Seveso Women's Health Study: Purpose

To investigate the relationship of serum TCDD and reproductive health outcomes:

- Birth Outcomes*
- Age of Menarche*
- Menstrual Cycle*
- Age of Menopause*
- Endometriosis*

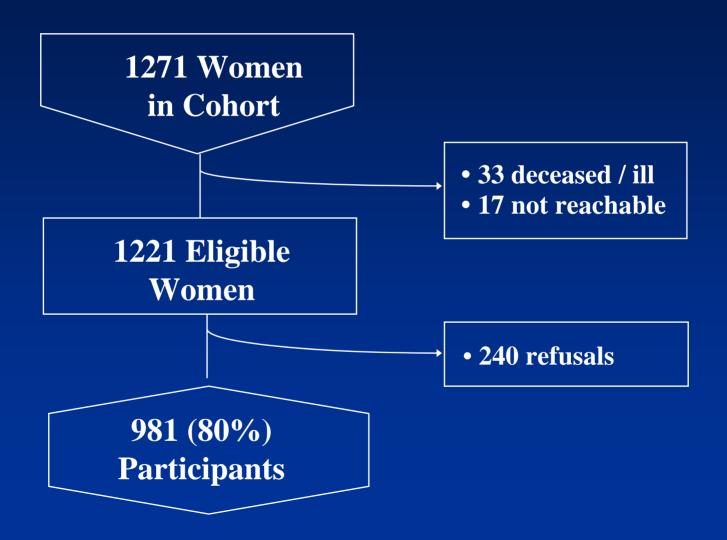
- Breast Cancer*
- Uterine Leiomyoma
- Ovarian Function/Hormones
- Benign Breast Disease
- Fertility and Time to Conception

Seveso Women's Health Study: Eligibility Criteria

Women who:

- Were 0 40 years old in 1976
- Were residents of Zones A or B in 1976
- Had adequate stored serum collected between 1976 and 1980

