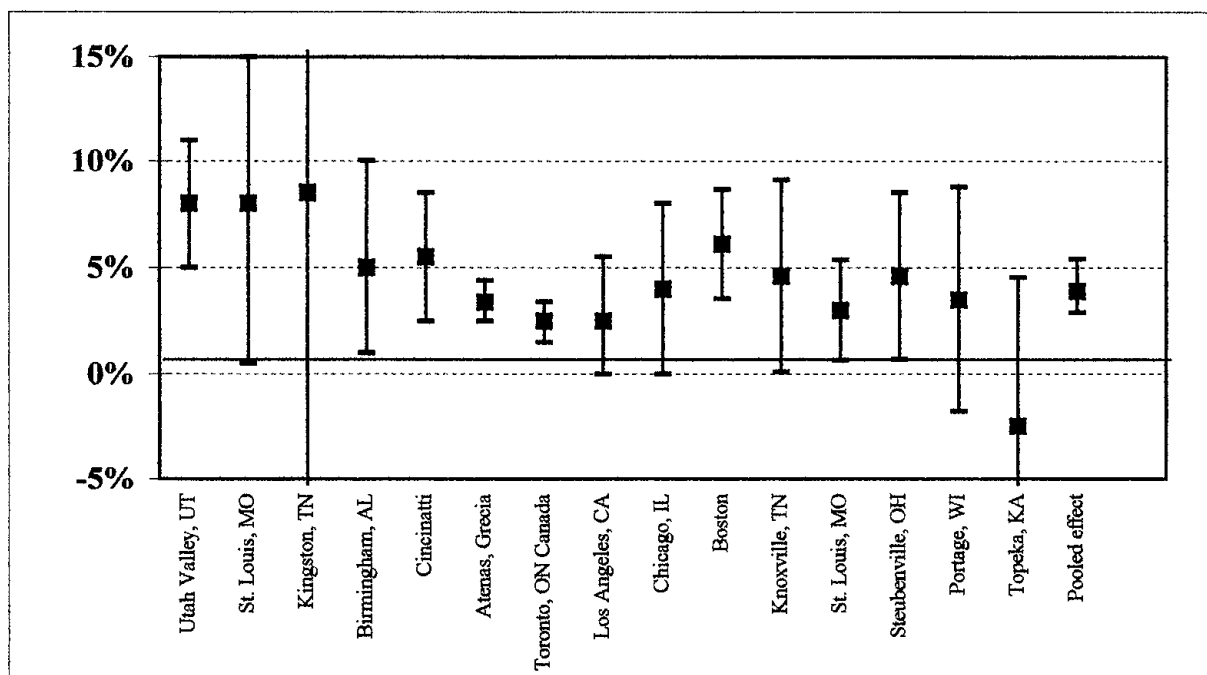
Referencia	Año	N ciudades	% incr 50 ug/m3 PM10		
			Media	intervalo 95%	
Lave & Seskin 1977	1960	117	4.2%	1.0% -	7.3%
Lave & Seskin 1977	1969	112	6.9%	3.0% -	10.7%
Ozkaynak & Thurston 1987	1980	98	6.4%	1.8% -	10.9%

A partir de la década de los noventa, la bibliografía acerca de la asociación entre contaminación atmosférica y efectos agudos en mortalidad y morbilidad comienza a aumentar y los investigadores empiezan a utilizar análisis de series de tiempo para mostrar estos efectos. En éstos, se analiza la relación entre el número de muertes u hospitalizaciones diarias y los niveles de contaminación por partículas medidos simultáneamente a través de monitores en las mismas ciudades. Asumiendo que las muertes y hospitalizaciones tienen una distribución de Poisson se utilizan modelos matemáticos para modelar la relación entre nivel de partículas y efectos. Inicialmente, se introducen en estos modelos la humedad y temperatura de modo de controlar el efecto confundente de ambas, debido a que los efectos también se correlacionan de manera independiente con aquellas. Posteriormente se introducen en los modelos variables de control para estacionalidad y día de la semana y luego los distintos contaminantes de interés: Partículas totales, menores de 10 micrones (PM10), menores de 2,5 micrones (PM2,5), Monóxido de Carbono, Anhídrido Sulfuroso (SO2), Dióxido de Nitrógeno (NO2) y Ozono (O3), además de términos de interacción para todas las combinaciones posibles.

Las siguientes tablas resumen a) algunos estudios relevantes en cuanto a mortalidad analizados por la Environmental Protection Agency de los Estados Unidos (EPA) en 1996 para fijar las normas de material particulado y ozono ^{vi} b) los resultados de los estudios mas recientes (1996 – 1999).

**Estudios epidemiológicos que muestran asociación entre muertes diarias y
concentración de PM10. Porcentajes de aumento de mortalidad por cada 50 µg/m³
de incremento en las concentraciones del
PM10 de 24 Horas (EPA – 1996)**

Ciudad	Referencia	PM-10 (µg/m ³)		% aumento por 50 (µg/m ³) PM-10	
		Media	Máxima	Media	Intervalo 95%
Utah Valley, UT	Pope et al. (1992)	47	297	8.0%	5.0% - 11.0%
St. Louis, MO	Dockery et al. (1992)	28	97	8.0%	0.5% - 15.0%
Kingston, TN	Dockery et al. (1992)	30	67	8.5%	6.0% - 25.0%
Birmingham, AL	Schwartz (1993)	48	163	5.0%	1.0% - 10.0%
Cincinnati, OH	Schwartz (1994)	42		5.5%	2.5% - 8.5%
Atenas, Grecia	Touloumi et al. (1994)	78	306	3.4%	2.5% - 4.4%
Toronto, Canada	Özkaynak et al. (1994)	40	96	2.5%	1.5% - 3.4%
Los Angeles, CA	Kinney et al. (1995)	58	177	2.5%	0.0% - 5.5%
Chicago, IL	Styer et al (1995)	37	365	4.0%	0.0% - 8.0%
Boston	Schwartz et al. (1996)	24	37	6.1%	3.6% - 8.6%
Knoxville, TN	Schwartz et al. (1996)	32	47	4.6%	0.1% - 9.1%
St. Louis, MO	Schwartz et al. (1996)	31	47	3.0%	0.6% - 5.4%
Steubenville, OH	Schwartz et al. (1996)	46	78	4.6%	0.7% - 8.5%
Portage, WI	Schwartz et al. (1996)	18	30	3.5%	1.8% - 8.8%
Topeka, KA	Schwartz et al. (1996)	27	43	-2.5%	-9.6% - 4.6%
Pooled effect				3.4%	1.7% - 5.2%



Después de 1996, se han efectuado diversos estudios: En Bangkok^{vii}, ciudad de 6 millones de habitantes, con clima tropical, se observó un aumento de 1 -2% de mortalidad total, 1-2% en mortalidad cardiovascular y 3 -6 % de aumento en muertes por causa respiratoria por cada 10 ug de aumento de PM 10. En India una de las ciudades mas contaminadas del planeta se efectuó un estudio entre 1991 y 1994, encontrándose un promedio total de partículas (TSP) de 375 ug/m³, con efectos significativos de aumento de muertes totales de 0,2%, 0,3% para mortalidad por enfermedades respiratorias y 0,4% para enfermedades cardiovasculares. En cuanto a edad, los mayores efectos se observaron en el grupo de 15- 44, sin efectos significativos en menores de 4 ni en mayores de 65 años. En Beijing, otro estudio encontró diferencias significativas de mortalidad diaria en relación a SO₂ pero no a partículas.

