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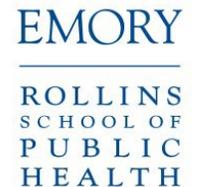
The 39th Annual Radon and Vapor Intrusion Symposium

Domestic radon exposure and cancer risk by site, age group, and sex in Massachusetts, 2001-2020

Presenter: Matt Bozigar

Assistant Professor of Epidemiology at Oregon State University

Coauthors: Garyfallos Konstantinoudis, Ernani Choma, Carolina L. Zilli Vieira, Yazan Alwadi, Longxiang Li, Rena R. Jones, Petros Koutrakis



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Personal motivation

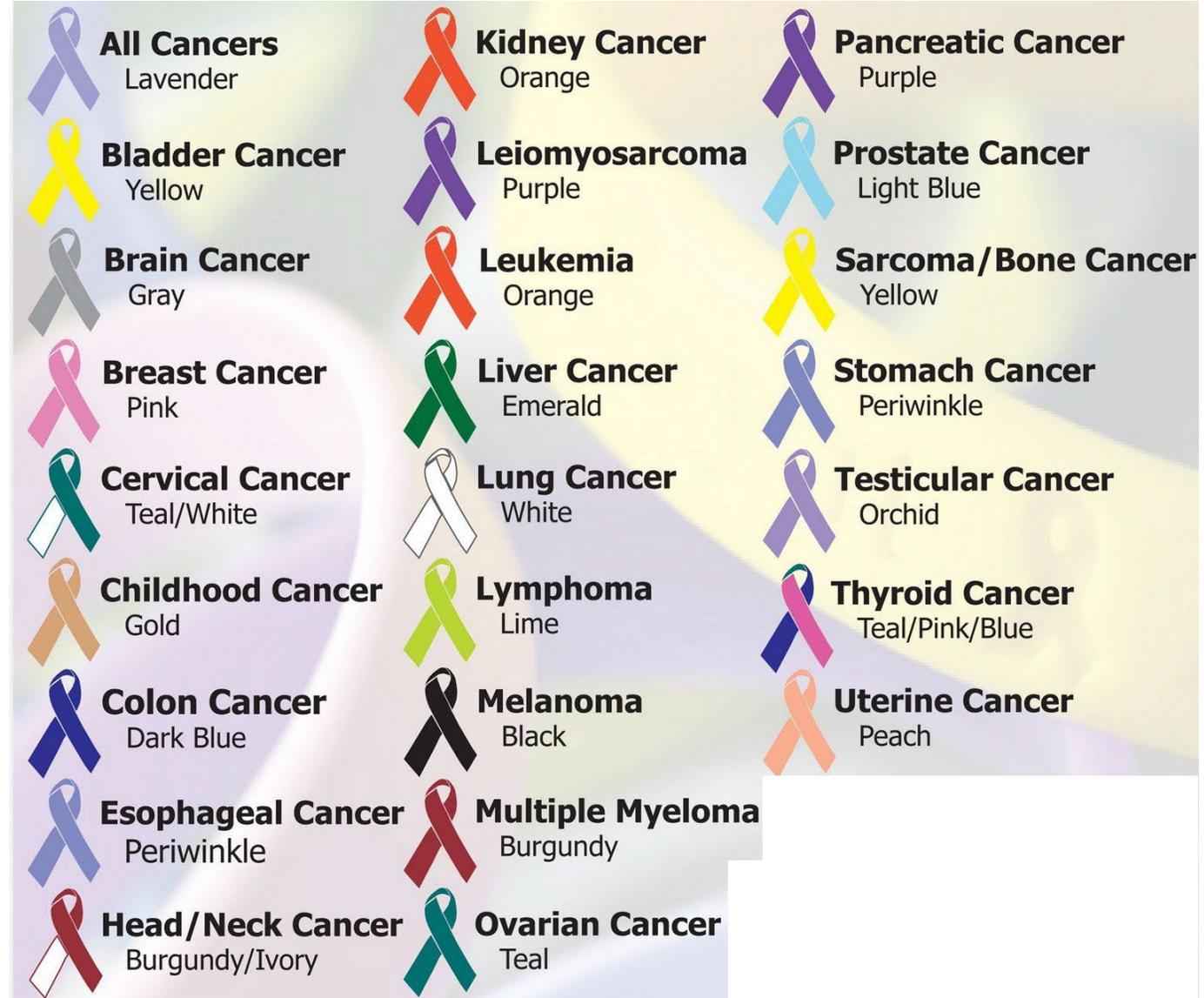


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Causes of many cancers are still largely unknown

- Known, *general* risk factors:
 - Age, tobacco use, diet and alcohol, physical activity, weight, ultraviolet light and sun exposure, human papillomavirus, chemicals, genetic factors
- Research Question: What role does **radon** play, if any, in **non-lung cancer incidence**, and does the role differ by **subgroups**?



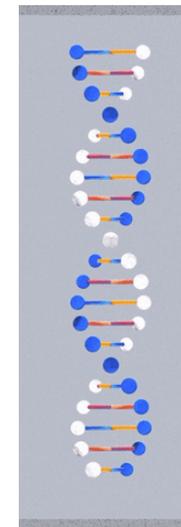
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Alpha particle radiation from radon gas decay is one of the most toxic substances known

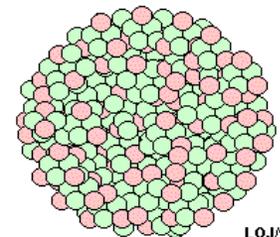


- Radon gas emits several high-energy, mutagenic alpha particles as it decays
- Disintegration count per unit volume-time (Bq/m^3 or pCi/L per sec)
- Group 1 carcinogen for lung cancer (1988) ¹
- Non-lung tissues are exposed, even the brain ²



● Proton
● Neutron

Alpha Particle Emission



LOJ/12/2000

*“The EPA recommends homes be fixed if the radon level is 4 pCi/L (picocuries per liter) or more. Because **there is no known safe level of exposure to radon**, the EPA also recommends that Americans consider fixing their home for radon levels between 2 pCi/L and 4 pCi/L.”* ⁴

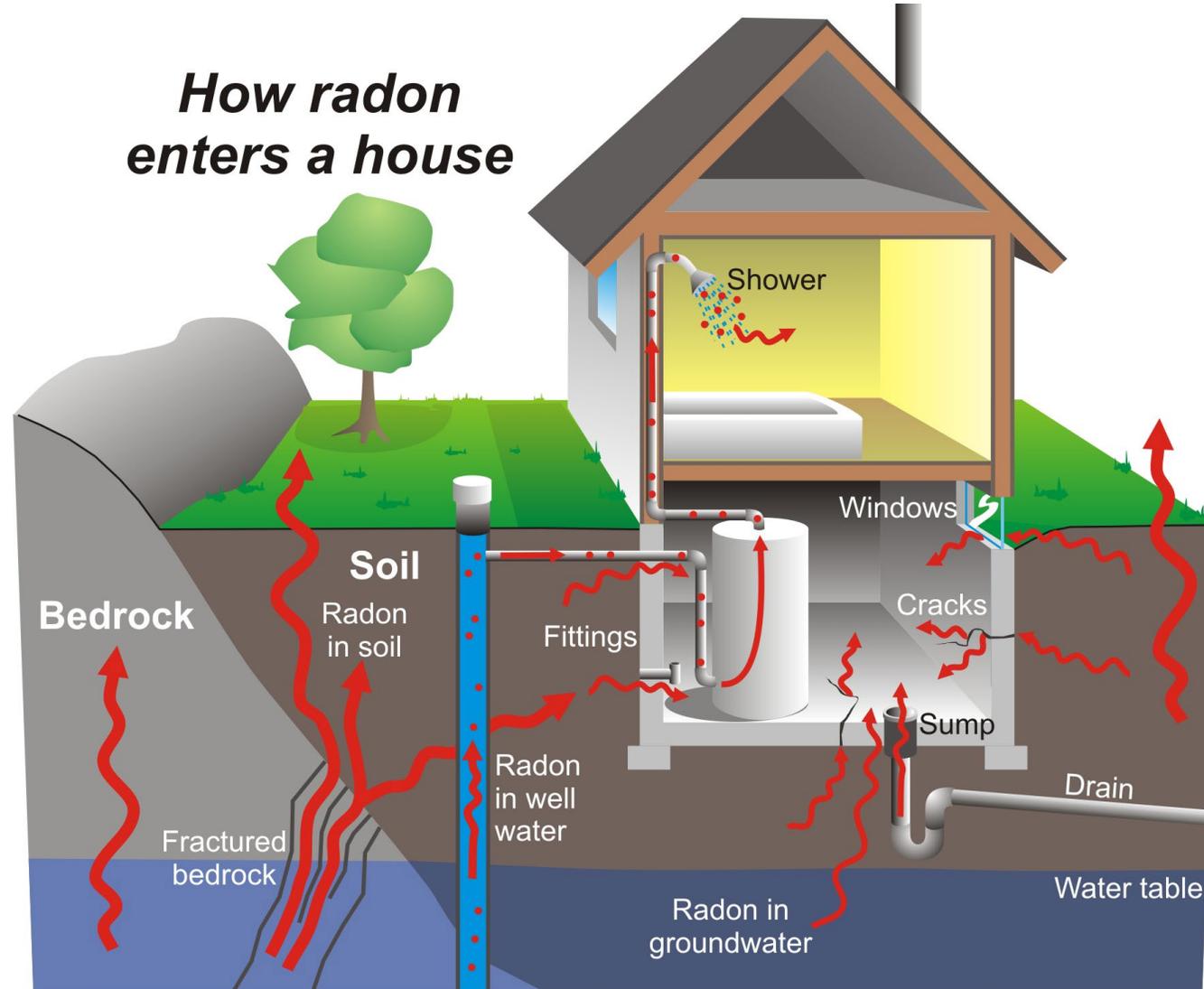
¹ International Agency for Research on Cancer, 2018 ³ U.S. Environmental Protection Agency, 2019

² Santos et al., 2020

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How radon enters a house



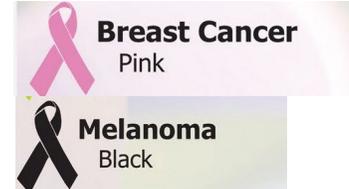
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Limited previous research on radon & non-lung cancers in general adult population

