

# Human health effects due to proximity to concentrated animal-feeding operations (CAFO)

## **Project Summary : Outcomes and exposures evaluated in the published literature from 2014 to 2020. updated Annette**

Livestock farming has experienced a significant transformation in the last decades, moving from small, family-owned farms to large farms. To classify those large animal operations, two terms are used: animal feeding operations (AFO) and concentrated animal feeding operations (CAFO). The U.S. Environmental Protection Agency (EPA) defines an AFO as a agricultural enterprise where animals are kept and raised in confined situations. AFOs congregate animals, feed, manure and urine, dead animals, and production operations on a small land area. Likewise, for the EPA, CAFO is a term used for a large concentrated AFO. More precisely, a CAFO is an AFO with more than 1000 animal units confined on site for more than 45 days during the year. The growth and popularity of this type of operations has been accompanied by the concerns due to the potential harmful effects that animal facilities could have on nearby communities. Regarding the swine industry, it has been suggested that facilities that confine animals indoors for feeding might represent a health hazard for surrounding communities because of exposure to odors, emissions and other infectious agents. To understand and estimate the impacts of CAFO on the health of nearby communities, several studies have been carried out in the last years.

## **Purpose of the Project**

In March 2020, the National Pork Board asked our group to provide a summary of the outcome and exposures reported in studies published on the topic of CAFOS and community health since 2014. Our group has performed two systematic reviews that summarize and assess the findings of previous publications approaching the association between animal-feeding operations and the measures of the health of individuals living near animal-feeding operations. In the 2014 review, we reported that 16 publications were relevant to the topic. For this project, we evaluated potentially relevant papers published since 2014.

## **Brief Summary**

We identified 21 additional papers published since 2014. 2017 was the year in which more studies were published (Figure 1). This growth in relevant papers highlights how much interest in the topic is growing. These “new” studies have been performed mainly in Netherlands, USA, Germany, and Canada and have explored multiple health outcomes (Figure 2). For each study, the reported health outcome measures as well as the measure used to assess exposure to animal feed operations were extracted and grouped into broad outcome and exposure categories respectively. For example if a study reported asthma as a health outcome, this outcome was categorized into the broader category of lower respiratory diseases. These broad outcome categories were created based on the affected body system such as digestive, cardiovascular, etc (Table 2). Likewise, if for example the exposure used in the study was distance measured in kilometers to the nearest animal operation, then this exposure was grouped into a broader exposure category called distance (Table 3). We defined a combination as the pair of a broad outcome category and an exposure, for

example, lower respiratory disease (broad outcome category) and distance to the nearest CAFO operation (exposure). In Table 1, the number of combinations in which the broad outcome category was used according to the year. For instance, we can see that for lower respiratory outcomes were the most used and discussed over the last 6 years (Table 1). The studies provided 1636 combinations of exposures and outcomes. For the period between 2014 and 2016 the number of outcomes categories analyzed ranged from 4 to 6. For the period between 2017 and 2019 the number of categories almost doubled (Figure 3).