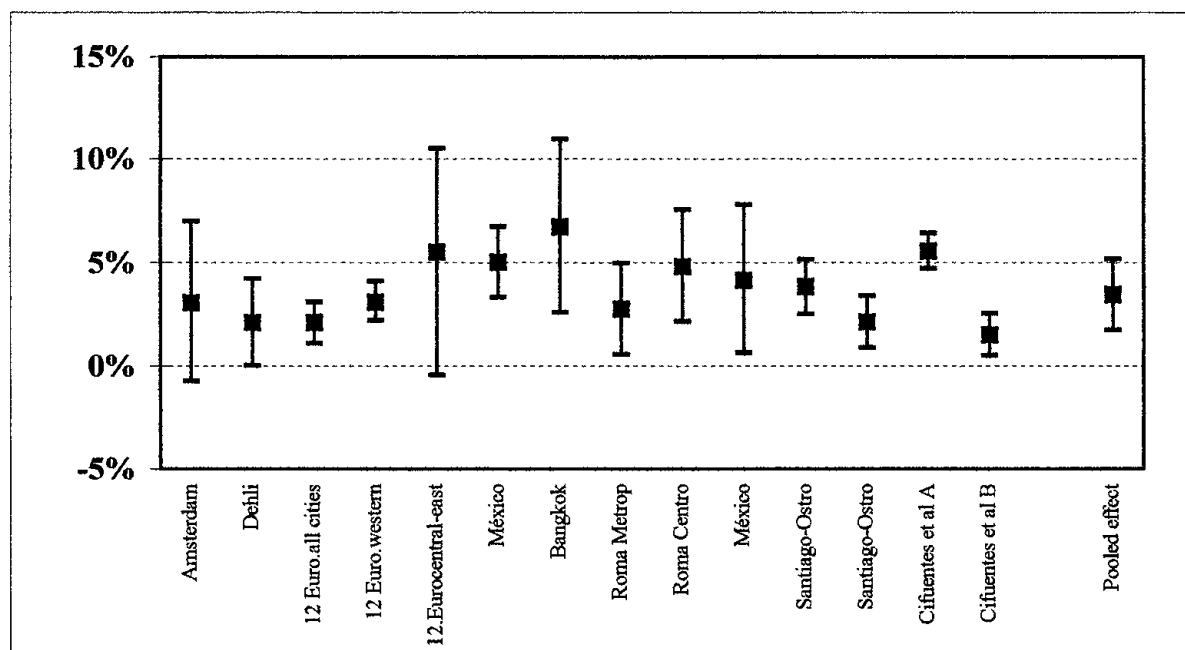
Un reanálisis de los datos de Philadelphia^{viii} (1974-1988) que incluyó TSP, SO₂, NO₂, CO, lagged CO y O₃, encontró un aumento de mortalidad diaria para el rango intercuartil de 1,15% para TSP, 1,08% para SO₂, 1,13% para lagged CO y 2,28 % para O₃. Cuando se incluyen todos los contaminantes se mantiene el efecto para SO₂, lagged CO y O₃. Otro estudio en Toronto, entre 1980 y 1994, encontró efectos significativos para el rango intercuartil para CO, NO₂, SO₂, TSP y PM₁₀ y 2,5 estimados. El efecto sin embargo fue explicado casi completamente por los niveles de CO y TSP. La correlación estadística se mantuvo para el CO en todas las edades, estaciones del año y para muertes totales y cardiovasculares^{ix}.

En Europa, un estudio realizado en Ámsterdam entre 1986 y 1992, examinando hollín, PM₁₀, SO₂, CO y O₃ encontró efectos en mortalidad asociados a hollín (18,7% de aumento por cada 100 ug/m³) y niveles de Ozono en los dos días previos, sin efectos significativos para PM₁₀, SO₂ ni CO. En Roma, un estudio del período 1992 a 1995 mostró efectos sobre la mortalidad total de TSP, CO y SO₂, mayores en el centro de la ciudad, efecto sobre la mortalidad cardiovascular solo en el centro de la ciudad sin efectos sobre la mortalidad por enfermedades respiratorias. El PM₁₀ y SO₂ también mostraron efectos significativos en un estudio de 12 ciudades europeas.

En Latinoamérica también se han realizado estudios, recientemente. En Sao Paulo (1990-1991) se encontró asociación significativa del PM₁₀, NO_x, SO₂ y CO sobre mortalidad en mayores de 65 años. Al incluir todos los contaminantes juntos, se mantiene la significación solo para partículas (1,3% de aumento de mortalidad por cada 10 ug/m³ de aumento de partículas. Un estudio reciente en ciudad de México, que estudió el efecto de PM_{2,5}, NO₂ y O₃, encontró un aumento de 1,4% de mortalidad diaria por cada 10ug/m³ de aumento de PM_{2,5}. También se encontraron efectos mayores para causas cardiovasculares y respiratorias y en mayores de 65 años. El Ozono se correlacionó solo con las causas cardiovasculares y no se encontró efecto para el NO₂.

Estudios epidemiológicos recientes que muestran asociación entre muertes diarias y concentración de PM10. Porcentajes de aumento de mortalidad por cada 50 $\mu\text{g}/\text{m}^3$ de incremento en las concentraciones del PM10 de 24 Horas.

Ciudad	Referencia	% aumento por 50 ($\mu\text{g}/\text{m}^3$) PM-10		
		Media	Intervalo 95%	
Amsterdam	Verhoeff (1996)	3.1%	-0.7%	7.0%
Dehli	Crooper (1997)	2.1%	0.0%	4.2%
12 Euro.all cities	Katsouyanni (1997)	2.1%	1.1%	3.1%
12 Euro.western	Katsouyanni (1997)	3.1%	2.2%	4.1%
12.Eurocentral-east	Katsouyanni (1997)	5.5%	-0.4%	10.5%
México	Borja-Aburto (1997)	5.0%	3.3%	6.7%
Bangkok	Ostro (1998)	6.7%	2.6%	11.0%
Roma Metrop	Michelozzi (1998)	2.8%	0.6%	5.0%
Roma Centro	Michelozzi (1998)	4.8%	2.2%	7.5%
México	Borja-Aburto (1998)	4.1%	0.6%	7.7%
Toronto* (IQ=42)	Burnett (1999)	2.9%	1.5%	4.4%
Santiago-Ostro	Ostro (1996)	3.8%	2.5%	5.2%
Santiago-Ostro	Ostro (1996)	2.1%	0.9%	3.4%
Cifuentes et al A	Cifuentes (1999)	5.6%	4.7%	6.4%
Cifuentes et al B	Cifuentes (1999)	1.5%	0.5%	2.5%
Pooled effect		3.4%	1.7%	5.2%



En relación a efectos en mortalidad en grupos específicos, recientemente se estudió la relación entre contaminación del aire y mortalidad infantil por causas a través de un estudio poblacional pareado de casos y controles, en la República Checa entre 1989 y 1991^x. Se estimó el efecto de TSP, SO₂ y NO₂, controlando por nivel socioeconómico de la madre, peso al nacer, edad gestacional y condiciones del parto. Se encontró un aumento de razón de riesgos de mortalidad para el período post neonatal de 1,95 (1,09-3,5) para TSP, 1,74 (1,01 – 2,98) para SO₂ y 1,66 (0,98 – 2,81) para NO₂, solo las partículas permanecieron significativas al incluir todos los contaminantes en el modelo.

En el último par de años, los investigadores han comenzado a profundizar en el efecto diferencial de los distintos componentes de las partículas, así por ejemplo Burnett et al. (en prensa), estudiaron el efecto de distintos componentes de partículas en la mortalidad diaria en 8 ciudades canadienses para los años 1986-1996 inclusive, los resultados se muestran en la tabla siguiente:

Contaminante	Concentración media	Modelo I (efecto individual)	Modelo II (efecto combinado)	Modelo III (efecto con análisis de componentes principales)
PM ₁₀ (ug/m ³)	25,9	1,9 (2,8)	NI	NI
PM _{2,5} (ug/m ³)	13,3	1,6 (3,1)	1,0 (2,9)	NI
PM _{10-2,5} (ug/m ³)	12,6	0,9 (1,4)	0,6 (1,6)	NI
O ₃ (ppb)	31	3,4 (2,6)	1,6 (3,4)	2,0 (3,2)
NO ₂ (ppb)	22	3,9 (3,0)	1,1 (3,2)	1,2 (2,7)
SO ₂ (ppb)	4,7	1,1 (1,6)	0,7 (2,1)	NI
CO (ppm)	0,9	2,1 (2,1)	0,7 (1,9)	0,7 (1,7)
SO ₄ (ug/m ³)	2,6	1,2 (3,5)	NI	1,3 (3,5)
Zn (ng/m ³)	26	0,8 (2,4)	NI	0,8 (2,1)
Ni (ng/m ³)	1,6	0,7 (1,8)	NI	0,8 (1,9)
Fe (ng/m ³)	81	1,2 (2,3)	NI	0,8 (1,8)

Como se observa, las partículas finas predicen un mayor porcentaje de muertes (1,6%) que las entre 2,5 y 10 micrones. El efecto de ambas disminuye al incluir los otros contaminantes en el modelo. Cuando se analizan los componentes del material particulado (modelo III), estos predicen un mayor porcentaje del total de muertes (3,7%) que las partículas finas en el modelo II. Otros autores^{xi} han mostrado recientemente una asociación significativa entre niveles de H⁺ y SO₄(2-), (aerosoles ácidos) y mortalidad por enfermedades respiratorias con un RR de 1,55 (1,09-2,2) y 1,24 (1,01-1,52) respectivamente.