- **Some recent evidence:**

- ↑ risk: Leukemia¹
- ↑ risk in cohort studies: Breast cancer^{2, 3}
- ↑ risk (ecologic/cohort): Skin cancer^{2, 4-6}



- **Inconclusive recent evidence:**

- Brain/CNS cancer^{1,7}
- Stomach cancer¹



1 Mozzoni et al., 2021

2 Barbosa-Lorenzo et al., 2016

3 Vopham et al., 2017

4 Boz et al., 2024

5 Braüner et al., 2015

6 Wheeler et al., 2012

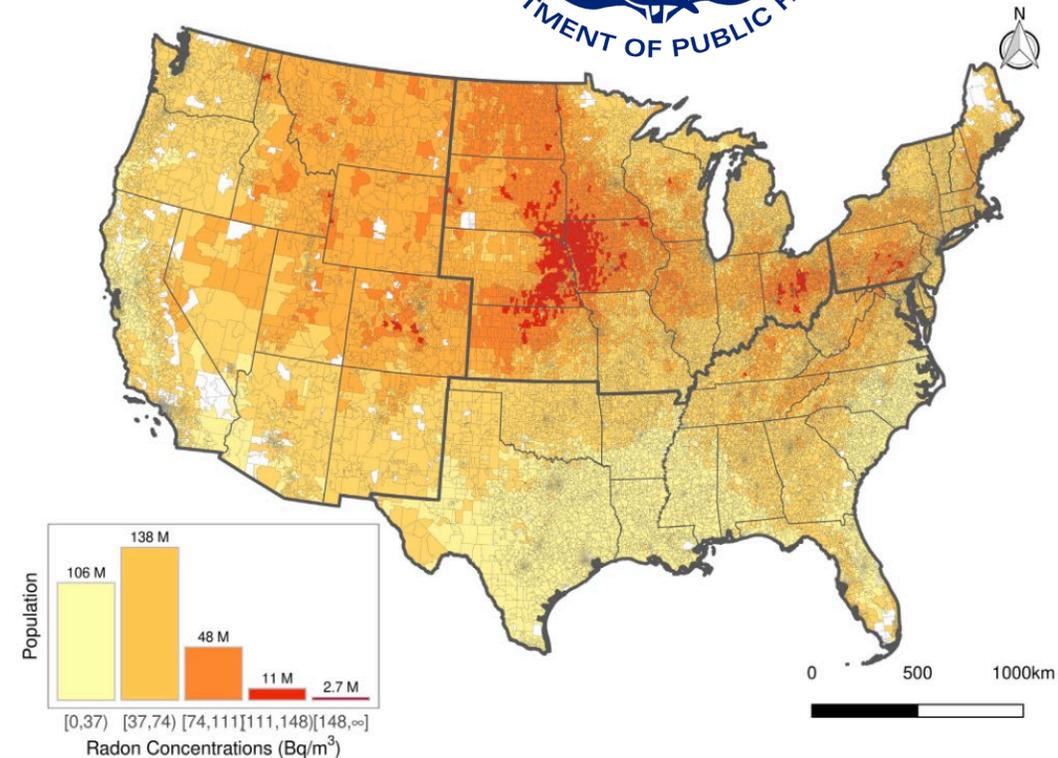
7 Del Risco Kollerud, 2014

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Data linked across many sources

- Registry-derived cancer incidence data
 - Annual diagnosis counts in MA postal codes
- Granular estimated radon concentrations
 - Geographic machine learning model ¹
 - Monthly, postal code resolution
- Few known confounders of radon-cancer
- Study period: 2001-2020

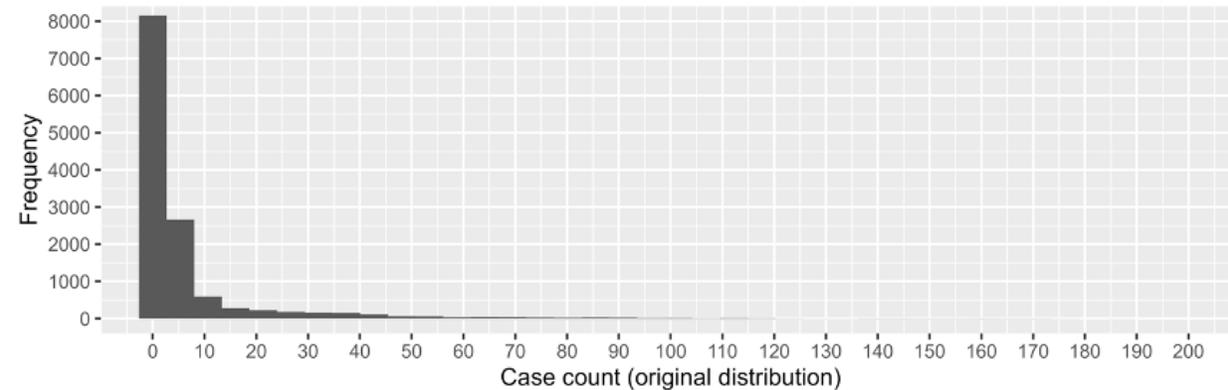


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Accounting for “sparse data” (many zero-counts of cancer diagnoses due to rarity) in our statistical methodology

- Zero-inflated (ZI) outcomes
 - Aggregated over moving 5-year windows
- Besag, York, & Mollié (BYM) ¹ models by site & sex, sequentially adjusted for random & fixed effects
- Radon exposure: continuous (+50 Bq/m³ or 1.35 pCi/L)
- Exposures & covariates averaged over previous 5 years, respectively



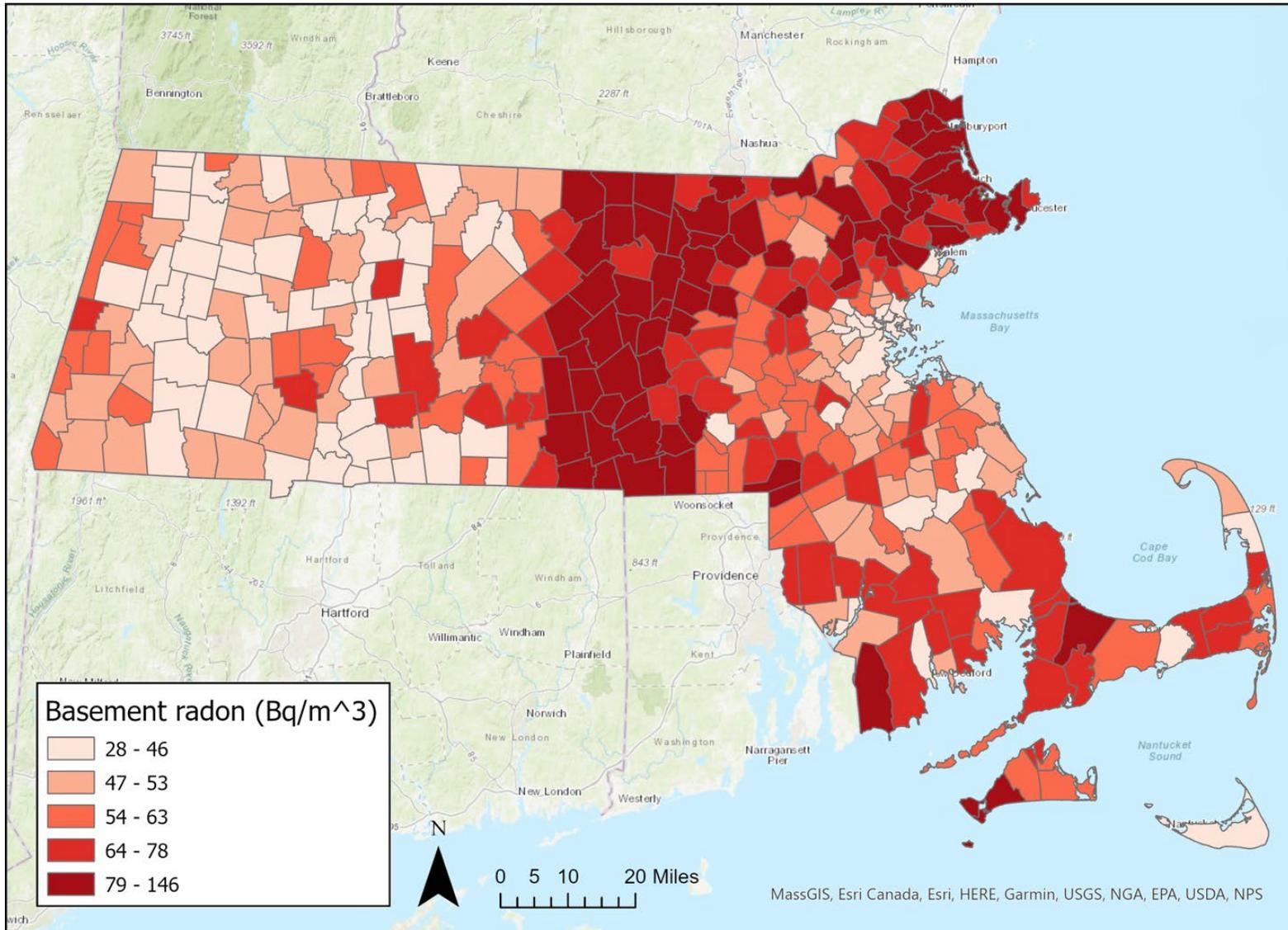
$$Y_{ijk} \sim \text{ZIP}(\lambda_{ijk})$$

$$\log(\lambda_{ijk}) = \log(\text{Pop}_{ijk}) + \beta_0 + \boldsymbol{\beta}_1 \mathbf{X}_{ijk} + w_j + v_i + u_i + t_k$$

where: i =postal codes
 j =counties
 k =year after previous 5-year window

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Geographic distribution of average basement radon levels in 483 Massachusetts postal codes included in the study.