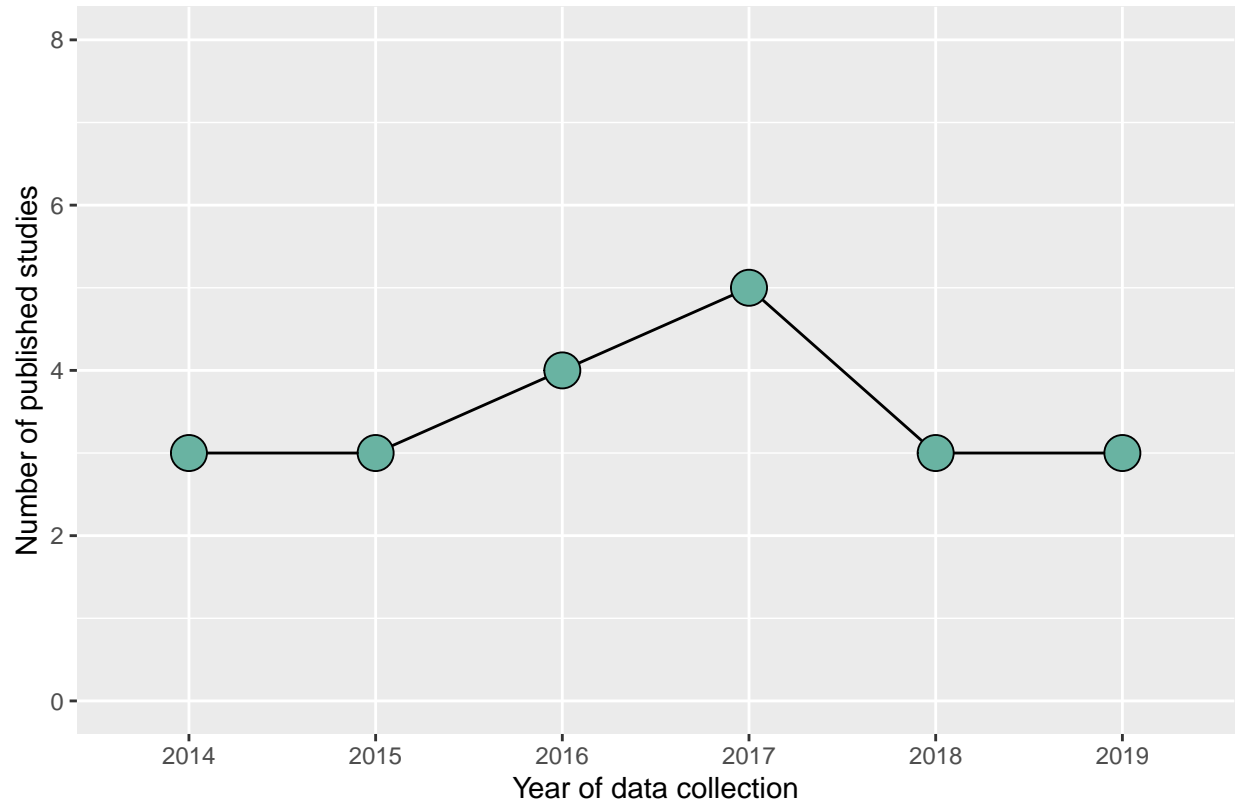


Figure 1

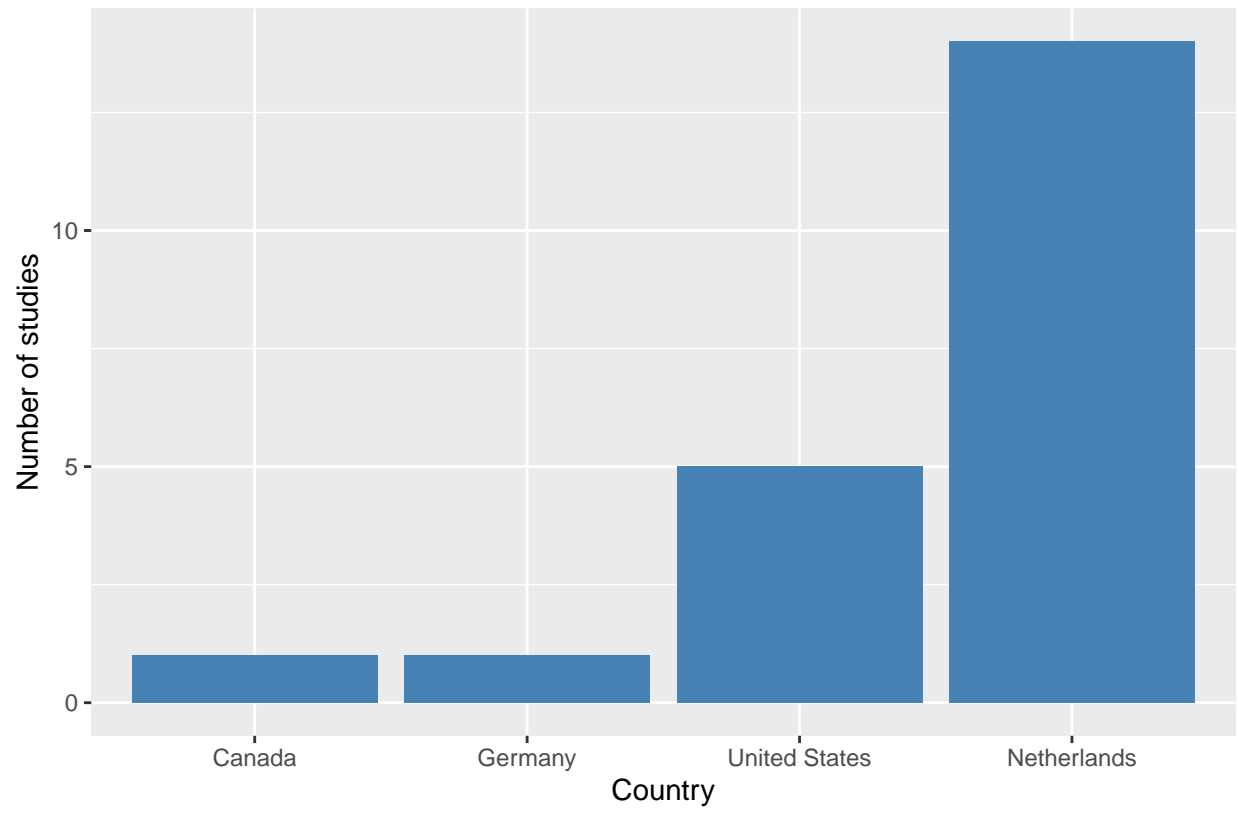


Figure 2

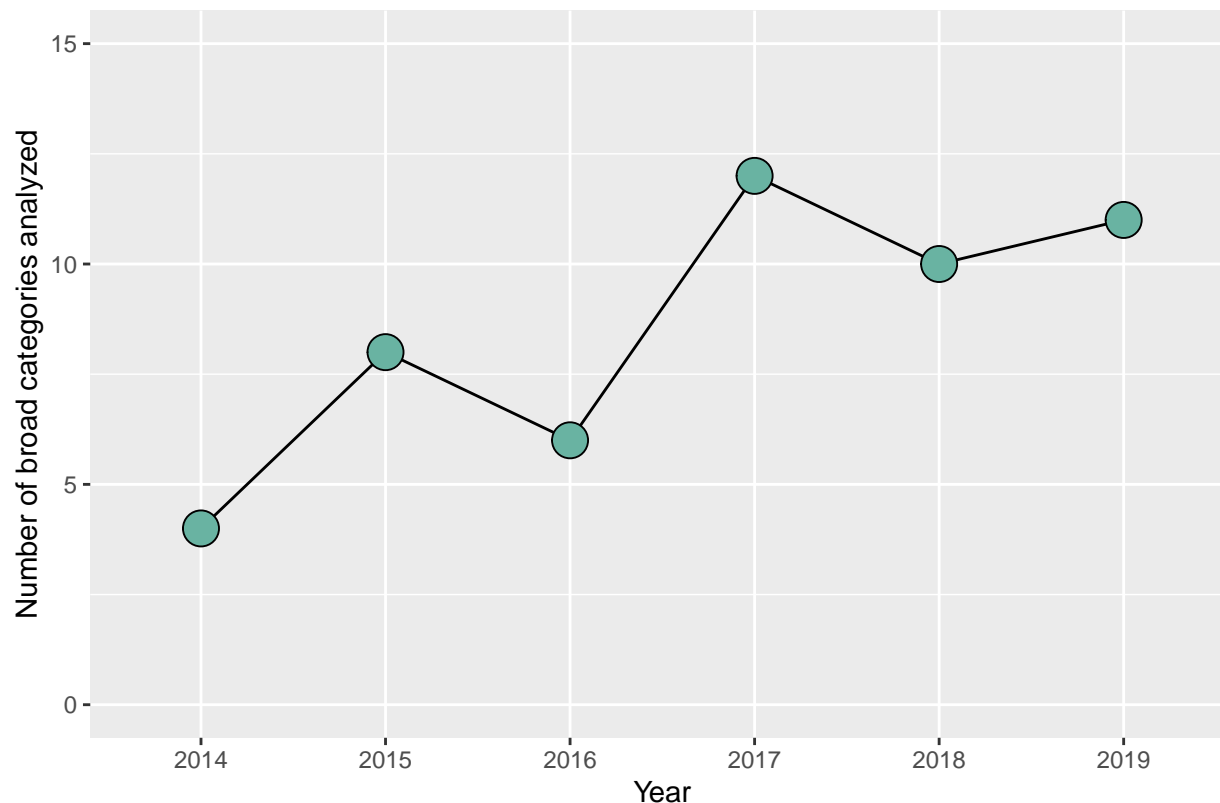


Figure 3

From 2014 to 2019, the health outcomes most commonly described are grouped within the broad group of lower respiratory conditions and include symptoms and diseases such as: asthma, chronic obstructive pulmonary disease (COPD), difficulty breathing, wheezing, emphysema, pneumonia, bronchitis, fatigue and cough and reduction of lung function (Figure 4). Other health conditions that have been studied can be grouped in broad outcome categories such as: allergies, upper respiratory, psychological, cardiovascular, neurological and gastrointestinal and infectious. Since 2011 other categories that also have been analyzed include: sleep disorders, osteoarticular, autoimmune, dermatological, blood disorder and metabolic disorders (For more detail about conditions and symptoms presented in each category from 2014 to 2019 see table 2). This multiplicity in outcomes coincides with the changes that have occurred over the years regarding the focus on particular health outcomes. For example, a few years ago, most research focused on the effects produced in the respiratory system but recently researches have investigated the role played by proximity to facilities with the antimicrobial resistance (AMR).

From 2014 to date, 1637 different outcome / exposure combinations were identified in 20 relevant publications. Although there are multiple ways to establish and measure exposition to animal feeding operations, these can be grouped in broader categories which include: emissions, animal and farm density, distance to the nearest CAFO, odors and type of CAFO (swine, poultry, cattle etc.)(Figure 5). For the emission category the measure included dust emissions, ammonia (NH<sub>3</sub>) and particulate matter (PM<sub>10</sub>).

To sum up, it is possible to appreciate a growth in the number of studies published during the last seven years as well as a growing trend to explore more health outcomes in these studies.