2. Efecto en admisiones hospitalarias y consultas de emergencia

Los estudios de admisiones hospitalarias y consultas de urgencia se han concentrado principalmente en las enfermedades respiratorias y recientemente se han agregado otros efectos, como enfermedades cardiovasculares. Al igual que para el caso de mortalidad, la mayoría de los estudios utilizan series de tiempo y comparan los niveles de contaminación diarios con el número de consultas y admisiones entre 1 y 10 días después, utilizando modelos de series de tiempo, a través de regresión de Poisson, modelos lineales generalizados y modelos aditivos generalizados. Prácticamente todos los estudios han encontrado relación entre la contaminación atmosférica por partículas y aumento de las admisiones y consultas por enfermedades respiratorias y cardiovasculares, especialmente en ancianos. En la siguiente tabla se han resumido algunos estudios recientes, publicados posteriormente a la revisión de la EPA de 1996¹³.

Estudio, Lugar y Fecha	Efecto	Resultados Resumidos	Conclusión
Burnet et al ^(xii) 10 ciudades en Canadá Periodo: 1981-1991.	Admisiones diarias por insuficiencia cardíaca congestiva en ancianos	El monóxido de carbono (CO) mostró asociación consistente con tasa de hospitalización.	CO es el contaminante de mayor asociación con admisiones hospitalarias.
Poloniecki et al ^(xiii) Londres, Inglaterra	Admisiones de urgencia por enfermedades cardiovasculares (CIE 390-459)	No se encontró asociación con el Ozono. Sin embargo 4 contaminantes estuvieron significativamente asociados a Infarto al Miocardio y Enfermedades Cardiovasculares. No se encontró asociación con insuficiencia cardíaca. Se encontró asociación entre sulfatos y angina y entre NO ₂ y enfermedades CV totales y por arritmias.	Entre 1 y 50 infartos al miocardio son producidos o inducidos por episodios de contaminación del aire en hospitales en Londres.
Wordley et al ^(xiv) Birmingham, Reino Unido. Periodo 1992-1994	Mortalidad. Egresos hospitalarios por asma, bronquitis, neumonía, EPOC, enfermedad coronaria aguda, enfermedad cerebrovascular aguda, todas las condiciones respiratorias y todas las condiciones circulatorias.	PM ₁₀ diario se asoció con todos los ingresos por cuadros respiratorios, cerebrovasculares y bronquitis. PM ₁₀ promedio (últimos 3 días) se asoció con neumonía, asma, y admisiones respiratorias. La mortalidad por todas las causas se asoció con PM ₁₀ de las 24 horas anteriores.	PM ₁₀ se asocia significativamente con varios indicadores de efectos agudos en la salud. Estas asociaciones son similares y consistentes con otros estudios. Sin embargo, el tamaño estimado del efecto en salud pública es pequeño, dando cuenta solo de una pequeña proporción de ingresos hospitalarios y de la mortalidad en un periodo de dos años.
Delfino et al ^(xv) Montreal, Quebec. Periodo: 1992- 1993	Visitas diarias a la Sala de Emergencias (SE) por enfermedades respiratorias.	1992, no hubo asociación significativa con las visitas a la SE. 1993, ozono máximo 1-h, PM ₁₀ , PM _{2.5} , y SO ₄ se asociaron con visitas respiratorias para pacientes > 64 años. Un incremento en el nivel promedio de ozono máximo 1-h (36 ppb) se asoció con un incremento de 21% sobre el número promedio de visitas diarias a la SE (95% intervalo de confianza [IC]: 8 a 34%). El efecto de las partículas fue menor, con incrementos promedio de 16% (4 a 28%), 12% (2 a 21%) y 6% (1 a 12%) para PM ₁₀ , PM _{2.5} , y SO ₄ , respectivamente.	Una fracción significativa de las visitas a la sala de emergencias se asocian con las concentraciones de ozono y material particulado que están muy por debajo de los estándares actuales.
Delfino et al ^(xvi) Montreal, Quebec Periodo: junio-agosto, 1989-1990	Visitas diarias a la Sala de Emergencias (SE) por enfermedades respiratorias	1989: Asociación entre visitas respiratorias a la SE (>64 años) y ozono máximo 1- y 8-h. (1 día antes de la visita a la SE, en verano). Las visitas a SE incrementaron 18.7% y 21.8% sobre el promedio, para un aumento promedio de 44 ppb ozono (máximo 1-h) y 38 ppb ozono (máximo 8-h). PM _{2.5} se asocia con visitas respiratorias a la SE de los adultos mayores..	Los estándares de calidad del aire no protegen la salud de subgrupos susceptibles como los ancianos.
Gordian et al ^(xvii) Anchorage, Alaska mayo 1992 a marzo 1994	Visitas diarias de pacientes ambulatorios por enfermedades respiratorias, incluyendo asma, bronquitis, y enfermedades del tracto superior	Un incremento de 10 (ug/m ³) en PM ₁₀ arrojó un incremento de 3-6% en las visitas por asma y un incremento de 1-3% en las visitas por enfermedades del tracto respiratorio superior. CO se asoció con bronquitis, enfermedades del tracto respiratorio superior. No con asma (invierno).	Los hallazgos son consistentes con estudios previos de PM en otras áreas urbanas y aportan evidencia de que la fracción gruesa de PM ₁₀ puede afectar la salud de la población trabajadora.
Hernández Garduno et al ^(xviii) Ciudad de México	Visitas al consultorio por infecciones del tracto respiratorio superior	La contaminación del aire se asoció con 10 a 16% de las visitas al consultorio. O ₃ y NO ₂ incrementaron las visitas al consultorio entre 19 y 43% sobre el promedio. Otros contaminantes y el grupo control no demostraron asociaciones significativas.	La contaminación fotoquímica parece ser el problema más severo en Ciudad de México.
Anderson et al ^(xix) Amsterdam, Barcelona, Londres, Milán, París, Róterdam	Ingresos hospitalarios por enfermedad pulmonar obstructiva crónica (EPOC)	La contaminación del aire (SO ₂ , BS, PMT, NO ₂ , O ₃) se asoció con lo ingresos diarios por EPOC.	Los resultados para las partículas y el ozono son ampliamente consistentes con aquellos de América del Norte. Los coeficientes para las partículas son sustancialmente menores.

Burnett et al ^(xx) 16 ciudades en Canadá 1981-1991	Ingresos hospitalarios por enfermedades respiratorias	O ₃ se asocia con admisiones respiratorias (excepto en los meses de invierno). PM, CO se asocian con hospitalizaciones respiratorias.	La contaminación del aire (incluyendo el ozono) en concentraciones relativamente bajas se asocia con ingresos al hospital por enfermedades respiratorias, en poblaciones que tienen climas y perfiles de contaminación diversos.
Choudhury et al ^(xxi) Anchorage, (Alaska) Periodo: 1992-1994	Visitas médicas por asma, bronquitis, infecciones del tracto respiratorio superior.	PM ₁₀ se asocia con la morbilidad. Las asociaciones son mas poderosas con niveles PM ₁₀ en días concurrentes.	El Riesgo Relativo de morbilidad es mayor con respecto a la contaminación por PM ₁₀ en los días mas tibios.
Tellez Rojo et al ^(xxii) Ciudad de México, 1993	Visitas médica por infecciones respiratorias en niños	Un incremento de 50 ppb en le promedio diario de ozono causa un incremento de 9.9% en las visitas a emergencias por infecciones del tracto respiratorio superior (invierno), que podría elevarse hasta un 30% si el incremento dura 5 días consecutivos.	La exposición de niños < 15 años al ozono y NO ₂ afecta el número de visitas médicas por causas respiratorias.
Swartz J. ^(xxiii) 8 condados de EEUU, 1988-1990	Ingresos por enfermedades cardiovasculares	2,5% de aumento de ingresos en mayores de 65 años para rango intercuartil de aumento de PM ₁₀ .. Incrementos de 1,75 ppm de CO asociados a 2,8% de aumento en admisiones.	Resultados concordantes con literatura reciente de efectos CV de CO.
Sheppard et al ^(xxiv) Seattle 1987-1994	Ingresos por asma en pacientes menores de 65 años.	4- 5% de aumento en tasa de ingreso por asma bronquial con aumentos de PM ₁₀ de 19 ug/m ³ , PM _{2,5} 11,8 ug/m ³ y 9,3 ug/m ³ de PM ₁₀ -2,5 (IQR). 6% de aumento asociado a aumentos de CO de 924 ppb (IQR).	PM y CO asociados con admisiones por asma
Norris et al ^(xxv) Seattle 1995-1996	Consultas de urgencia por asma en niños menores de 18 años.	Aumento de 11 ug/m ³ de partículas finas asociados con aumento de 15% de consultas por asma.	