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Characteristic	Overall	Radon (Bq/m ³)	
		0-74	≥74
		Radon (pCi/L)	
		0.00-1.99	≥2.00
	N = 483	N = 284	N = 199
Average greenness, NDVI (mean (SD))	0.32 (0.06)	0.30 (0.07)	0.34 (0.03)
Average temperature, degrees C (mean (SD))	10.3 (0.9)	10.5 (0.9)	10.0 (0.9)
Average relative humidity, (mean (SD))	78.0 (1.7)	78.0 (1.7)	78.0 (1.7)
Homes built <1950, % (mean, SD))	35.9 (18.0)	40.0 (19.6)	30.4 (13.8)
Homes built 1950-1979, % (mean, SD))	35.1 (12.3)	35.4 (13.7)	34.6 (10.0)
Homes built ≥1980, % (mean, SD))	29.0 (13.8)	24.8 (13.3)	35.0 (12.3)
Single family homes, % (mean, SD))	4.4 (4.5)	4.3 (4.3)	4.4 (4.9)
Current smoking, % (mean (SD))	21.8 (2.8)	21.2 (2.9)	20.2 (2.3)
Average median income, \$ (mean (SD))	65,198 (22,982)	62,005 (23,968)	69,753 (20,716)
<Federal poverty level, % (mean (SD))	8.3 (7.0)	10.0 (8.2)	6.0 (3.7)
Less than high school education, % (mean (SD))	11.3 (7.6)	12.5 (8.9)	9.7 (4.8)
Population, ppl (mean (SD))	13,439 (12,197)	16,121 (13,345)	9,612 (9,086)
Female population (mean (SD))	6,941 (6,336)	8,362 (6,936)	4,912 (4,682)
Male population, m (mean (SD))	6,498 (5,875)	7,758 (6,425)	4,670 (4,413)

Exposure patterns

Higher radon postal codes had significantly (p<0.001) newer housing

Higher radon postal codes had significantly (p<0.001) higher SES

Higher radon postal codes had significantly (p<0.001) fewer people

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PRELIMINARY, UNPUBLISHED: Estimated relative risk and 95% credible intervals for continuous (linear) average basement radon exposure (+50 Bq/m³ (1.35 pCi/L)) and incident cancer diagnoses over previous 5 years by site and sex for **ADULTS**.

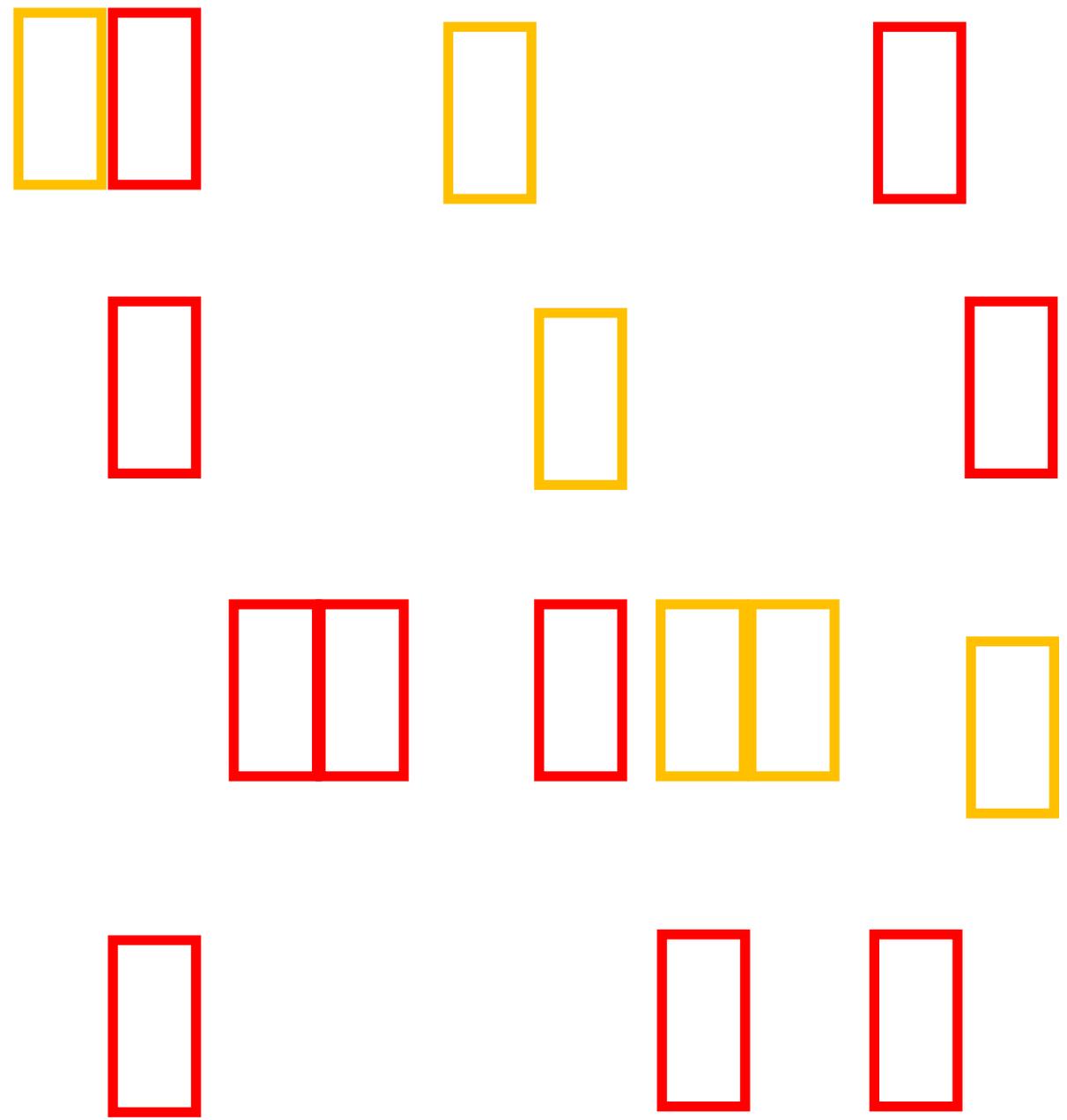
Model adjustments: Random walk within county over time effect, postal code and county spatially correlated and uncorrelated random effects, fixed effects (mean housing age, % single family homes, % poverty, mean of median household income, mean temperature, mean relative humidity, % smokers). Central nervous system: CNS. Becquerels/cubic meter: Bq/m³.

- | Female: | Male: |
|--------------|--------------|
| • Colorectal | • Bladder |
| • Melanoma | • Esophageal |
| • Thyroid | • Leukemia |
| • Uterine | • Melanoma |
| | • Myeloma |
| | • Prostate |

Statistically Significant ↑RR

- | Female: | Male: |
|-----------|------------------|
| • Bladder | • Kidney |
| • Breast | • Oral |
| • Oral | • Pancreas (inv) |

Marginally Significant ↑RR (CrI includes 1.0; nearest bound ≤10% of CrI width)



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PRELIMINARY, UNPUBLISHED: Estimated relative risk and 95% credible intervals for continuous (linear) average basement radon exposure (+50 Bq/m³ (1.35 pCi/L)) and incident cancer diagnoses over previous 5 years by site and sex for **CHILDREN**.

Model adjustments: Random walk within county over time effect, postal code and county spatially correlated and uncorrelated random effects, fixed effects (mean housing age, % single family homes, % poverty, mean of median household income, mean temperature, mean relative humidity, % smokers). Central nervous system: CNS. Becquerels/cubic meter: Bq/m³.

Male:

- HL (↓ RR)

Statistically significant

Male:

- Brain/NS-invasive
- Testes
- Kidney

Marginally Significant ↑RR
(CrI includes 1.0; nearest bound ≤10% of CrI width)



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Our Results (<i>incl. marginal</i>)	Earlier Findings	Alignment / Contrast
<u>Hematologic</u> : ↑ leukemia (male), ↑ myeloma (male), ↓ HL (child)	Weak link in adults, stronger in childhood; inconclusive for other blood cancers ¹⁻³	Stronger & more consistent links for adults; inverse HL in children potentially explained by high incidence in high SES areas ⁴

1 Mozzoni et al., 2021

2 Ngoc et al., 2023

3 Bozigar et al., 2024

4 Hjalgrim et al., 2017

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<u>Digestive tract</u> : ↑ colorectal (female), ↑ esophageal (male), ↑ pancreas (<i>inverse in male</i>)	Inconclusive for stomach; little evidence on others ¹	Expands to multiple GI sites with plausible exposure pathways; pancreas marginally inverse finding is likely spurious

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<u>Endocrine/Reproductive</u> : ↑ thyroid (female), ↑ uterine (female); ↑ breast (<i>female</i>), ↑ prostate (male)	Limited/no prior evidence for thyroid & uterine ⁵ ; prior breast links suggestive ^{6,7}	Marginal evidence added for breast cancer; thyroid, uterine, & prostate links novel

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<u>Skin</u> : ↑ melanoma (adult)	Suggestive melanoma links ⁸⁻¹⁰	Adds evidence to melanoma link (both sexes), strengthening prior findings

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<u>Skin</u> : ↑ melanoma (adult)	Suggestive melanoma links ⁸⁻¹⁰	Adds evidence to melanoma link (both sexes), strengthening prior findings
<u>Other</u> : ↑ bladder (adult), ↑ oral (<i>adult</i>), ↑ kidney (<i>male</i>)	Little prior evidence for bladder, oral, kidney cancers ¹	Adds potential new associations

1 Mozzoni et al., 2021

3 Bozigar et al., 2024

5 Del Risco Kollerud, 2014

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How might radon cause non-lung cancers? (hypotheses generated)

- **DNA damage:** Alpha particles → mutations; fits hematologic and melanoma signals
- Systemic dose: Radon progeny in **blood** → bone marrow, hormone-sensitive tissues (thyroid, uterine, prostate)
- Need to investigate radon **ingestion**? Swallowing saliva? Drinking water?
- Tissue sensitivity: **Rapidly dividing/developing tissues** (blood, GI, pediatric CNS), **urothelial/epithelial** (bladder, oral)
- **Potential modifiers:** Hormones, immune effects, UV (melanoma), smoking