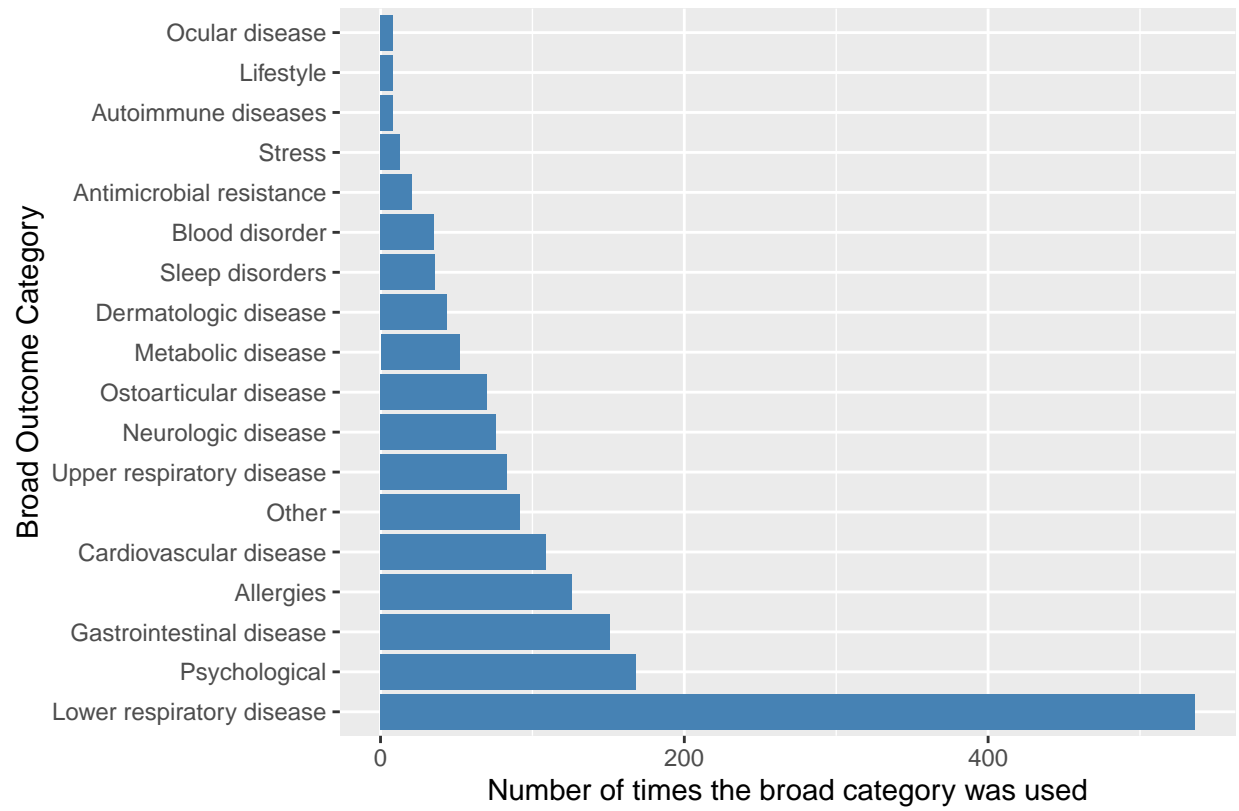


Figure 4

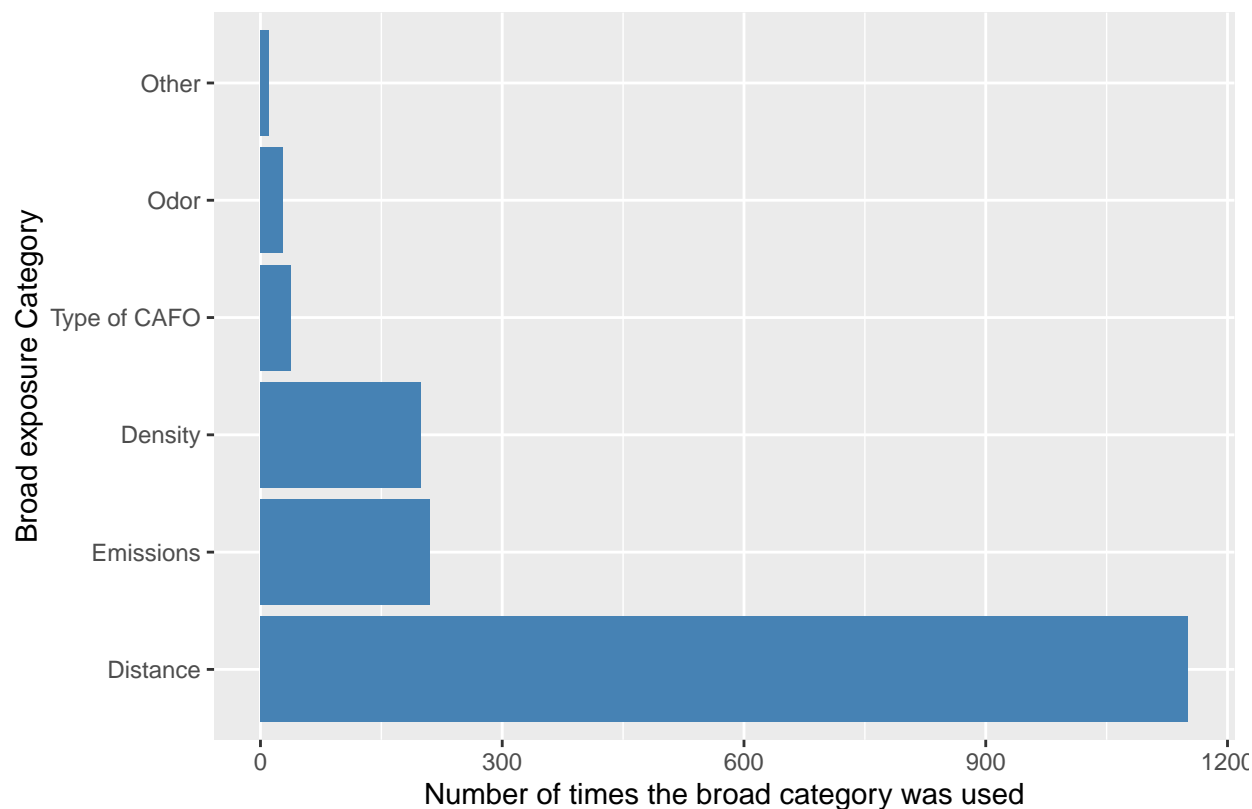


Figure 5

## Material and methods

### Study designs eligible

Eligible studies for this update were all types of observational studies reporting any health outcome or measures of the resistance of resident (colonized) bacterial populations measured directly on human subjects. Eligible studies must include more than one unit of measurement of exposure (e.g., more than one farm per exposure group) to be included because of concerns about confounding. Additionally, studies where the unit of measurement of the outcome was a population aggregate were excluded. The populations of interest were humans living in communities near and not near animal-feeding operations that might reasonably be described as industrial. This criterion excludes studies that assess the impact of occupational exposure to livestock. Production systems that appeared to be grass-based, nomadic, or confined smallholder operations were not relevant to the update. Studies and outcomes that related to environment such as air, water, and soil or built environment were not eligible. Animal models of human disease were not eligible because it is unclear how an animal model of human disease would accurately reproduce short- and long-term effects of exposure to AFOs.