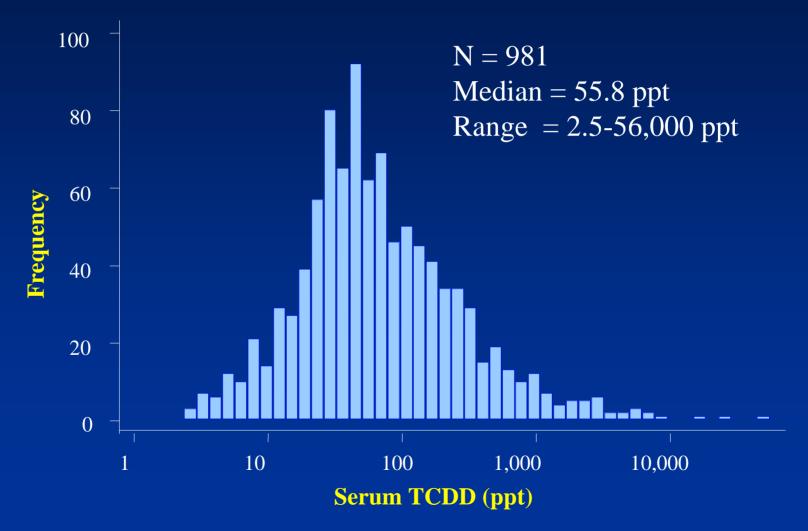
Participation Statistics



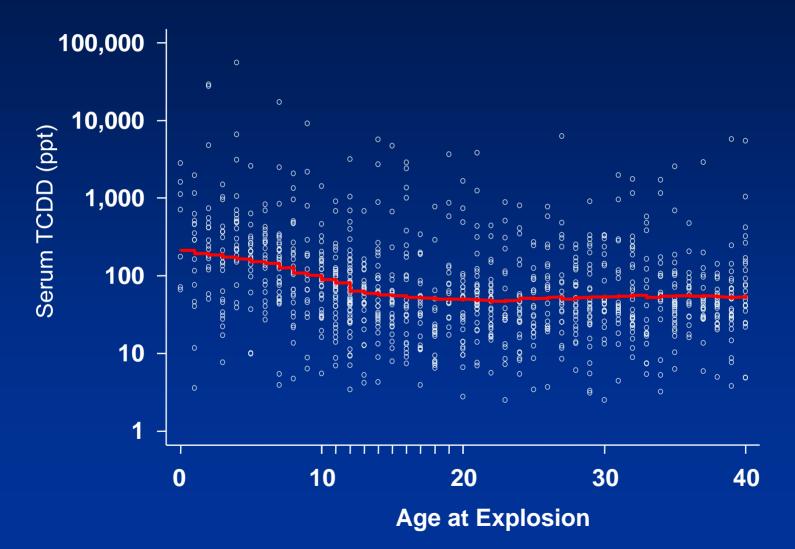
Data Collection

- Personal Interview
- Blood Sample
- Gynecologic Examination
- Transvaginal Ultrasound
- Daily Menstrual Diary (3 cycles)
- Medical Records
- Laparoscopy if indicated

Distribution of 1976 TCDD Serum Levels



TCDD by Age at Explosion

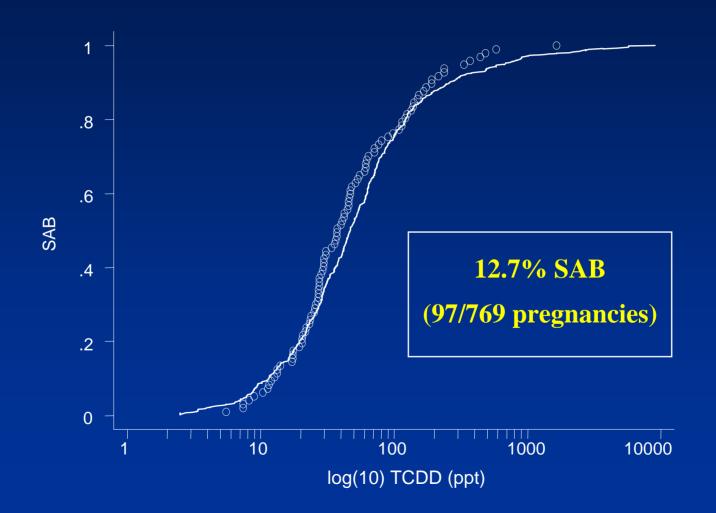


1976 background TEQ levels (ppt) in female residents of non-ABR, ages 0-40

Congener	Mean (SD)*	Range
TCDD	20.2 (12.9)	8.7 - 47.6
Other PCDDs / PCDFs / PCBs	80.2 (18.9)	52.8 - 117.4
Total TEQ	100.4 (17.7)	92.3 - 126.1

* Mean (SD) of 9 pools

Birth Outcomes: SAB



Birth Defects (n=672 pregnancies)

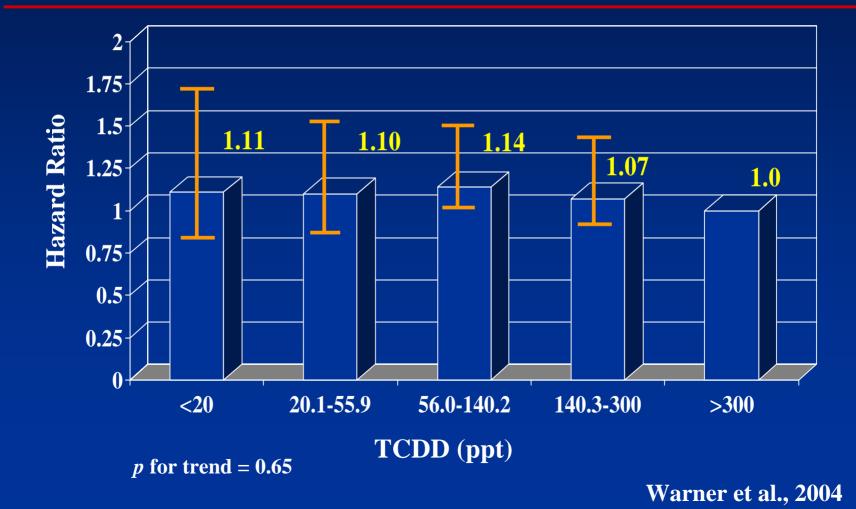
Birth Defect	Observed Frequency in Seveso	Expected Frequency in NE Italy	Serum TCDD level (ppt)
Anencephaly	1	0.02	19.5
Cleft lip	1	0.33	29.9
Hypospadias	2	0.26	74.7
Molar Pregnancy	1		61.2 61.1