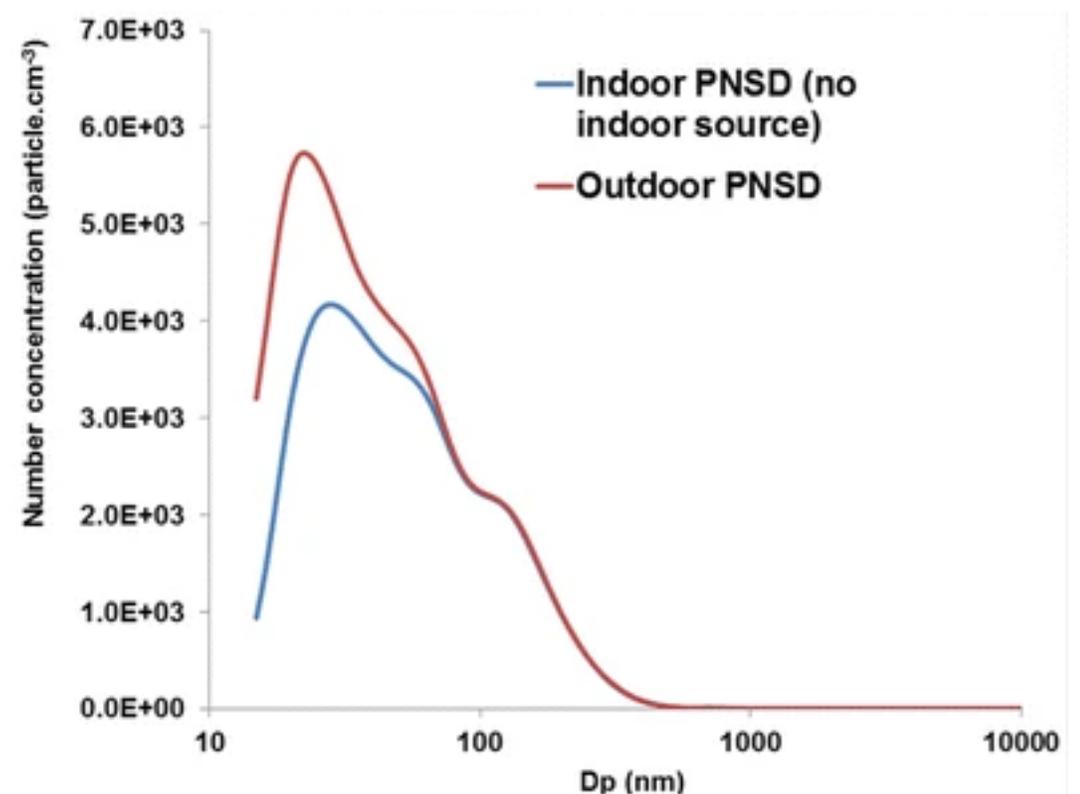
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Additional hypotheses generated about particle radioactivity and tissue dose dynamics

- ***Most dosimetric literature previously assumed ~200nm PD for attached fraction***

Fraction	Particle Size	Proportion of Airborne Particles	Proportion of Radioactive Airborne Particles
Unattached fraction	< 1-10 nm (ultrafine)	Very small number fraction (< 10%), but can dominate surface area at low PM levels	Minor when particle counts are high; increases sharply when air is clean
Attached fraction (small)	10–200 nm	High number fraction and surface area (see graph →)	Major carrier of radioactivity under cleaner indoor conditions (emerging evidence)
Attached fraction (large)	> 0.2–2.5 μm	Dominant by mass; smaller number fraction	Usually contains most total activity mass



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Additional hypotheses generated about particle radioactivity and tissue dose dynamics

- ***Most dosimetric literature previously assumed ~200nm PD for attached fraction***

Fraction	Particle Size	Proportion of Airborne Particles	Proportion of Radioactive Airborne Particles	Behavior	Possible Biological Implications
Unattached fraction	< 1-10 nm (ultrafine)	Very small number fraction (< 10%), but can dominate surface area at low PM levels	Minor when particle counts are high; increases sharply when air is clean	Diffuses freely; penetrates deeply into alveoli and may enter systemic circulation	May irradiate distant or systemic tissues (e.g., blood, bone marrow, thyroid, skin)
Attached fraction (small)	10–200 nm	High number fraction and surface area (see graph →)	Major carrier of radioactivity under cleaner indoor conditions (emerging evidence)	Binds efficiently to ultrafine and fine PM; persists hours to days; similar/same behavior as unattached fraction	Sustained local alpha dose to bronchial and bronchiolar epithelium; potential contributor to systemic exposure like unattached fraction
Attached fraction (large)	> 0.2–2.5 μm	Dominant by mass; smaller number fraction	Usually contains most total activity mass	Deposits in upper airways and on mucosal surfaces; cleared via mucociliary transport and ingestion	Localized irradiation of upper-airway and digestive-tract tissues (e.g., oral, bladder, stomach)

Limitations and strengths

Limitations:

- Ecologic exposure metric; no individual radon measurements
- Potential residual confounding (other environmental/SES factors)
- Limited power for rare cancers → wide credible intervals
- Multiple comparisons may yield some false positives

Strengths:

- Large, population-based dataset across multiple subgroups (age, sex)
- Ability to detect site-specific and subgroup-specific patterns
- Multi-year, postal code-level radon estimates
- Bayesian modeling captures uncertainty & accommodates small counts

Takeaway messages

- **Radon's impact may extend beyond lung cancer**
 - **Wide carcinogenic signal** – many tissues and cancer types involved
 - Patterns consistent with **plausible systemic mechanisms**
- **No strong ecologic confounders** identified
 - Smoking may modify radon-cancer association – need better smoking data
- **Atypical exposure patterns** in terms of environmental justice concerns
 - Higher SES, newer homes, and rural (in MA)
- **Critical future work:** individual-level exposure, mechanistic research (particle dynamics), replication in other populations, pathways (inhalation vs. ingestion)

Other studies happening now

- **Particle radioactivity in Portland homes** (small case study)
 - Measuring radon decay, ultrafine and fine PM, weather, particle radioactivity
 - 3 homes, 3 locations
 - Basement, first floor, outdoor ambient
- **Radon exposure and central nervous system (includes brain) cancer** (national cohort study)
 - Women's Health Initiative cohort(s)
 - Preliminary result: average area-level radon concentration associated with increased individual risk for brain cancer

References

- Barbosa-Lorenzo, S., Barros-Dios, J. M., Aldrey M. R., Cerdeira-Caramés, S., Ruano-Ravina, A. (2016). Residential radon and cancers other than lung cancer: a cohort study in Galicia, a Spanish radon-prone area. *European Journal of Epidemiology*, 31(4), 437–441.
- Besag, J., York, J., & Mollié, A. (1991). Bayesian image restoration, with two applications in spatial statistics. *Annals of the Institute of Statistical Mathematics*, 43, 1–59.
- Boz, S., Vienneau, D., Pascaud, A., & Vicedo-Cabrera, A. M. (2022). A prospective cohort analysis of residential radon and UV radiation in relation to skin cancer mortality in Switzerland. *Environment International*, 170, 107437.
- Bozigar, M., Konstantinou, G., Vieira, C. L. Z., Li, L., Alwadi, Y., Jones, R. R., & Koutrakis, P. (2024). Domestic radon exposure and childhood cancer risk by site and sex in 727 U.S. counties, 2001–2018. *Science of the Total Environment*, 954, 176288.
- Bräuner, E. V., Loft, S., Sørensen, M., Jensen, A., Andersen, C. E., Ulbak, K., ... Raaschou-Nielsen, O. (2015). Residential radon exposure and skin cancer incidence in a prospective Danish cohort. *PLOS ONE*, 10(8), e0135642.
- Del Risco Kollerud, R., Blaasaas, K. G., & Claussen, B. (2014). Risk of leukaemia or cancer in the central nervous system among children living in an area with high indoor radon concentrations: results from a cohort study in Norway. *British Journal of Cancer*, 111(8), 1413–1420.
- Hjalgrim, H., Chang, E. T., & Glaser, S. L. (2017). *Infections and immune factors*. In D. Schottenfeld, J. F. Fraumeni Jr. (Eds.), *Cancer Epidemiology and Prevention* (4th ed., pp. 639–666). New York: Oxford University Press. Chapter 39.
- Li, L., Coull, B. A., Vieira, C. L. Z., & Koutrakis, P. (2025). High-resolution national radon maps based on massive indoor measurements in the United States. *Proceedings of the National Academy of Sciences*, 122(3), e2408084121.
- Mozzoni, P., Pinelli, S., Corradi, M., Ranzieri, S., Cavallo, D., & Poli, D. (2021). Environmental/Occupational exposure to radon and non-pulmonary neoplasm risk: A review of epidemiologic evidence. *International Journal of Environmental Research and Public Health*, 18(19), 10466.
- Ngoc, L. T. N., Park, D., & Lee, Y.-C. (2023). Human health impacts of residential radon exposure: Updated systematic review and meta-analysis of case–control studies. *International Journal of Environmental Research and Public Health*, 20(1), 97.
- Santos, N. V. da, Vieira, C. L. Z., Saldiva, P. H. N., Justo, L. T., Saiki, M., Paci Mazzilli, B., Saueia, C. H., De André, C. D. S., & Koutrakis, P. (2020). Levels of Polonium-210 in brain and pulmonary tissues: Preliminary study in autopsies conducted in the city of São Paulo, Brazil. *Scientific Reports*, 10, 180.
- Textor, J., van der Zander, B., Gilthorpe, M. S., Liskiewicz, M., & Ellison, G. T. (2017). Robust causal inference using directed acyclic graphs: The R package ‘dagitty’. *International Journal of Epidemiology*, 46(6), 1887–1894. <https://doi.org/10.1093/ije/dyw341>
- U.S. Environmental Protection Agency (2016). *A Citizen’s Guide to Radon: The Guide to Protecting Yourself and Your Family from Radon* (EPA 402/K-12/002). <https://www.epa.gov/radon/radon-publications-webinars-and-videos>
- VoPham, T., DuPré, N., Tamimi, R. M., James, P., Bertrand, K. A., Vieira, C. L. Z., Hart, J. E., Laden, F., & Hart, J. E. (2017). Environmental radon exposure and breast cancer risk in the Nurses’ Health Study II. *Environmental Health*, 16, Article 97.
- Wheeler, B. W., Allen, J., Depledge, M. H., & Curnow, A. (2012). Radon and skin cancer in southwest England: An ecological study. *Epidemiology*, 23(3), 415–422. <https://doi.org/10.1097/EDE.0b013e31823b6139>

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Thank you! Questions?