### Information sources and search

The MEDLINE® databases was searched. Eligible studies reported exposure to an AFO and an individual-level human health outcome. Two reviewers performed study selection and data extraction. The syntax used in the latest systematic review was used here limiting the time from 2014 to 2020. The strategy comprised two concepts animal feeding operations and community health. Studies that only reported animal health outcomes were excluded.

## Study selection

763 studies were obtained and uploaded into online systematic review software (DistillerSR®, Ottawa, ON, Canada). During Level 1 screening, the following question to assess the relevance of citation abstracts and titles was used:

1. Does the title and/or abstract describe primary research reporting the association between livestock (intensive- not pastoral) and human interactions (direct or indirect) and measures of human health measured on humans?

Citations were excluded if the reviewer answered “no” to this question. 50 studies passed Level 1 and progressed to Level 2. The following questions to assess each article retained after the full-text evaluation were used:

1. Does the study use a unit of analysis at the individual human level in the community (but not occupational, such as farm worker)?
2. Does the study include more than one unit of measurement of exposure?

The study was excluded if the reviewer answered “no” to either question. If the reviewer answered “yes” to both questions, the study progressed to the data extraction. Finally, 20 studies passed Level 2 and passed to the extraction of information.

## Data collection process

For each of the 21 studies, the reviewer extracted the study year, the study population’s location (country), the reported health outcome measures as well as the measure used to assess the exposure to animal feeding operations. Subsequently, these outcomes and exposures were categorized into broad categories in order to summarize and get some descriptive information.

Table 1: Number of times broad category was combined by years

	2014	2015	2016	2017	2018	2019
Allergies	12	23	12	37	0	42
Antimicrobial resistance	21	0	0	0	0	0
Autoimmune diseases	0	0	0	0	8	0
Blood disorder	0	0	0	17	0	18
Cardiovascular disease	0	0	0	65	8	36
Dermatologic disease	0	0	6	22	16	0
Gastrointestinal disease	3	7	12	71	40	18
Lifestyle	0	0	0	0	8	0
Lower respiratory disease	24	127	48	201	22	114
Metabolic disease	0	0	0	34	0	18
Neurologic disease	0	3	0	55	0	18
Ocular disease	0	0	0	0	8	0
Ostoarticular disease	0	0	0	34	0	36
Other	0	0	70	0	22	0
Psychological	0	2	0	71	41	54
Sleep disorders	0	1	0	17	0	18
Stress	0	13	0	0	0	0
Upper respiratory disease	0	1	21	37	6	18