Birth Outcomes: Birthweight / SGA

Pregnancies	Years	Ν	Birthweight (g) β*(95% C.I.)	SGA aOR*(95%C.I.)
I regnancies	I Car 5		p ()) / ())	
All eligible	1976-1998	608	-4 (-68, 60)	1.2 (0.8, 1.8)
1 st eligible	1976-1984	221	-89 (-203, 25)	1.8 (0.7, 4.3)

* Change in β / O.R. per 10-fold increase in serum TCDD

Cox PH Results: Risk of Earlier Menarche by TCDD Category among Premenarcheal Women (n=282)

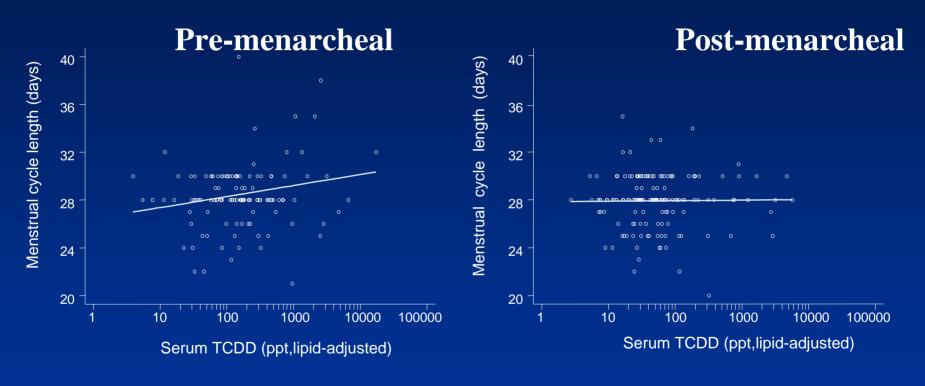


Cox PH Results: Risk of Earlier Menarche with Continuous Log₁₀TCDD

Sample	n	Hazard Ratio (95% C.I.)	<i>p</i> -value
Premenarcheal at explosion	282	0.95 (0.83 - 1.09)	0.46
< 8 years at explosion	158	1.08 $(0.89 - 1.30)$	0.71
< 5 years at explosion	84	1.20 $(0.98 - 1.60)$	0.07

Warner et al., 2004

TCDD vs Cycle Length by Menarcheal Status (n=301)



 β (95% C.I.) = 0.93 (-0.01, 1.86)

 β (95% C.I.) = -0.03 (-0.61, 0.54)

p-value for interaction = 0.08

Eskenazi et al., AJE 2002

No association between TCDD and:

- Length of flow (days)
- Regular vs. irregular cycle length
- Heaviness of flow (scanty, moderate, heavy)

Eskenazi et al., AJE 2002

Serum TCDD Levels by Ovulation Status

Unpublished results presented:

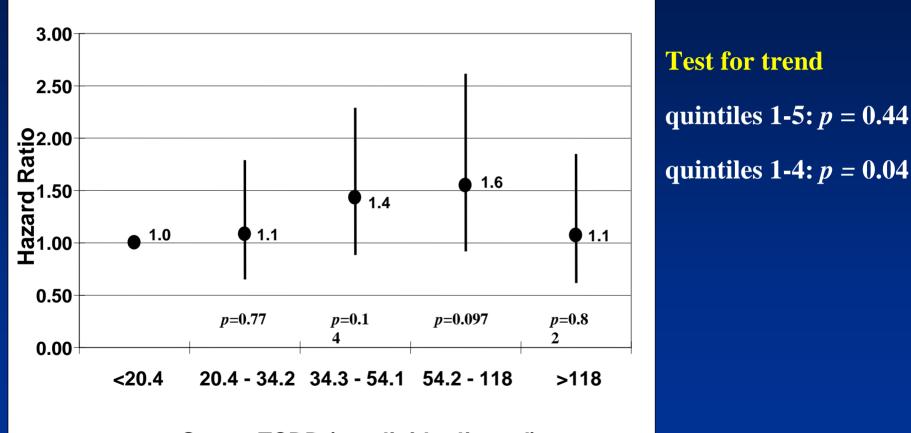
Risk of Ovulation with TCDD Exposure

Unpublished results presented:

Change in hormone levels with TCDD exposure

Unpublished results presented:

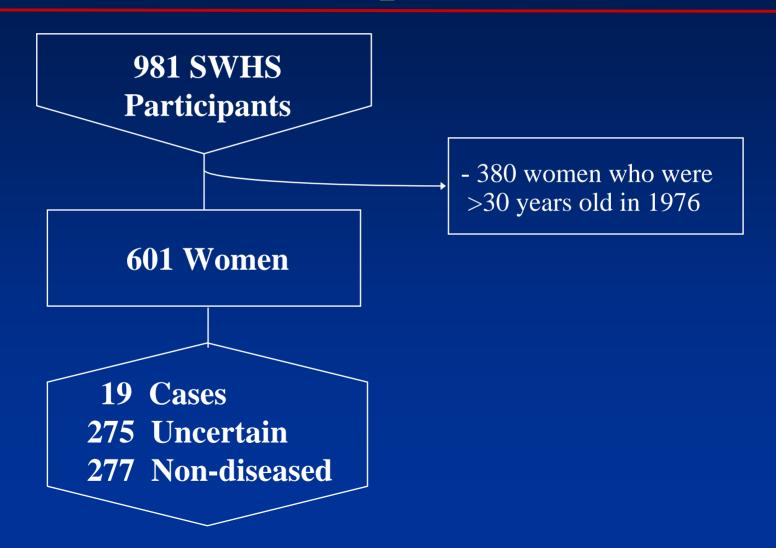
Risk of Onset of Natural Menopause by TCDD Quintiles: Adjusted^{*} Hazard Ratios (95% CI) (n=616)



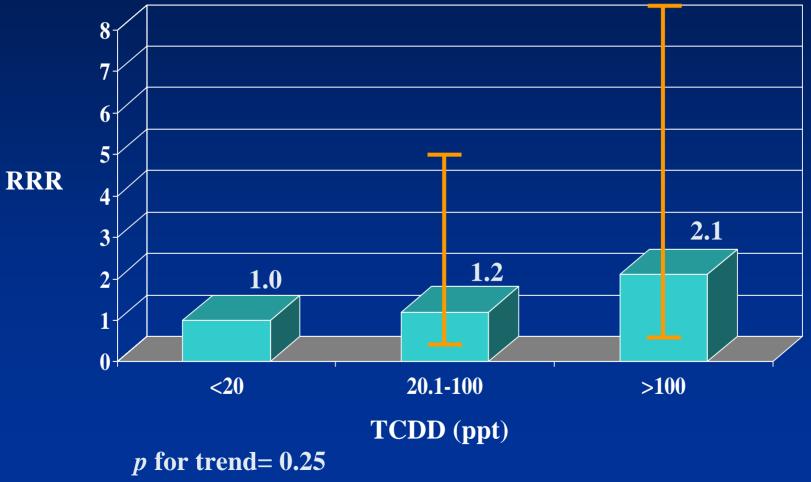
Serum TCDD (ppt, lipid-adjusted)