Los resultados de estos estudios son consistentes: tanto el material particulado (medido generalmente como PM₁₀), el SO₂, y el CO aparecen asociados a incrementos en las admisiones hospitalarias respiratorias. El ozono también aparece asociado, principalmente en verano. Los efectos del material particulado se encuentran muchas veces confundidos con aquellos del SO₂ y CO, ya que estos contaminantes tienen fuentes comunes y se encuentran correlacionados. Sin embargo, los efectos del ozono aparecen generalmente independientes del efecto de los otros contaminantes. El rezago del efecto (rezago de las variables de contaminación en los modelos) varía entre el mismo día a algunos días anteriores.

3. Efectos fisiopatológicos

3.1. Efectos respiratorios

En contraste con los numerosos estudios que describen aumento de síntomas respiratorios asociados a CA, aún en sujetos normales, las alteraciones fisiopatológicas manifestadas por cambios en la función pulmonar se han investigado principalmente en niños o sujetos con enfermedades respiratorias pre-existentes^{xxvi}.

Dassen y cols ^{xxvii}, describen deterioro de la función pulmonar en niños holandeses en relación a un episodio agudo de contaminación atmosférica, cambios que persistieron hasta por 16 días pasado éste. Dockery y cols. ^{xxviii}, comunican hallazgos

similares en niños de Ohio, EEUU. Ellos describen una declinación linear de la capacidad vital forzada y VEF 0,75 durante y después de un episodio de contaminación en que el promedio de partículas totales en suspensión (PTS) por 24 hrs fue 422 ug-m^3 .

Pope y cols.^{xxxix} Describen una asociación significativa entre cambios en el VEF1 y niveles de PM10 en fumadores con enfermedad pulmonar crónica obstructiva de grado leve a moderado. El mismo autor encuentra un deterioro significativo del flujo espiratorio máximo en niños asmáticos relacionado con aumentos de la contaminación por material particulado^{xxx}. Similar hallazgo ha sido comunicado en niños^{xxxix} y adultos^{xxxii} asmáticos expuestos a contaminación por ozono.

En 1440 adultos no fumadores de Beijing expuestos a niveles muy elevados de contaminación atmosférica e intradomiciliaria por partículas Xu y Dockery^{xxxiii} encuentran una asociación inversa entre PTS en el aire de exteriores y la capacidad vital forzada (CVF) y VEF1 tanto en los sujetos que empleaban sistemas de calefacción contaminante (carbón) como en los que no lo usaban.

Peters et al (^{xxxiv}), mostraron en Alemania, entre 1990 y 1992 una disminución de 0,9% en el PEF y un incremento de puntajes en escala de síntomas de 14.7% asociados con un incremento promedio de 28 (ug/m^3) de SO2 en 5 días previos.. Los efectos en los adultos fueron menores y menos consistentes. La exposición elevada y prolongada a la contaminación de tipo invernal se asoció con efectos adversos pequeños en los asmáticos.

Estudios mas recientes han mostrado consistentemente la relación entre contaminación atmosférica y efectos en la función pulmonar. Gold y cols^{xxxv}. Reportaron efecto de las partículas y =3 reduciendo el flujo espiratorio máximo en niños entre 8 y 11 años en Ciudad de México. El efecto combinado de 7 días de exposición al rango intercuartil de PM2,5 (17 ug/m^3) y Ozono (25 ppb) predijeron una reducción de 7,1% (-11 a -3,9%) del flujo espiratorio máximo.

Schwartz y Neas^{xxxvi}, han reportado recientemente la asociación entre aumentos de partículas finas (rango intercuartil 15 ug/m^3), síntomas respiratorios bajos, con aumento de 29% (6% -57%) y flujo espiratorio máximo, con disminución de $-0,91 \text{ l/min}$ (-0,14 a $-1,68$) para 15 ug/m^3 de aumento de PM2,5.

Aún cuando se ha especulado que la contaminación ambiental por partículas puede provocar liberación de citoquinas e inflamación alveolar que alteren el intercambio gaseoso^{xxxvii}, este efecto ha sido escasamente investigado. Sólo recientemente Pope et al^{xxxviii} evaluaron el efecto de la exposición aguda a contaminación por partículas en la saturación de oxígeno y frecuencia cardíaca de 90 ancianos residentes en Utah, donde el nivel máximo de PM10 durante el período de estudio fue 140 ug-m^3 . Ellos encuentran un aumento en la frecuencia cardíaca asociado a incrementos en PM10 desde el día que antecede y durante los 5 días siguientes al episodio de contaminación, pero no encuentran una asociación estadísticamente significativa entre PM10 y saturación de Oxígeno. Cabe especular que estas alteraciones se magnifiquen o alcancen significación en poblaciones

expuestas crónicamente a niveles muy superiores de contaminación por partículas como es el caso de Santiago.

En nuestro país, Pertuze et al⁶ en un estudio efectuado en 1994-95, encontraron un aumento de tos expectoración y carraspera en adultos no fumadores de Santiago (PM10 promedio mensual en 1 año: 102 ug-m³), en comparación a una muestra similar de San Felipe (PM10 promedio mensual en 1 año: 63,7). Asimismo encontraron una disminución de la respuesta tusígena a capsaisina en los sujetos expuestos a niveles elevados de contaminación ambiental. Las alteraciones fisiopatológicas que modificaron la respuesta tusígena a capsaisina revirtieron cuando esta fue medida en los meses de verano en Santiago, período de baja contaminación ambiental^{xxxix}.

3.2 Efectos cardiovasculares y hematológicos

a) Fibrinógeno y enfermedades cardiovasculares:

La noción de que el fibrinógeno esta relacionado a las enfermedades cardiovasculares apareció por primera vez en la década de los 50 (^{xl}), cuando se encontró niveles elevados en pacientes con enfermedad cardíaca isquémica. Desde entonces han aparecido abundantes artículos que muestran que el aumento del fibrinógeno es un factor de riesgo para el desarrollo de enfermedades cardiovasculares. Estudios transversales han mostrado esta relación^{xli} y numerosos estudios prospectivos. Un resumen de los principales estudios de seguimiento que han mostrado efectos es el siguiente:

Estudio y fecha	Tipo muestra	Años de seguimiento	Resultados
Northwick Park Heart Study – ^{xlii} 1986	1511 hombres	10	Fibrinógeno asociado a muertes por enfermedad isquémica y a eventos isquémicos no fatales. Asociación más fuerte que valores de colesterol.
Gothenburg ^{xliii} 1984	792 hombres	13,5	Fibrinógeno asociado a Infarto al miocardio y AVE.
Framingham Study ^{xliv} 1987	554 hombres 761 mujeres	12	Fibrinógeno, factor de riesgo independiente para Enfermedad Isquémica y AVE.
PROCAM Study ^{xlv} 1987	1674 hombres	2	Fibrinógeno factor de riesgo para Enfermedad isquémica severa.
CSCCHDS Study ^{xlvi} 1991	4860 hombres	5,1/3,2	Fibrinógeno factor de riesgo comparable en fuerza a los tradicionales para Enfermedad isquémica.
GRIPS Study ^{xlvii} 1992	5239 hombres	5	Fibrinógeno factor de riesgo independiente para Infarto.
ECAT Study ^{xlviii} 1995	3043 hombres y mujeres con angina	2	Fibrinógeno asociado a Enfermedad Isquémica y AVE

Sobre la base de estos estudios se ha estimado la magnitud del efecto para los distintos eventos, para terciles de valores de fibrinógeno, en total se ha estimado un Odds ratio de 2,2 para enfermedades cardiovasculares, es decir aquellas personas con un

fibrinógeno elevado (en el tercil más alto), tendrían 2,2 veces más riesgo de presentar enfermedades cardiovasculares que la población general, ajustando por el efecto de otros factores de riesgo tradicionales como por ejemplo niveles de LDL.