Table 2: Health outcomes grouped into broad categories

Broad Category	Outcome variable	Reference
Allergies	Allergic conjunctivitis	Hooiveld et al. 2016
Allergies	Allergic rhinitis	Dijk et al. 2017
Allergies	Allergic rhinitis	Smit et al. 2014
Allergies	Allergic rhinitis/Hay fever	Baliatsas et al. 2017
Allergies	Allergic rhinitis/Hay fever	Baliatsas et al. 2019
Allergies	Allergic rhinitis	Dijk et al. 2017
Allergies	Current allergies	Schultz et al. 2019
Allergies	Hay fever	Hooiveld et al. 2016
Allergies	Lung Allergies	Schultz et al. 2019
Allergies	Nasal allergies	Borlee et al. 2015
Allergies	Nasal Allergies	Schultz et al. 2019
Allergies	Nasal or Lung Allergies & Current allergies	Schultz et al. 2019
Antimicrobial resistance	Methicillin resistant Staphylococcus aureus nasal carriage	Schinasi et al. 2014
Autoimmune diseases	Chronic/long-term diseases: autoimmune diseases	Star et al. 2018
Blood disorder	Anemia	Baliatsas et al. 2017
Blood disorder	Anemia	Baliatsas et al. 2019
Cardiovascular disease	Atherosclerosis	Baliatsas et al. 2017
Cardiovascular disease	Chronic/long-term diseases of the cardiovascular system	Star et al. 2018
Cardiovascular disease	Coronary heart disease	Baliatsas et al. 2017
Cardiovascular disease	Heart disease (risk) cluster	Baliatsas et al. 2019
Cardiovascular disease	Heart failure	Baliatsas et al. 2017
Cardiovascular disease	Hypertension	Baliatsas et al. 2017
Cardiovascular disease	Hypertension	Baliatsas et al. 2019
Dermatologic disease	Atopic eczema	Hooiveld et al. 2016
Dermatologic disease	Chronic/long-term diseases of the skin	Star et al. 2018
Dermatologic disease	Constitutional eczema	Dijk et al. 2017
Dermatologic disease	Infections of the skin	Star et al. 2018
Dermatologic disease	Vertiginous syndrome	Dijk et al. 2017
Gastrointestinal disease	Acute children gastroenteritis	Levallois et al. 2014
Gastrointestinal disease	Campylobacter	Poulsen et al. 2018
Gastrointestinal disease	Chronic enteritis	Hooiveld et al. 2016
Gastrointestinal disease	Chronic enteritis/ulcerative colitis	Dijk et al. 2017
Gastrointestinal disease	Chronic/long-term diseases of the GI-tract	Star et al. 2018
Gastrointestinal disease	Clostridium difficile colonization	Zomer et al. 2017
Gastrointestinal disease	Diarrhoea	Hooiveld et al. 2015
Gastrointestinal disease	E. coli	Poulsen et al. 2018
Gastrointestinal disease	Gastro-intestinal infections	Dijk et al. 2017
Gastrointestinal disease	Gastroenteritis presumed infection	Hooiveld et al. 2016
Gastrointestinal disease	Gastrointestinal infection	Hooiveld et al. 2016
Gastrointestinal disease	Gastrointestinal symptoms	Hooiveld et al. 2015
Gastrointestinal disease	GERD	Baliatsas et al. 2017
Gastrointestinal disease	GERD	Baliatsas et al. 2019
Gastrointestinal disease	Infections of the GI-tract	Star et al. 2018
Gastrointestinal disease	Infectious Diarrhea	Poulsen et al. 2018
Gastrointestinal disease	inflammatory bowel disease	Kalkowska et al. 2018
Gastrointestinal disease	Nauseous	Hooiveld et al. 2015
Gastrointestinal disease	Non-Specific Diarrhea	Poulsen et al. 2018
Gastrointestinal disease	Obstipation	Hooiveld et al. 2015
Gastrointestinal disease	Reflux/gastric acid	Hooiveld et al. 2015
Gastrointestinal disease	Salmonella	Poulsen et al. 2018