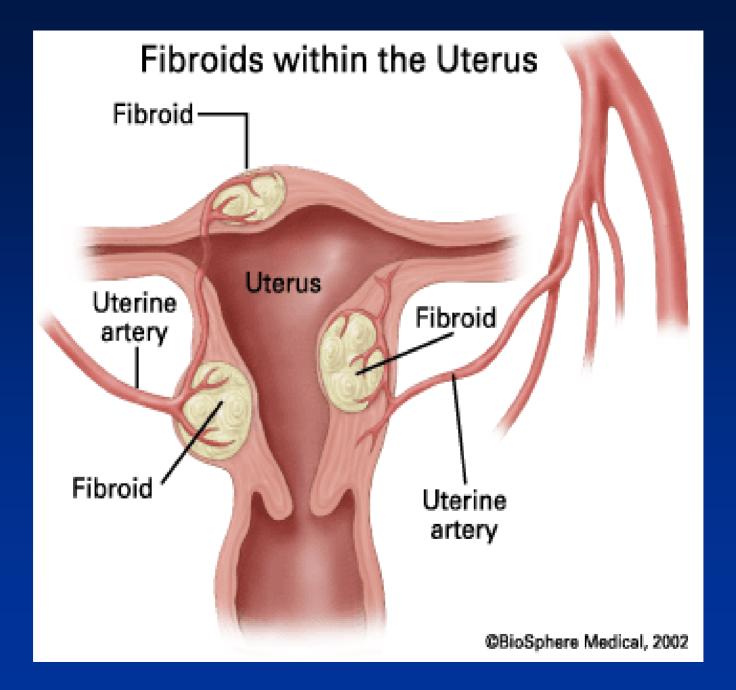
*Adjusted for education, parity, OC use, and other medical conditions.

Endometriosis Analysis: Participants



Age-adjusted Relative Risk Ratio of TCDD Exposure and Endometriosis

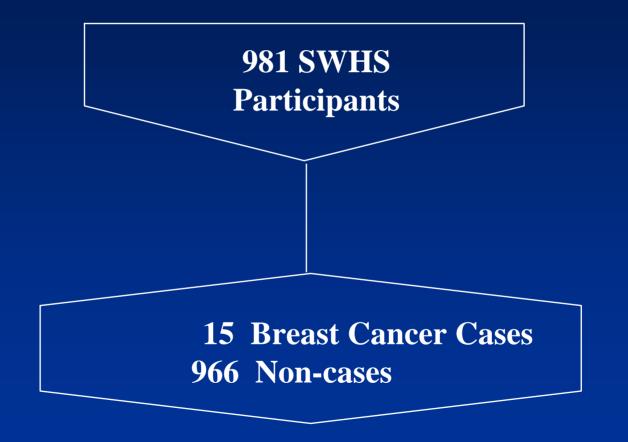




Smoothed estimate of relationship between log₁₀TCDD and log hazard of fibroids onset, adjusted for age

Unpublished results presented:

Breast Cancer Analysis: Participants



Relation of Breast Cancer Incidence with continuous TCDD

TCDD	Cases / Total	Hazard Ratio (95% C.I.)
log ₁₀ TCDD	15 / 981	2.1 $(1.0 - 4.5)$

(test for trend, *p* = 0.05)

Warner et al., EHP 2002



Unpublished results presented:

Considerations

 Underestimate of effects possible due to potentially high background TEQ

Highest exposed women were the youngest at follow-up

 Animal evidence suggests *in utero* exposure may be the more sensitive route for the developing fetus.

• It is possible the effects of TCDD are yet to be observed.

Continued follow-up of the SWHS cohort and their offspring is needed.