Se han postulado varios mecanismos a través de los cuales el fibrinógeno aumentado puede generar atero-trombosis y concomitantemente aumento de probabilidad de isquemia y AVE. El fibrinógeno afecta la hemostasis, agregación plaquetaria, funciones endoteliales, lo que lleva a un estado de hipercoagulabilidad que favorece el desarrollo de trombos. Por otra parte, es el mayor determinante de la viscosidad del plasma e induce agregación de los glóbulos rojos reversible. Ambos fenómenos limitan el flujo de sangre. Habría al menos tres mecanismos de daño asociados al aumento de los niveles plasmáticos de fibrinógeno: disminución de flujo, predisposición a trombosis y aumento de aterogénesis^{xlix}, ^l. El fibrinógeno además se une a receptores de la membrana de las plaquetas, lo que a su vez predispone a mayor agregación^{li}. Adicionalmente, se integra a las lesiones vasculares ateroscleróticas donde se convierte a fibrina y factores de degradación del fibrinógeno. Estos últimos, estimulan la proliferación de células de musculatura lisa y migración^{lii}, ^{liii}. Estos efectos sugieren que el fibrinógeno está involucrado en las etapas tempranas de la formación de placas en el desarrollo de aterosclerosis, y que es un reactante de fase aguda inflamatoria, es decir aumenta en forma aguda cuando se producen procesos de tipo inflamatorio en las personas.

b) Viscosidad plasmática, proteína C- reactiva y enfermedades cardiovasculares

Al igual que el Fibrinógeno la elevación de la viscosidad plasmática se asocia a mayor frecuencia de eventos cardiovasculares, especialmente de tipo isquémico^{liv}, ^{lv} y a mayor frecuencia de subsecuentes eventos en sobrevivientes de AVE^{lvi} con un riesgo relativo asociado de 1,31 (1,07-1,61) a los dos años. La viscosidad plasmática depende gran parte de los niveles de Fibrinógeno y puede ser por tanto utilizada como un marcador de éste. Se ha encontrado que en adultos aparentemente sanos la viscosidad plasmática esta asociada como factores independientes a género masculino, obesidad, ingesta de sodio, edad, presión arterial diastólica promedio y concentración de triglicéridos y colesterol plasmáticos^{lvii}.

En concomitancia con lo anteriormente discutido, existen algunos estudios que muestran que la proteína C reactiva está significativamente elevada en pacientes que sufren eventos cardiovasculares (muerte súbita, infarto al miocardio fatal y no fatal), ya sea por primera vez o en pacientes con angina previa^{lviii}, ^{lix}. Los pacientes que tienen proteína C reactiva elevada tienen un RR de 1,24 (1,1 -1,6) de desarrollar un evento cardiovascular a los dos años comparado con aquellos que tienen valores normales.

c) Contaminación atmosférica y niveles de fibrinógeno , proteína C- reactiva y viscosidad plasmática.

Desde la década de los 80 han aparecido estudios en la literatura internacional que muestran variaciones estacionales de algunos factores de riesgo para enfermedades cardiovasculares. En 1982, Brennan et al,^{lx} mostró como la presión arterial aumentaba en invierno. Gordon et al^{lxi} replicaron estos hallazgos en 1988 para los lípidos plasmáticos y lipoproteínas , sin embargo estos factores tienen efecto crónico en el riesgo cardiovascular y no agudo, por lo tanto no explican el aumento agudo de muertes cardiovasculares que se produce en el invierno, particularmente en individuos ancianos. Una explicación alternativa es que este exceso de muertes estuviera ligado a alteraciones de tipo inflamatorio agudo.

En 1991, Stout y Crawford^{lxii} mostraron, variaciones estacionales en la concentración de fibrinógeno en el plasma en ancianos y sugirieron por primera vez que variaciones agudas del fibrinógeno (como por ejemplo las que pudieran ocurrir en invierno), podrían tener a su vez un efecto agudo sobre aumento de mortalidad por enfermedades cardiovasculares especialmente en ancianos. En 1994, Woodhouse et al^{lxiii} probaron esta hipótesis en un grupo de 96 hombres y mujeres mayores de 65 años viviendo en sus casas. Encontraron que tanto el fibrinógeno como el factor VIIc estaban más elevados en invierno y que estas diferencias podían explicar un 15% y 9% respectivamente del aumento de muertes que ocurría en la frecuencia de enfermedad isquémica. Los aumentos agudos de Fibrinógeno en esta población estaban principalmente inducidos por infecciones respiratorias agudas vía activación de la respuesta de fase aguda del síndrome inflamatorio. Frente a una noxa, en este caso infección, el organismo reacciona aumentando los niveles de estas sustancias(entre ellos fibrinógeno y factor VII), lo que a su vez lleva a mayor probabilidad de formación de trombos, que conlleva mayor riesgo de AVE, angina, infarto y muerte súbita cardiaca. Simultáneamente, Koenig et al,^{lxiv} compararon la viscosidad del plasma en dos poblaciones diferentes en Augsburg y Scotland, poblaciones con marcadas diferencias en la incidencia de Enfermedades Cardiovasculares, encontrando diferencias significativas en la viscosidad plasmática incluso luego de ajustar por edad, tabaquismo, lípidos plasmáticos, índice de masa corporal y presión arterial.

Todo esto se produciría a través de una respuesta aguda inflamatoria entre 24 horas y 5 días después, cuyo rol es circunscribir el daño al menor territorio posible. Como parte de esta respuesta, se alteraría la síntesis de ciertas proteínas hepáticas, entre las cuales se encuentran el fibrinógeno y la proteína C reactiva, lo que lleva a aumento de la viscosidad plasmática. Inicialmente, se altera la Proteína C reactiva, alfa 1 glicoproteína ácida y proteína A sérica del amiloide. Posteriormente, la haptoglobina y la alfa 1 antitripsina y luego al segundo a quinto día disminuye la transferrina y aumenta el fibrinógeno^{lxv}.

Una pregunta obvia que surge es que otras noxas agudas podrían activar una respuesta inflamatoria de este tipo, que explicaran exceso de muertes agudas por causa cardiovascular en otras poblaciones. Al respecto, en 1997 Peters et al^{lxvi} reportan por

primera vez el aumento de viscosidad plasmática en una población, asociado a un episodio agudo de contaminación del aire. En este estudio, se midió la viscosidad plasmática como parte de otro proyecto en 3256 participantes entre 25 y 64 años durante el invierno de 1985. Durante este lapso de tiempo, ocurrió un episodio agudo de aumento de contaminación del aire entre Enero 4 y 19, con aumentos de la concentración de Dióxido de Azufre de 43 $\mu\text{g}/\text{m}^3$ a 181 $\mu\text{g}/\text{m}^3$. Simultáneamente las partículas totales aumentaron a niveles mayores de 100 $\mu\text{g}/\text{m}^3$ repetidamente. Los investigadores compararon la viscosidad plasmática promedio durante los días del episodio vs el resto de los días. En promedio, la viscosidad plasmática fue 0,013 mPa mayor en el período del episodio (1,273 vs 1,260 para hombres y 1,263 vs 1,246 para mujeres; p: 0,015). Esta relación fue aun más acentuada luego de ajustar por factores de riesgo convencionales (edad, presión arterial, colesterol y lípidos) y variables meteorológicas en hombres, y se mantuvo igual en mujeres. Recientemente ha aparecido otra publicación³⁵ que muestra asociación entre niveles diarios de contaminación por partículas y cambios en la frecuencia cardíaca, sin cambios en saturación arterial de Oxígeno, lo que sugiere que las alteraciones inflamatorias tendrían igual o mayor peso que las alteraciones funcionales respiratorias en el exceso de mortalidad asociado a partículas.

4. Estudios chilenos

En Chile existen altos niveles de contaminación del aire, especialmente por partículas tanto menores de 10 micrones como menores de 2,5 micrones. El problema de la contaminación es especialmente grave en la Región Metropolitana en donde las cifras promedio mensuales para los meses de invierno sobrepasan el valor de la norma (150 $\mu\text{g}/\text{m}^3$), que en teoría no debería ser sobrepasado mas de una vez al año. Debido a lo anterior, se mantiene desde 1988 un sistema de monitoreo de contaminantes del aire basado en 7 estaciones (actualmente) que representan a la región. Este monitoreo incluye partículas totales (PMS), menores de 10 micrones (PM10), menores de 2,5 micrones (PM2,5) Ozono (O3), Anhídrido Sulfuroso (SO2), Dióxido de Nitrógeno (NO2) y Monóxido de Carbono (CO).