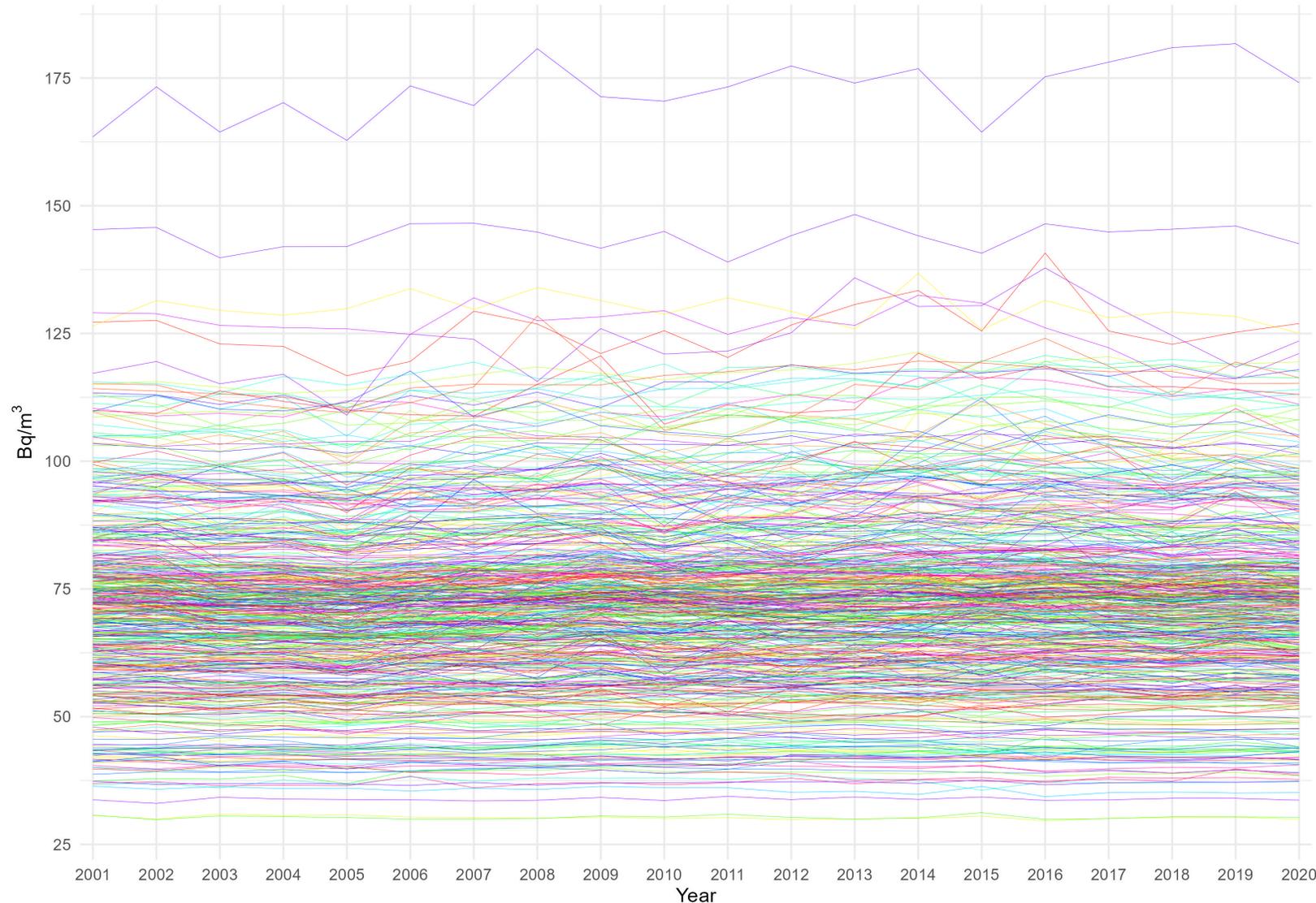
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Appendix

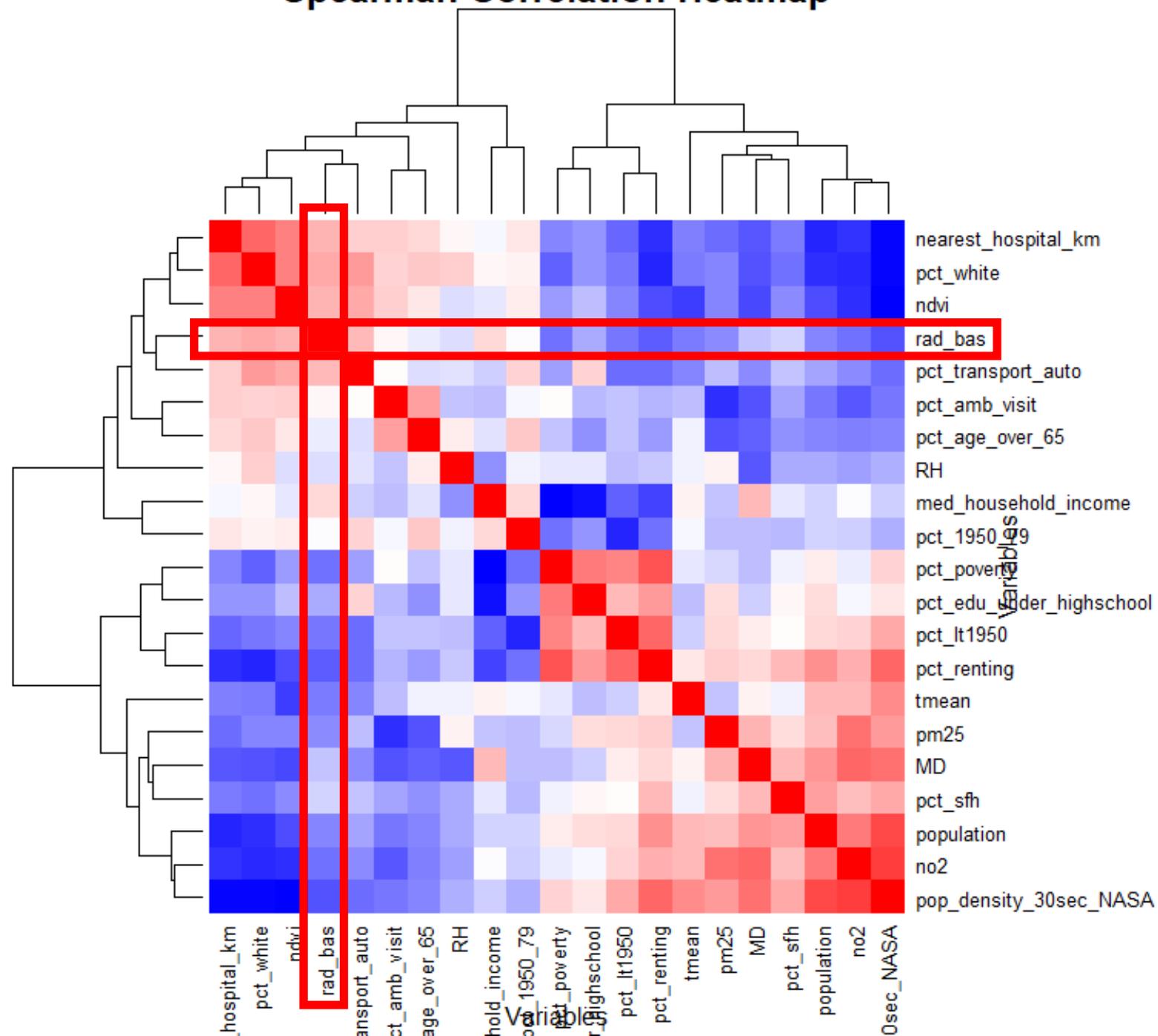
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Estimated basement radon levels over time for 483 postal codes included in the study 2001-2020.

Spearman Correlation Heatmap



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Directed acyclic graph (DAG) guided confounder identification and adjustment*

- Minimally sufficient adjustment set (often in form of proxies)
- *Other covariates and variables from the literature were considered to improve precision if they did not increase bias (e.g., colliders)
- Still an ecologic study...

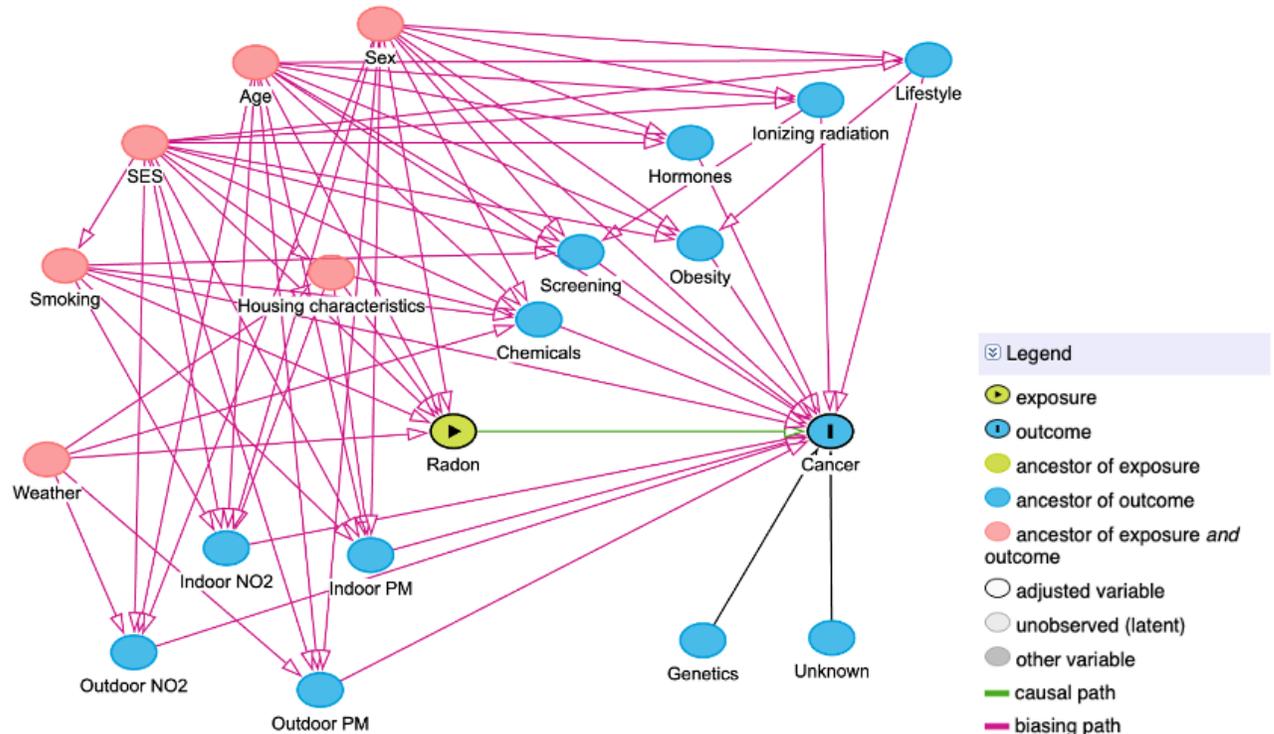


Fig. 1. Directed acyclic graph of the theoretical causal association between radon exposure and cancer diagnosis.

