

# EDITOR'S CHOICE

## INDIA EDITOR'S CHOICE

# SOS: time to reclaim the air we breathe

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Asking for a history of smoking is an integral part of a medical consultation. But has the day arrived when we routinely ask patients about outdoor exposure to air pollutants? Or given the frenetic pace of urbanisation, do we just assume that most of the population is at high risk? And that the future generation is in for a lifetime's exposure to potentially lethal toxins, completely beyond their control? When living and breathing come to be, well, risk factors for living and breathing.

Inexcusably, we have abused and disregarded the air we breathe, points out a recent study conducted by the Centre for Science and Environment (doi:10.1136/bmj.g1597). The levels of atmospheric particulate matter and noxious gases in Delhi have risen exponentially in the past decade, making it the world's most polluted city. Reacting to this report, the Supreme Court directed states to adopt measures to reduce air pollution as a public health priority.

Indeed, the evidence on health effects of air pollution is mounting. Brauer and Mancini discuss in an editorial (doi:10.1136/bmj.g40) that, while air pollution has long been implicated for its role in respiratory diseases, its impact on cardiovascular health is responsible for most of the associated disease burden and mortality. Attesting to this is a study by Cesaroni and colleagues conducted as part of the ESCAPE project in 11 population based cohorts from five European countries (doi:10.1136/bmj.f7412). They find long term exposure to inhalable particulate matter to be associated with an increased risk of myocardial infarction and unstable angina. Likewise, Guo and colleagues performed a time series analysis of the impact of daily air pollution levels on mortality in Beijing (doi:10.1136/bmj.f7139). They conclude that high concentration of air pollutants is shortening the average life span in China, with those younger than 65 years of age doubly affected.

Public outcry over the hazardous quality of air led to a series of emergency response measures being instituted in China. Similarly, can we act without delay to reclaim the air we breathe and restore its purity? Often, as medical professionals we concern ourselves with treating the disease, leaving upstream

environmental risk factors to be managed by others. Breaking away from this conventional mould is Jeph Mathias, who "relinquished the stethoscope . . . making the interface between people and the environment his emergency room." Global health doctors both, Jeph and his wife now work in rural communities to facilitate grassroots initiatives towards sustainable development. In a truly moving narrative (doi:10.1136/bmj.g119), he pieces together their quest as they set out on a wing and a prayer, to make this world a better place to live in so their teenager may not say, "You played at rapid sequence induction while my world burned!"

With elections around the corner, there can't be a better time to voice what we want for our country and our future, and plan how to get there. It is unfortunate that the health of the people remains relegated to the sidelines. As Giridhara Babu laments (<http://blogs.bmj.com/bmj/2014/02/20/giridhara-r-babu-health-for-indians-who-cares-about-it-anyway/>), current political campaigns are limited to generating media hype, "with no real discussion on the issues that affect the lives of scores of Indians."

Can we begin to change that?

At the *BMJ*, we are eager to initiate a discussion on how health may be made a priority issue in the coming elections. We are keen to hear your views on critical health policy areas that parties must commit to in their manifestos and deliver on, as the next government takes charge. Do voice your opinion and share your vision for healthcare in India (<http://blogs.bmj.com/bmj/2014/02/19/richard-hurley-we-need-your-help-what-will-indias-2014-general-elections-mean-for-health/>). And if you haven't already, do "Register to Vote" ([www.registertovote.in/](http://www.registertovote.in/)) right away.

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