Utilizando esta información a partir de los últimos años de la década de los 80 se han realizado varios estudios nacionales que han mostrado el efecto de los niveles de contaminación del aire, especialmente por partículas sobre mortalidad diaria, consultas y síntomas respiratorios. Los resultados de los estudios de mortalidad realizados hasta la fecha se muestran a continuación:

Estudios de asociación entre nivel de PM10 y mortalidad diaria. Chile, Región Metropolitana.
Riesgo relativo de aumento de mortalidad por cada 1000 $\mu\text{g}/\text{m}^3$ de aumento del nivel de PM10.

Autores y periodo de estudio	Riesgo relativo para aumentos de 100 $\mu\text{g}/\text{m}^3$ de PM10	Mortalidad (casos anuales)
Cifuentes y Lave (88-91)	Mortalidad total: 1,058 +CO: 1,027 Mortalidad mayor 65 años +CO: 1,036 Mortalidad respiratoria: 1,14 Mortalidad cardiovascular: 1,08	542
Ostro, et al (89-91) ²	Mortalidad total: 1,035 Mortalidad respiratoria: 1,13 Mortalidad cardiovascular: 1,08 Mortalidad menor 64 años: 1,09	542
Salinas y Vega (88-91) ¹	Mortalidad total: 1,030	602
Sanhueza et al (89-93) ³	Mortalidad mayores 65 años: 1,052 Mortalidad cardiovascular: 1,025 Mortalidad respiratoria: 1,061	600

Como se observa los estudios son consistentes en encontrar efectos del nivel de partículas sobre la mortalidad diaria.

Los últimos datos que existen respecto a efectos en mortalidad corresponde al análisis de las muertes para el período 1988-1996, realizado por nosotros, el cual será analizado en detalle mas adelante.

En relación a morbilidad, desde el estudio pionero de Belmar en 1988 diversos investigadores han estudiado la asociación entre signos y síntomas respiratorios y frecuencia de consultas a través de series de tiempo en que relacionan los niveles diarios de contaminación con el número de visitas. Los resultados de algunas de estas investigaciones se muestran en la siguiente tabla:

**Estudios de asociación entre nivel de PM10 y morbilidad en Chile.
Riesgo relativo de aumento de morbilidad por cada 1000 ug/m³ de aumento del
nivel de PM10.**

Autores y periodo de estudio	Riesgo relativo para aumentos de 100 µg/m³ de PM10
Ilabaca et al. (95-96)	Urgencias infantiles PM10: 1,08
Belmar et al a) (88)	Alteraciones del VEF1, ausentismo escolar y mayor frecuencia de ronquera.
Belmar et al b) (88)	Consultas en atención primaria en salud No significativa
Sanchez et al (92-93)	Sibilancias. Media móvil 3 días PM10: 1,78
Oyarzún et al	Bronquitis obstructiva, lag 4 PM10: 1,22 PM 2,5: 1,44
Ostro et al (92-93)	Síntomas respiratorios bajos en niños menores de 2 años PM10: 1,08-1,24 Síntomas respiratorios bajos en niños entre 3-15 años PM10: 1,06- 1,18 Ozono : 1,10

5. Efectos asociados al Monóxido de Carbono

5.1 Efectos Cardiovasculares

- Disminución tiempo máximo de ejercicio y consumo máximo de O₂, 1% por cada 1% de aumento sobre 4% de CO-Hb en sujetos normales.

En individuos sanos, el consumo máximo de O₂ durante ejercicio progresivo se ha usado como marcador de daño. A niveles tan bajos como 5%, el tiempo máximo de ejercicios y consumo máximo de oxígeno, disminuye aprox. 1% por cada % de aumento sobre 4%.

- Reducción en el tiempo para desarrollar angina y depresión del ST en enfermos con angina estable.

En pacientes con enfermedades CV previas, ya existe una disminución del flujo sanguíneo y por lo tanto cualquier disminución mayor puede resultar en isquemia, lo que a su vez puede disminuir la contractilidad y afectar el pulso y ritmo cardíaco. Aronow y Anderson han mostrado que en pacientes con IHD en que se hacía test de esfuerzo se disminuía el tiempo para producción de angina y se aumentaba la duración de ésta a niveles de COHb entre 2 y 2,9%). Un estudio multicéntrico realizado en por el Health

Effects Institute mostró que en 63 sujetos no fumadores con angina estable (con depresión del ST), el tiempo de aparición de angina se acortaba en 4,2 y 7,1% para concentraciones de CO HB de 2,2 y 4,3% respectivamente. Similarmente el tiempo para aparición de desnivel del ST se acortó en 5,1 y 12,1%. Kleinman y cols., mostraron que la respuesta a ejercicio de 24 sujetos con angina de ejercicio expuestos a niveles de CO resultantes en concentraciones de COHb de 2,9%. El tiempo de aparición de angina disminuyó en 6% y la VO₂ disminuyó en 2%. Otros dos estudios adicionales han mostrado que niveles de COHb en el rango de 2-6% disminuye la respuesta a ejercicio en pacientes con enfermedad cardíaca. Sheps y cols mostraron un 1,9% de disminución en el tiempo de aparición de angina (NS) y 1,3% de disminución en el tiempo máximo de ejercicio, luego de aumentos de COHb a niveles de 3,8%. También se observaron cambios significativos en la fracción de eyección del VI a niveles de 5,9% de COHb. En resumen, se ha observado una disminución del tiempo para desarrollar angina a niveles de COHb entre 2% y 6%.

- Aparición de arritmias cardíacas en pacientes con enfermedad isquémica a niveles de 5,3% de COHb (VPDs) . Resultados no consistentes.
- Lambert mostró aumento de probabilidad de depresión del ST de 1,5 veces para niveles entre 1 y 2% y de 2,1 veces para niveles mayores que 2% en sujetos anginosos en setting de actividad normal.
- Aumento de admisiones por enfermedades cardiovasculares asociadas a CO en numerosos estudios de series de tiempo.
- Aumento de mortalidad diaria especialmente asociada a enfermedades cardiovasculares en numerosos análisis de series de tiempo.

5.2 Efectos Respiratorios

- Disminución de capacidad de difusión del CO (DLCO) a concentraciones de CO₂ en aire de 0,7% a 1,2% en sujetos sanos.
- Disminución de capacidad de ejercicio en pacientes con enfermedad pulmonar obstructiva crónica a niveles de alrededor de 4% de COHb.

6. Mecanismos de daño de las partículas

Los efectos biológicos de las partículas dependen de las características físicas y químicas, de la forma de distribución y deposición en el árbol respiratorio y de los efectos biológicos en respuesta. La composición química y física del material particulado en distintos ambientes aún no ha sido totalmente caracterizado y debido a la heterogeneidad de la composición del material particulado es muy difícil hacer estudios experimentales de dosis respuesta en animales o humanos. Además muchos de los efectos de las partículas reflejan la combinación con otros contaminantes que pueden formar parte de

las distintas fracciones del material particulado, por ejemplo sulfuros-sulfatos, aerosoles ácidos o algunos metales. Una de las líneas de investigación actual es la caracterización de partículas y asociación de los componentes con distintos efectos. En Santiago por ej. Oyola y cols han caracterizado recientemente las partículas del aire.

Hay varios mecanismos posibles por los cuales se producirían los daños descritos en salud: Una posibilidad es que los daños estén asociados al componente ácido (H) de las partículas, pero los efectos se han encontrado en distintas mezclas de material particulado con mayor o menor acidez. El otro factor de importancia es el tamaño que determina el mayor o menor grado de depósito en la vía respiratoria. Las partículas mas grandes se depositan en la traquea, bronquios pequeñas se depositan en la vía aérea baja, desde bronquiolos a alveolos. Las partículas de tamaño mayor son limpiadas por los cilios a través de la formación de mucus y son expulsadas a través de la tos o tragar. Las partículas mas pequeñas son limpiadas por los macrófagos que las transportan a los cilios o al sistema linfático. Cuando se inhalan partículas muy pequeñas (0,2 u) estas pueden traspasar el espacio intersticial del alveolo y provocan un síndrome de inflamación crónica. La capacidad inflamatoria depende del contenido de metales y tipo de ellos, así como el contenido derivados orgánicos de combustión. Los aerosoles ácidos y sulfatos a su vez provocan distintos efectos dependiendo del pH. Por lo tanto el contaminante mas irritante es el Sulfato de H₂SO₄ que tiene un pH menor que 1, seguido por el bisulfato de amonio (NH₄HSO₄ y el sulfato de amonio (NH₄SO₄). Los aerosoles ácidos y sulfatos provocan broncoconstricción, inflamación y alteraciones del clearance mucociliar.