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Numerous sensitivity analyses performed

- **Assessments**

- Watanabe-Akaike information criterion (**WAIC**)
- “**Posterior predictive checks**” via summary statistics and histograms

- **Model specifications**

- Outcome **distributions**
- Prior distributions (of parameters; “**priors**”)
- Handling of **zero counts** (i.e., ZI)
 - Replacing zero-counts with random numbers
- **Linearity** of exposure-response
 - Distributed lag linear & nonlinear models (DLM, DLNM) with 2nd order random walks
- Adjustment for **air pollutants** (PM_{2.5}, NO₂, O₃; hypothesized covariates)

Results were robust in sensitivity analyses

- **General assessments:**

- Prior knowledge and **WAIC** indicated fully-adjusted ZIP model was best
- **Posterior predictive checks** confirmed

- **Results did not differ by:**

- Handling of **zero counts** (i.e., ZI)
 - Time-aggregation, replacing zero-counts with random numbers
- **Non-linearity** of exposure-response
 - Distributed lag linear & nonlinear models (DLM, DLNM) with 2nd order random walks
- Adjusting for **air pollution**

Indoor Enviro

The 39th Annual Radon and

Estimated relative risk and 95% credible intervals for **continuous (linear)** average basement radon exposure (+50 Bq/m³ (1.35 pCi/L)) and incident cancer diagnoses over previous 5 years by site and sex for **ADULT NEVER SMOKERS**.

Model adjustments: Random walk within county over time effect, postal code and county spatially correlated and uncorrelated random effects, fixed effects (mean housing age, % single family homes, % poverty, mean of median household income, mean temperature, mean relative humidity, % smokers). Central nervous system: CNS. Becquerels/cubic meter: Bq/m³.

Female:

- colorectal (↑RR 1.21 [1.08, 1.36])
- oral (↑RR 1.30 [1.03, 1.64])

Male:

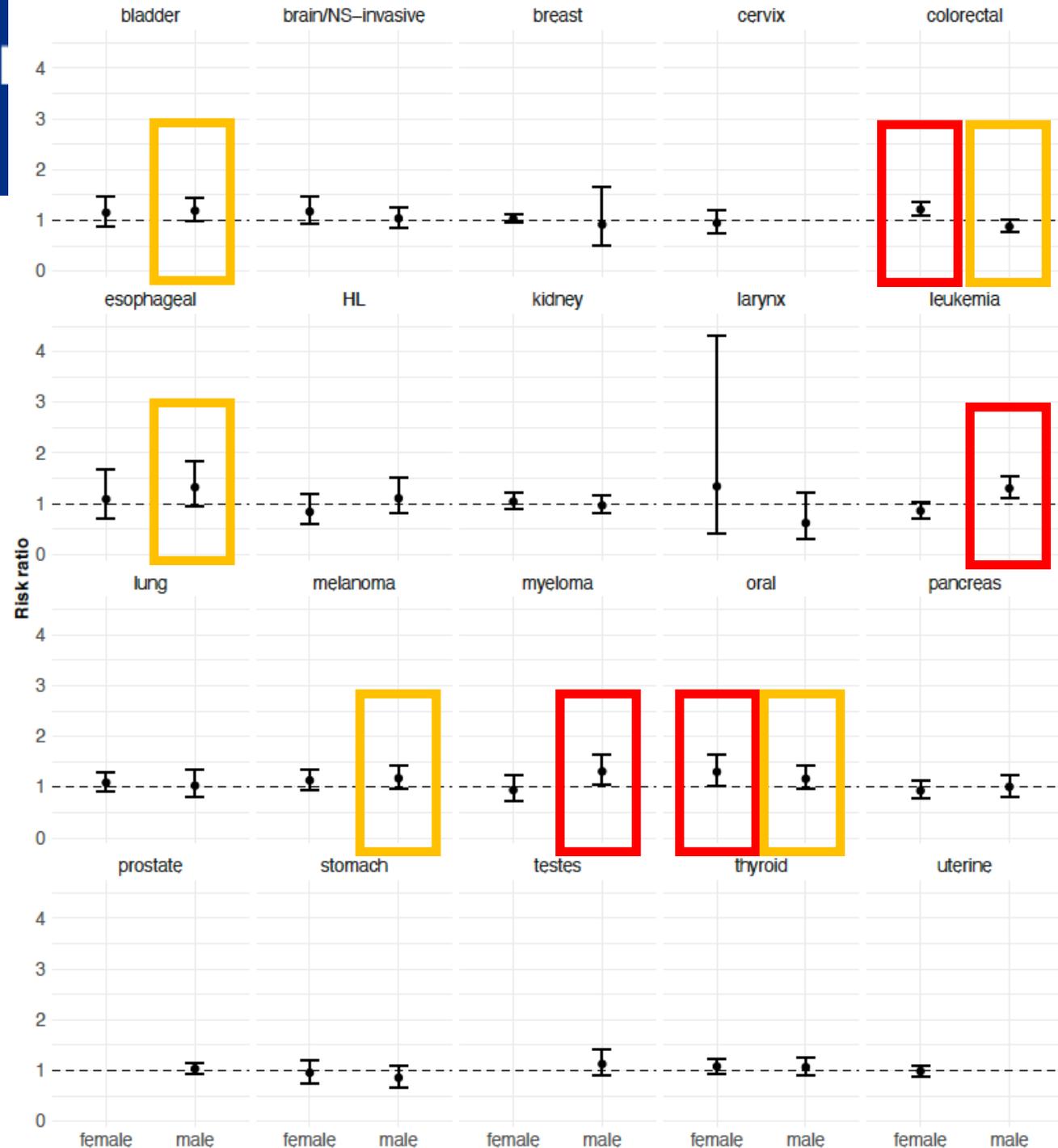
- leukemia (↑RR 1.30 [1.10, 1.54])
- myeloma (↑RR 1.31 [1.04, 1.64])

Male:

- bladder (RR 1.19 [0.98, 1.45])
- colorectal (RR 0.88 [0.77, 1.00])
- esophageal (RR 1.33 [0.95, 1.84])
- melanoma (RR 1.17 [0.97, 1.42])
- oral (RR 1.17 [0.96, 1.41])

Statistically significant

Marginally Significant (CrI includes 1.0; nearest bound ≤ 10% of CrI width)

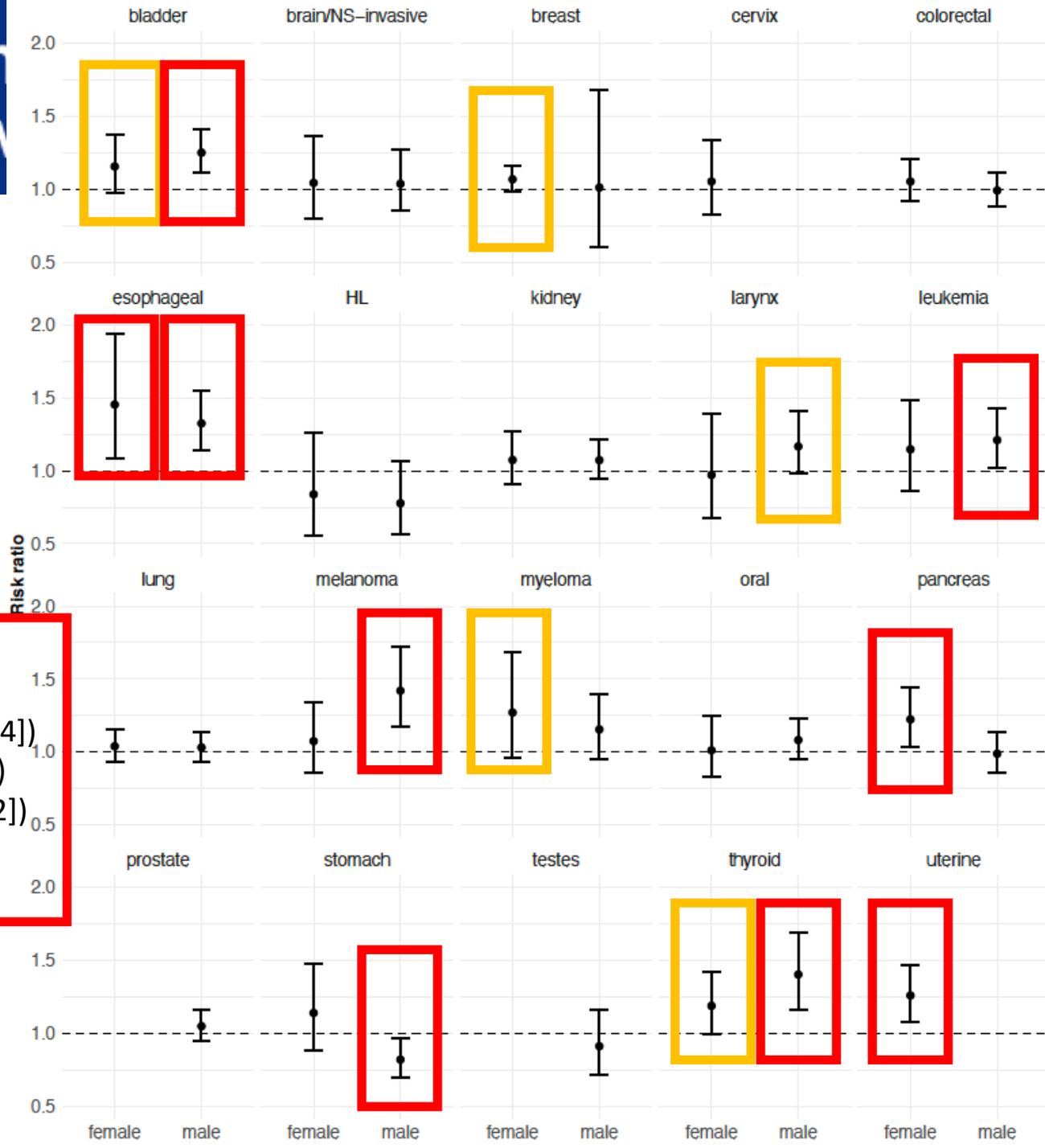


Indoor Environ

The 39th Annual Radon and V

Estimated relative risk and 95% credible intervals for **continuous (linear)** average basement radon exposure (+50 Bq/m³ (1.35 pCi/L)) and incident cancer diagnoses over previous 5 years by site and sex for **ADULT EVER SMOKERS**.

Model adjustments: Random walk within county over time effect, postal code and county spatially correlated and uncorrelated random effects, fixed effects (mean housing age, % single family homes, % poverty, mean of median household income, mean temperature, mean relative humidity, % smokers). Central nervous system: CNS. Becquerels/cubic meter: Bq/m³.



Female:

- esophageal (↑ RR 1.45 [1.09, 1.94])
- pancreas (↑ RR 1.22 [1.04, 1.45])
- uterine (↑ RR 1.26 [1.08, 1.47])

Male:

- bladder (↑ RR 1.25 [1.11, 1.41])
- esophageal (↑ RR 1.32 [1.14, 1.54])
- leukemia (↑ RR 1.21 [1.02, 1.43])
- melanoma (↑ RR 1.42 [1.18, 1.72])
- stomach (↓ RR 0.82 [0.70, 0.97])
- thyroid (↑ RR 1.40 [1.16, 1.69])

Female: bladder (RR 1.16 [0.98, 1.38]); breast (RR 1.07 [0.98, 1.17]); myeloma (RR 1.27 [0.96, 1.69]); thyroid (RR 1.19 [1.00, 1.42])
 Male: larynx (RR 1.17 [0.98, 1.40])

Statistically significant

Marginally significant

Indoor Environ

The 39th Annual Radon and V

Estimated relative risk and 95% credible intervals for **continuous (linear)** average basement radon exposure (+50 Bq/m³ (1.35 pCi/L)) and incident cancer diagnoses over previous 5 years by site and sex for **ADULTS** with **MISSING SMOKING STATUS**.

Model adjustments: Random walk within county over time effect, postal code and county spatially correlated and uncorrelated random effects, fixed effects (mean housing age, % single family homes, % poverty, mean of median household income, mean temperature, mean relative humidity, % smokers). Central nervous system: CNS. Becquerels/cubic meter: Bq/m³.

Female:

- Melanoma

Male:

- Pancreas (↓ RR)

Statistically Significant ↑RR

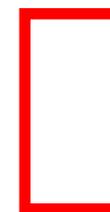
Female:

- Oral
- Cervix (↓ RR)

Male:

- Prostate
- Bladder (↓ RR)
- Larynx (↓ RR)

Marginally Significant ↑RR
(CrI includes 1.0; nearest bound ≤10% of CrI width)



Indoor Environ

The 39th Annual Radon and V

Estimated relative risk and 95% credible intervals for **continuous (linear)** average basement radon exposure (+50 Bq/m³ (1.35 pCi/L)) and incident cancer diagnoses over previous 5 years by site and sex for **CHILDREN (NEVER SMOKERS)**.

Model adjustments: Random walk within county over time effect, postal code and county spatially correlated and uncorrelated random effects, fixed effects (mean housing age, % single family homes, % poverty, mean of median household income, mean temperature, mean relative humidity, % smokers). Central nervous system: CNS. Becquerels/cubic meter: Bq/m³.

Male:

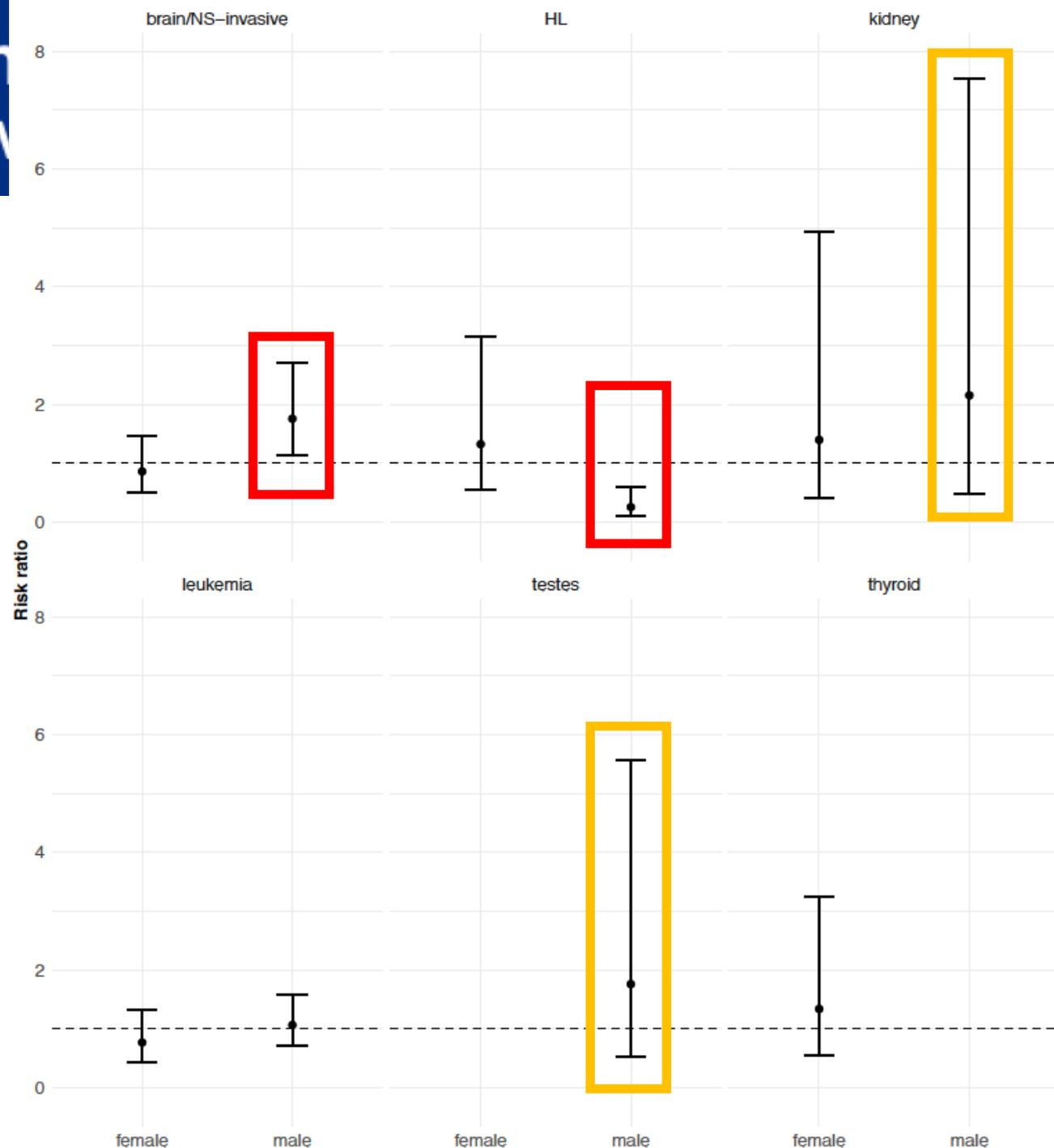
- **brain/NS-invasive** (↑ RR 1.76 [1.14, 2.72])
- **HL** (↓ RR 0.25 [0.11, 0.58])

Statistically significant

Male:

- **testes** (RR 1.76 [0.52, 5.57])
- **kidney** (RR 2.15 [0.47, 7.53])

Marginally significant



Indoor Environ

The 39th Annual Radon and V

Estimated relative risk and 95% credible intervals for **dichotomized** average basement radon exposure (cut point: 74 Bq/m³ (2.00 pCi/L)) and incident cancer diagnoses over previous 5 years by site and sex for **ADULT NEVER SMOKERS**.

Model adjustments: Random walk within county over time effect, postal code and county spatially correlated and uncorrelated random effects, fixed effects (mean housing age, % single family homes, % poverty, mean of median household income, mean temperature, mean relative humidity, % smokers). Central nervous system: CNS. Becquerels/cubic meter: Bq/m³.