7. Mecanismos de daño del CO

El CO es un gas incoloro, inodoro e insípido que se produce por combustión incompleta de fósiles carbonáceos como gasolina, gas natural, aceite, carbón, madera y otros como tabaco. Las propiedades tóxicas del CO están relacionadas con la gran afinidad por las proteínas del grupo Hem-Fe (relacionadas con el transporte oxígeno a las celulas) como la Hemoglobina y mioglobina. Por lo tanto los efectos del CO se manifiestan en aquellos órganos mas sensibles a la falta de oxígeno.

El aire contiene cantidades variables de CO, derivadas de la combustión de fosiles. La mayor fuente de CO proviene de los motores vehiculares. La exposición a CO se puede evaluar a través de los niveles de COHb que se expresan como porcentaje de la Hb total que esta bound a CO. En individuos sanos no fumadores, esto niveles están en un rango de 0,3% - 0,7%. El catabolismo normal de los grupos Hem a traves de las enzimas microsomaes hem-oxigenasas produce alrededor de 0,4 ml CO por hora lo que resulta en niveles de COHb basales de alrededor de 0,5% a nivel del mar en sujetos normales . La tasa de producción endógena puede aumentar por fiebre, hemólisis, tratrornos de la eritropoyesis y algunas drogas. Por ejemplo en pacientes con anemia hemolítica se pueden encontrar niveles de 3% - 4%. El CO inhalado aumenta los niveles de COHb a aprox. 1% en individuos normales. Sin embargo un porcentaje de la población tiene

niveles por sobre 1,5%. Por ejemplo en una medición de 8000 personas en el NHANES se encontró que mas del 4% de la población tenían niveles sobre 2,5% en invierno.

El monóxido de carbono ha emergido en los últimos años como un mensajero celular, producido por las enzimas microsomaes hem-oxigenasa, a través de la activación de la guanilato- ciclasa. El aumento de monofosfato de guanosina cíclica (cGMP) inducido por CO se ha asociado a la inhibición de la quimioluminiscencia y aumento de factor de necrosis tumoral en los macrófagos pulmonares, además de alteraciones en su capacidad microbicida, reducción en la capacidad de fagocitosis y aumento de la producción de superóxidos. El mecanismo enzimático dependiente de CO de la guanilato ciclasa puede además aumentar la migración de neutrófilos (Burnett, 1998).

El pulmón es la principal ruta de excreción y absorción de CO. La tasa de HbCO depende de la concentración de CO en el aire inspirado, la tasa de difusión aire.sangre, el contenido de Hb en la sangre, la tensión capilar de O₂ y el nivel de COHb en los capilares pulmonares.

El CO ejerce su efecto tóxico a través de interferir con el transporte de O₂, la hemoglobina tiene 220 veces mas afinidad con el CO comparado con el O₂. Además cuando baja la tensión de O₂, el CO tambien se une a la mioglobina en músculo cardíaco y esquelético, disminuyendo la entrega de oxígeno a los procesos intracelulares involucrados en la contracción muscular.

Referencias

- ⁱ Bascom R, Bromberg PA, Costa DA et al. State of the Art. Health Effects of Outdoor Air Pollution. *Am J Respir Crit Care Med* 1996;153:3-50.
- ⁱⁱ Bascom R, Bromberg PA, Costa DA et al. State of the Art. Health Effects of Outdoor Air Pollution. *Am J Respir Crit Care Med* 1996;153:477-98.
- ⁱⁱⁱ Lave L. y Seskin EP. Air pollution and human health. *Science* 1970;169(947):723-33.
- ^{iv} Pope CA 3rd, Thun MJ, Namboodiri MM, Dockery DW, Evans JS, Speizer FE et al. Particulate air pollution as predictor of mortality in a prospective study of US adults. *Am J Respir Crit Care Med* 1995;151:669-71.
- ^v Dockery DW, Pope CA III, Xu X, Spemmglar JD, Ware JH, Fay ME et al. An association between air pollution and mortality in six US cities *N Eng J Med* 1993;329:1053-1759.
- ^{vi} EPA. Air Quality Criteria for Particulate Matter. Research Triangle Park, N.C.: U.S. Environmental Protection Agency, 1996.
- ^{vii} Ostro B, Chestnut LG and Vichit-Vadakan N. 1998. The impact of particulate matter on daily mortality in Bangkok, Thailand.
- ^{viii} Kelsall JE, Samet JM, Zeger SL and XU J. Air pollution and mortality in Philadelphia, 1974-1988. *Am J Epidemiol* 1997;146(9):750-62.
- ^{ix} Burnett R, Cakmak S, Raizenne E, Stieb D, Vincent R and Krewski D. The association between ambient Carbon Monoxide levels and daily mortality in Toronto Canada. *J of the Air and Waste Management Association* 1999;48:689-700.
- ^x Bobak M and Leon D. The effect of air pollution on infant mortality appears specific for respiratory causes in the postneonatal period. *Epidemiology* 1999; 10(6):666-70.
- ^{xi} Gwynnn RC, Burnett RT and Thurston GD. A time-series analysis of acidic particulate matter and daily mortality and morbidity in the Buffalo, New York region. *Environ Health Perspect* 2000;108(2):125-
- ^{xii} Burnett RT, Dales RE, Brook JR, Raizenne ME, Krewski D. Association between ambient carbon monoxide levels and hospitalizations for congestive heart failure in the elderly in 10 Canadian cities. *Epidemiology* 1997; 8:162-7.
- ^{xiii} Poloniecki JD, Atkinson RW, de Leon AP, Anderson HR. Daily time series for cardiovascular hospital admissions and previous day's air pollution in London, UK. *Occup Environ Med* 1997; 54:535-40.

-
- ^{xiv} Wordley J, Walters S, Ayres JG. Short term variations in hospital admissions and mortality and particulate air pollution. *Occup Environ Med* 1997; 54:108-16.
- ^{xv} Delfino RJ, Murphy-Moulton AM, Burnett RT, Brook JR, Becklake MR. Effects of air pollution on emergency room visits for respiratory illnesses in Montreal, Quebec. *Am J Respir Crit Care Med* 1997; 155:568-76.
- ^{xvi} Delfino RJ, Murphy-Moulton AM, Becklake MR. Emergency room visits for respiratory illnesses among the elderly in Montreal: association with low level ozone exposure. *Environ Res* 1998; 76:67-77.
- ^{xvii} Gordian ME, Ozkaynak H, Xue J, Morris SS, Spengler JD. Particulate air pollution and respiratory disease in Anchorage, Alaska. *Environ Health Perspect* 1996; 104:290-7.
- ^{xviii} Hernandez-Garduno E, Perez-Neria J, Paccagnella AM, Pina-Garcia M, Munguia-Castro M, Catalan-Vazquez M, Rojas-Ramos M. Air pollution and respiratory health in Mexico City. *J Occup Environ Med* 1997; 39:299-307.
- ^{xix} Anderson HR, Spix C, Medina S, Schouten JP, Castellsague J, Rossi G, Zmirou D, Touloumi G, Wojtyniak B, Ponka A, Bacharova L, Schwartz J, Katsouyanni K. Air pollution and daily admissions for chronic obstructive pulmonary disease in 6 European cities: results from the APHEA project. *Eur Respir J* 1997; 10:1064-71.
- ^{xx} Burnett RT, Brook JR, Yung WT, Dales RE, Krewski D. Association between ozone and hospitalization for respiratory diseases in 16 Canadian cities. *Environ Res* 1997; 72:24-31.
- ^{xxi} Choudhury AH, Gordian ME, Morris SS. Associations between respiratory illness and PM10 air pollution. *Arch Environ Health* 1997; 52:113-7.
- ^{xxii} Tellez-Rojo MM, Romieu I, Polo-Pena M, Ruiz-Velasco S, Meneses-Gonzalez F, Hernandez-Avila M. [Effect of environmental pollution on medical visits for respiratory infections in children in Mexico City]. *Salud Publica Mex* 1997; 39:513-22.
- ^{xxiii} Schwartz J. Air pollution and hospital admissions for heart disease in eight US counties. *Epidemiology* 1999;10(1):17-22.
- ^{xxiv} Sheppard L, Levy D, Norris G, Larson T and Koenig J. Effects of ambient air pollution on nonelderly asthma hospital admissions in Seattle, Washington 1987-1994. *Epidemiology* 1999;10(1):23-30.
- ^{xxv} Norris G, Young S, Koenig J, Larson T, Sheppard L and Stout J. An association between fine particles and asthma emergency department visits for children in Seattle. *Environmental Health Perspectives* 1999;107(6):489-493.