Female:

- breast (↑ RR 1.04 [1.01, 1.07])
- colorectal (↑ RR 1.10 [1.04, 1.16])
- lung (↑ RR 1.18 [1.08, 1.29])

Male:

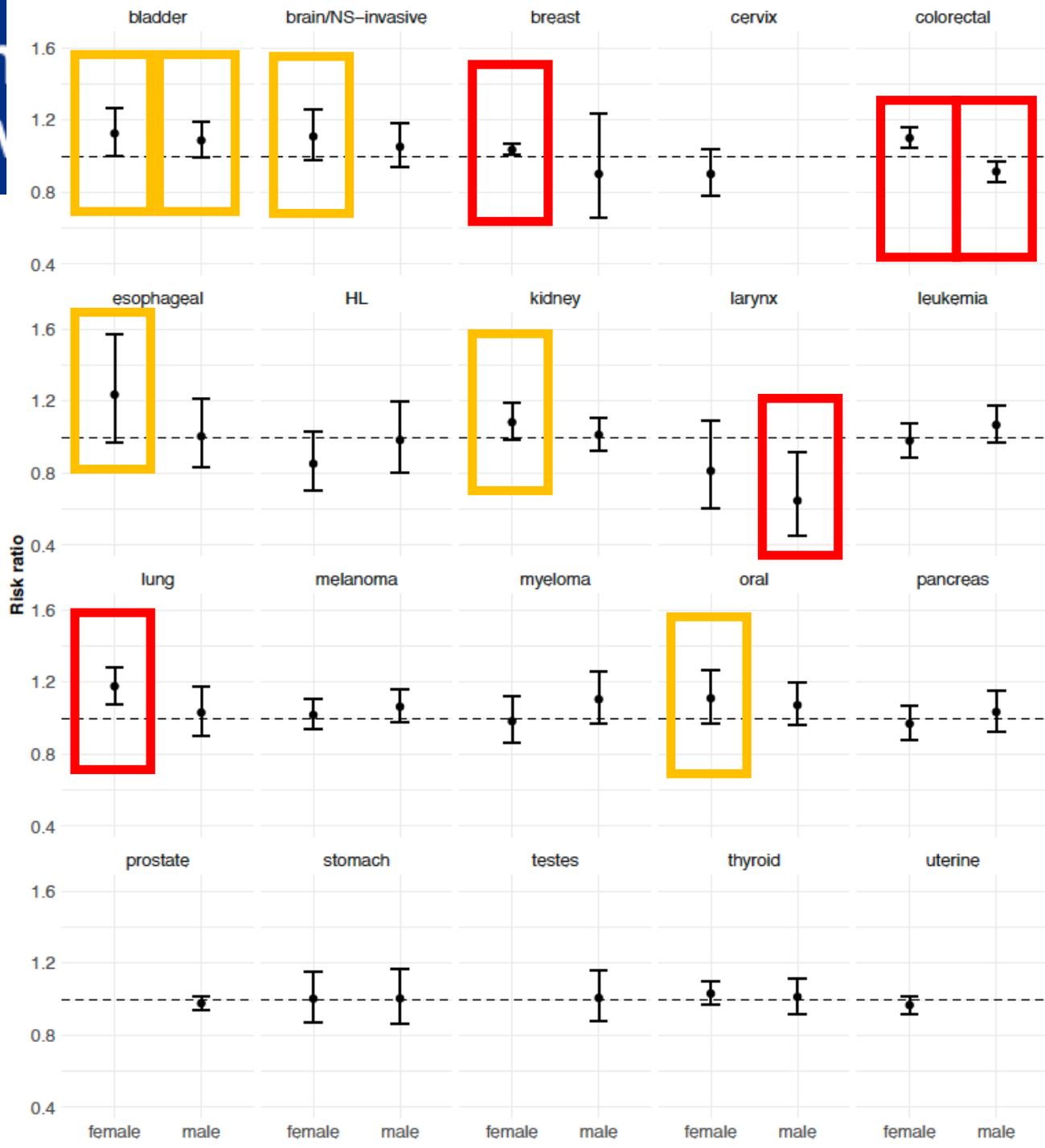
- colorectal (↓ RR 0.91 [0.86, 0.97])
- larynx (↓ RR 0.65 [0.46, 0.92])

Statistically significant

Marginally significant

Female: bladder (RR 1.13 [1.00, 1.27]); **brain/NS-invasive** (RR 1.11 [0.98, 1.26]); **esophageal** (RR 1.24 [0.97, 1.57]); **kidney** (RR 1.08 [0.99, 1.19]); **oral** (RR 1.11 [0.97, 1.27])

Male: bladder (RR 1.09 [1.00, 1.19])

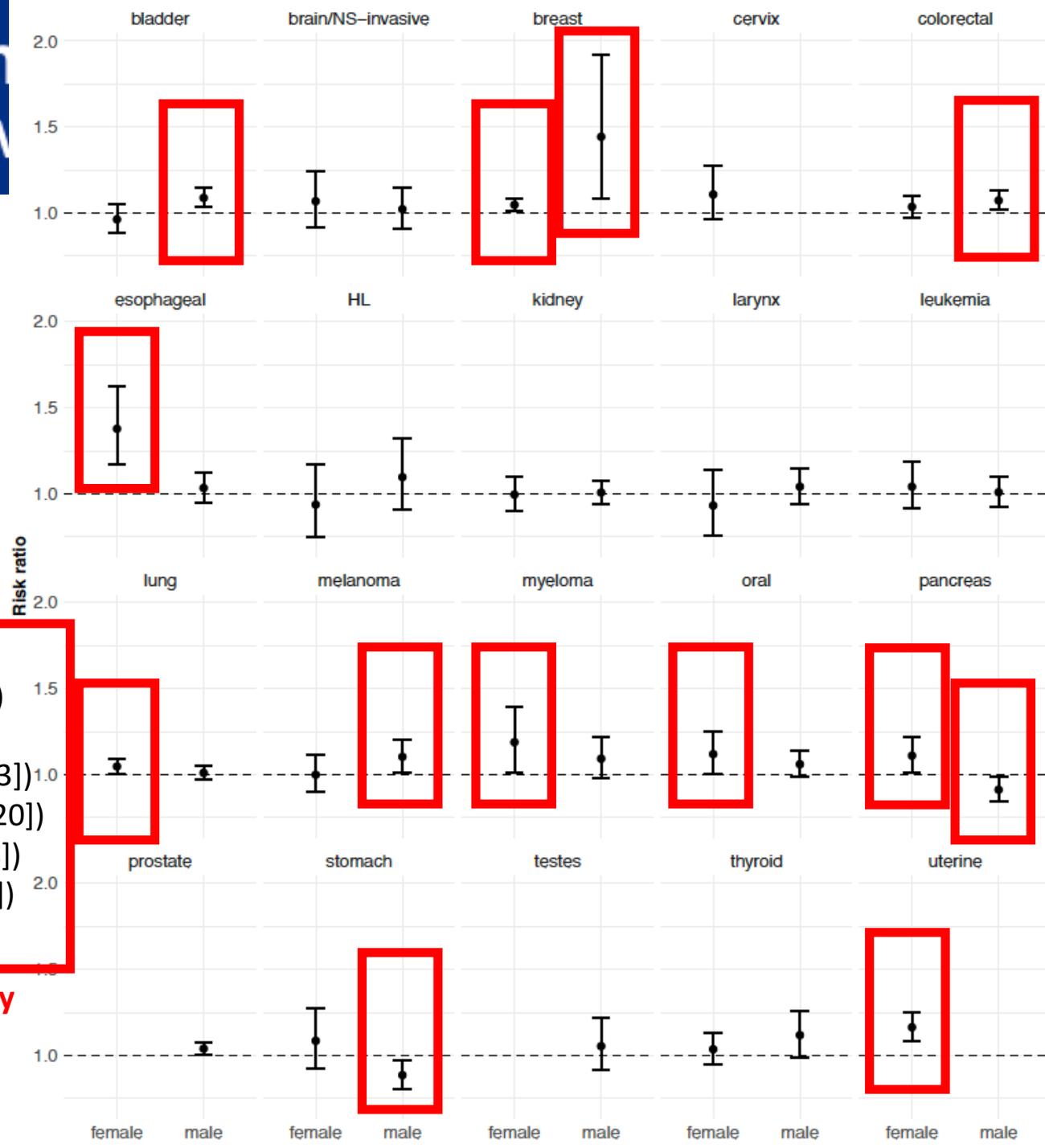


Indoor Environ

The 39th Annual Radon and V

Estimated relative risk and 95% credible intervals for **dichotomized** average basement radon exposure (cut point: 74 Bq/m³ (2.00 pCi/L)) and incident cancer diagnoses over previous 5 years by site and sex for **ADULT EVER SMOKERS**.

Model adjustments: Random walk within county over time effect, postal code and county spatially correlated and uncorrelated random effects, fixed effects (mean housing age, % single family homes, % poverty, mean of median household income, mean temperature, mean relative humidity, % smokers). Central nervous system: CNS. Becquerels/cubic meter: Bq/m³.



- Female:**
- breast (↑ RR 1.04 [1.01, 1.08])
 - esophageal (↑ RR 1.40 [1.19, 1.65])
 - lung (↑ RR 1.05 [1.01, 1.09])
 - myeloma (↑ RR 1.22 [1.04, 1.43])
 - oral (↑ RR 1.13 [1.01, 1.27])
 - pancreas (↑ RR 1.10 [1.00, 1.21])
 - uterine (↑ RR 1.16 [1.08, 1.25])

- Male:**
- bladder (↑ RR 1.09 [1.03, 1.14])
 - breast (↑ RR 1.47 [1.10, 1.97])
 - colorectal (↑ RR 1.07 [1.02, 1.13])
 - melanoma (↑ RR 1.10 [1.01, 1.20])
 - pancreas (↓ RR 0.91 [0.84, 0.98])
 - stomach (↓ RR 0.86 [0.78, 0.95])

- Male:**
- prostate (RR 1.03 [1.00, 1.07])
 - thyroid (RR 1.13 [1.00, 1.27])

Marginally significant

Statistically significant

Indoor Environ

The 39th Annual Radon and V

Estimated relative risk and 95% credible intervals for **dichotomized** average basement radon exposure (cut point: 74 Bq/m³ (2.00 pCi/L)) and incident cancer diagnoses over previous 5 years by site and sex for **CHILDREN (NEVER SMOKERS)**.

Model adjustments: Random walk within county over time effect, postal code and county spatially correlated and uncorrelated random effects, fixed effects (mean housing age, % single family homes, % poverty, mean of median household income, mean temperature, mean relative humidity, % smokers). Central nervous system: CNS. Becquerels/cubic meter: Bq/m³.

Male:

•HL (↓ RR 0.64 [0.41, 1.00])

Statistically significant

Female:

•HL (RR 1.53 [0.84, 3.43])

Marginally significant