-
- ^{xxvi} Lebowitz MD. Epidemiological studies of the respiratory effects of air pollution. *Eur Respir J*. 1996;9:1029-54.
- ^{xxvii} Dassen E, Brunekreef B, Hoek G et al. Decline in children's pulmonary function during an air pollution episode. *Journal of the Air Pollution Control Association* 36:1123-27.
- ^{xxviii} Dockery DW, Ware JH, Ferris PG et al. Changes in pulmonary function associated with air pollution episodes. *Journal of the Air Pollution Control Association* 32:937-42.
- ^{xxix} Pope CA, Kanner RE. Acute effects of PM10 pollution on pulmonary function of smokers with mild to moderate chronic obstructive pulmonary disease. *Am Rev Respir Dis* 1993;147:1336-40.
- ^{xxx} Pope CA, Dockery DW. Respiratory health and PM10 pollution: A daily time-series analysis. *Am Rev Respir Dis* 1991;144:668-74.
- ^{xxxi} Thurston G, Lipmann M, Bartoszek M. Fine I. Air pollution association with asthma exacerbations, peak flow changes and respiratory symptoms in children at a summer asthma camp. *Am Rev Respir Dis* 1993;147:A663.
- ^{xxxii} Higgins BG, Francis HC, Warburton CJ et al. The effects of air pollution on peak expiratory flow measurements in patients with asthma and chronic bronchitis. *Thorax* 1993;48:417.
- ^{xxxiii} Xu X, Dockery D, Wang L. Effects of air Pollution on adult Pulmonary Function. *Archives of Environmental Health* 1991;46:198-206.
- ^{xxxiv} Peters A, Wichmann HE, Tuch T, Heinrich J, Heyder J. Respiratory effects are associated with the number of ultrafine particles. *Am J Respir Crit Care Med* 1997; 155:1376-83
- ^{xxxv}
Gold DR, Damokosh A, Pope A, Dockery D, Serrano P, McDonnell W, Retama A and Castillejos M. Particulate and Ozone Pollutants Effects on the Respiratory Function of Children in Southwest Mexico City. *Epidemiology* 1999;10(1):8-16.
- ^{xxxvi} Schwartz J and Neas LM. Fine particles are more strongly associated than coarse particles with acute respiratory health effects in schoolchildren. *Epidemiology* 2000;11(1):6-10.
- ^{xxxvii} Seaton A, MacNe W, Donaldson K, Godden D. Particulate air pollution and acute health effects. *Lancet* 1995;345:176-78.

-
- ^{xxxviii} Pope CA, III, Dockery DW, Kanner RE, Villegas GM, Schwartz J. Oxygen saturation, pulse rate, and particulate air pollution: a daily time-series panel study. *Am J Respir Crit Care Med* 1999;159:365-372.
- ^{xxxix} Pertuze J, Valdivia G, Prieto ME, Arancibia F. Comparison of Capsaicin cough response during seasons with different levels of air pollution. *Am J Respir Crit Care Med* 155;4:422^a, 1997.
- ^{xi} Ernst E., Resch KL. fibrinogen a a cardiovascular risk factor: A meta-analysis and review of the literature. *Ann Intern Med* 1993;118:956-63.
- ^{xii} Lowe GD, Fowkes FG, Dawes J. Blood viscosity, fibrinogen and activation of coagulation and leukocytes in peripheral arterial disease and the normal population *Circulation* 1993;87:1915-1920
- ^{xiii} Meade TW., Mellows S., Bozovic M., Miller GJ., Chakrabarti RR., North WR., et al. Haemostatic function and ischemic heart disease: principal results of the Northwic Park Heart Study. *Lancet* 1986;2:533-7.
- ^{xiiii} Wilhelmsen L., Svardsudd K., Korsan-Bengtson K., Larsson B., Welin L., Tibblin G. Fibrinogen as a risk factor for stroke and myocardial infarction. *N Eng J Med* 1984;311:501-5.
- ^{xlv} Kannel WB., Wolf PA., Castelli WP., D'Agostino RB. Fibrinogen and risk of cardiovascular disease. The Framingham Study. *JAMA* 1987;258:1183-6.
- ^{xlv} Balleisen L., Schulte H., Assmann G., Epping PH., Van De Loo J. Coagulation factors and the progress of coronary heart disease. *Lancet* 1987;1:461.
- ^{xlvi} Yarnell JW., Baker IA., Sweetnam PM., Bainton D., O'Brien JR., Whitehead PJ., Elwood PC. Fibrinogen, viscosity and white blood cell count are major risk factors for ischemic heart disease. *Circulation* 1991;83:836-44.
- ^{xlvii} Cremer P., Nagel D., Bottcher B., Seidel D. Fibrinogen: ein koronarer risikofaktor. *Diagnose labor* 1992;42:28-35. patients with angina pectoris undergoing coronary angiography. *Eur Heart J* 1993;14:8-17.
- ^{xlviii} ECAT Angina Pectoris Study Group. ECAT angina pectoris study: baseline association of haemostatic factors with extent of coronary arterioesclerosis and other coronary risk factors in 3000
- ^{xlix} Ernst E., Weihmayr T., Schmid M., Baumann M., Matrai A. Cardiovascular risk factors and hemorheology. Physical fitness, stress and obesity. *Atherosclerosis* 1986;59:263-9.

-
- ⁱ Koenig W., Enst E. The possible role of hemorheology in atherothrombogenesis. *Atherosclerosis* 1992;94:93-107.
- ⁱⁱ Cook NS., Ubben D. Fibrinogen as a major cardiovascular risk factor in cardiovascular disease. *Trends Pharmacol Sci* 1990;11:444-51.
- ⁱⁱⁱ Thompson WD., Smith EB. Atherosclerosis an the coagulation system. *J Pathol* 1989;159:97-106.
- ⁱⁱⁱⁱ Smith EB., Keen GA., Stirk C. Fate of fibrinogen in human arterial intima. *Arterioesclerosis* 1990;10:263-75.
- ^{lv} Lowe GDO., Fowkes FG., Dawes J., Donnan PT., Lennie S.E. Housley E. Blood viscosity, fibrinogen and activation of coagulation and leukocytes in peripheral arterial disease and the normal population in the Edinburgh Artery Study. *Circulation* 1993;87:1915-20.
- ^{lv} Dormandy J, Ernst E, Matrai A, Flute PT. Hemorheological changes following acute myocardial infarction. *Am. Heart J*, 1982;104:1367-7
- ^{lvi} Resch KL Fibrinogen and viscosity as risk factors for subsequent cardiovascular events in stroke survivors *Ann Intern Med* 1992;117:371-75
- ^{lvii} de Simone G, Devereux R, Chien S et al Relation of blood viscosity to demographic and physiologic variables and to cardiovascular risk factors in normal adults. *Circulation* 1990;81:107-17
- ^{lviii} Thompson SG, Kienast J, Pyke SD et al Hemostatic factors and the risk of myocardial infarction or sudden death in patients with angina pectoris *N Engl J Med* 1995;332:635-41
- ^{lix} Haverkate F, Thompson S, Pyke S et al. Production of C-reactive protein and risk of coronary events in stable and unstable angina. *Lancet* 1997;349:462-66
- ^{lx} Brennan PJ, Greenberg G., Miall WE et al. Seasonal variation in arterial blood pressure *BMJ* 1982;285:919-23
- ^{lxi} Gordon DJ, Hyde J., Trost DC et al. Cyclic seasonal variations in plasma lipid and lipoprotein levels: The Lipid Research Clinics Coronary Primary Prevention Trial Placebo Group *J Clin Epidemiol* 1988;41:679-89
- ^{lxii} Stout RW, Crawford V. Seasonal variations in fibrinogen concentrations among elderly people. *Lancet* 1991;338:9-13

^{lxiii} Woodhouse PR, Khaw KT, Plummer M, et al Seasonal variations of plasma fibrinogen and factor VII activity in the elderly: winter infections and death from cardiovascular disease Lancet 1994;343:435-39

^{lxiv} Koenig W, Sund M., Lowe GD et al. Geographical variations in plasma viscosity and relation to coronary event rates

^{lxv} Osorio G. Hematología. Técnicas y procedimientos de laboratorio. Publicaciones técnicas Mediterraneo, 1996.

^{lxvi} Peters A., Doring A., Wichmann H., et al. Increased plasma viscosity during an air pollution episode: a link to mortality? Lancet 1997; 349:1582-87.