Broad Category	Outcome variable	Reference
Gastrointestinal disease	Stomach ache (pain in belly)	Hooiveld et al. 2015
Gastrointestinal disease	Stomach complaints	Hooiveld et al. 2015
Lifestyle	Lifestyle: weight and diet	Star et al. 2018
Lower respiratory disease	Asthma	Dijk et al. 2017
Lower respiratory disease	Asthma	Hooiveld et al. 2016
Lower respiratory disease	Asthma	Smit et al. 2014
Lower respiratory disease	Asthma Emergency Department Visits	Rasmussen et al. 2017
Lower respiratory disease	Asthma Episode in last 12 months	Schultz et al. 2019
Lower respiratory disease	Asthma Hospitalizations	Rasmussen et al. 2017
Lower respiratory disease	Asthma medication in last 12 months	Schultz et al. 2019
Lower respiratory disease	Asthma symptoms /Limitation of activities	Loftus et al. 2015
Lower respiratory disease	Asthma symptoms /Nighttime waking	Loftus et al. 2015
Lower respiratory disease	Asthma symptoms /Shortness of breath	Loftus et al. 2015
Lower respiratory disease	Asthma symptoms /Symptoms worse in morning	Loftus et al. 2015
Lower respiratory disease	Asthma symptoms /Use of short-acting “relief” medication	Loftus et al. 2015
Lower respiratory disease	Asthma symptoms /Wheezing	Loftus et al. 2015
Lower respiratory disease	Chronic bronchitis/bronchiectasis	Dijk et al. 2017
Lower respiratory disease	Chronic/long-term diseases of the airways	Star et al. 2018
Lower respiratory disease	Cold/flu	Hooiveld et al. 2015
Lower respiratory disease	Community-acquired pneumonia (CAP)	Kalkowska et al. 2018
Lower respiratory disease	COPD	Borlee et al. 2015
Lower respiratory disease	COPD	Hooiveld et al. 2016
Lower respiratory disease	COPD	Smit et al. 2014
Lower respiratory disease	Cough	Hooiveld et al. 2015
Lower respiratory disease	Current asthma	Borlee et al. 2015
Lower respiratory disease	Current asthma	Schultz et al. 2019
Lower respiratory disease	Doctor Diagnosed Asthma	Schultz et al. 2019
Lower respiratory disease	Emphysema /COPD	Dijk et al. 2017
Lower respiratory disease	Emphysema/COPD	Dijk et al. 2017
Lower respiratory disease	Exacerbations in Asthma	Dijk et al. 2017
Lower respiratory disease	Exacerbations in COPD	Dijk et al. 2017
Lower respiratory disease	Fatigue	Hooiveld et al. 2015
Lower respiratory disease	FEV1 evening (ml)	Kersen et al. 2020
Lower respiratory disease	FEV1 morning (ml) / forced expiratory volume	Kersen et al. 2020
Lower respiratory disease	FEV1%	Loftus et al. 2015
Lower respiratory disease	FEV1% predicted	Schultz et al. 2019
Lower respiratory disease	FEV1/FVC ratio	Schultz et al. 2019
Lower respiratory disease	Infections of the airways	Star et al. 2018
Lower respiratory disease	Influenza	Hooiveld et al. 2016
Lower respiratory disease	Lower respiratory tract infections	Dijk et al. 2017
Lower respiratory disease	Lung cancer	Baliatsas et al. 2017
Lower respiratory disease	Lung cancer	Baliatsas et al. 2019
Lower respiratory disease	New Asthma OCS (oral corticosteroid) Ordersl	Rasmussen et al. 2017
Lower respiratory disease	PEF evening (l/min)	Kersen et al. 2020
Lower respiratory disease	PEF morning (l/min) / peak expiratory flow	Kersen et al. 2020
Lower respiratory disease	pneumonia	Freidl et al. 2017
Lower respiratory disease	Pneumonia	Baliatsas et al. 2017
Lower respiratory disease	Pneumonia	Baliatsas et al. 2019
Lower respiratory disease	Pneumonia	Dijk et al. 2017
Lower respiratory disease	Pneumonia	Hooiveld et al. 2016
Lower respiratory disease	Respiratory symptoms	Baliatsas et al. 2017
Lower respiratory disease	Respiratory symptoms	Baliatsas et al. 2019

Broad Category	Outcome variable	Reference
Lower respiratory disease	Respiratory symptoms	Dijk et al. 2017
Lower respiratory disease	Respiratory symptoms	Hooiveld et al. 2015
Lower respiratory disease	Shortness of breath/difficulty breathing	Hooiveld et al. 2015
Lower respiratory disease	Wheezing or whistling on chest in last 12 months / COPD	Borlee et al. 2015
Lower respiratory disease	Wheezing or whistling on chest in last 12 months / Current asthma	Borlee et al. 2015
Lower respiratory disease	Wheezing or whistling on chest in last 12 months /Nasal allergies	Borlee et al. 2015
Metabolic disease	Diabetes mellitus	Baliatsas et al. 2017
Metabolic disease	Diabetes mellitus	Baliatsas et al. 2019
Metabolic disease	Hyperlipidemia	Baliatsas et al. 2017
Neurologic disease	Dizziness	Hooiveld et al. 2015
Neurologic disease	Dizziness/Vertigo	Baliatsas et al. 2017
Neurologic disease	Dizziness/Vertigo	Baliatsas et al. 2019
Neurologic disease	Headache	Hooiveld et al. 2015
Neurologic disease	Neurological symptoms	Hooiveld et al. 2015
Neurologic disease	Vertiginous syndrome	Dijk et al. 2017
Neurologic disease	Vertigo/dizziness	Dijk et al. 2017
Ocular disease	Infections of the eye	Star et al. 2018
Ostoarticular disease	Osteoporosis	Baliatsas et al. 2017
Ostoarticular disease	Osteoporosis	Baliatsas et al. 2019
Ostoarticular disease	Rheumatoid arthritis	Baliatsas et al. 2017
Ostoarticular disease	Rheumatoid arthritis	Baliatsas et al. 2019
Other	All contacts ( primary health care visits)	Dijk et al. 2016
Other	Contacts for acute respiratory infections	Dijk et al. 2016
Other	Contacts for respiratory diagnoses	Dijk et al. 2016
Other	Contacts for respiratory symptoms	Dijk et al. 2016
Other	Diagnosis /Other infectious disease	Hooiveld et al. 2016
Other	Infections of the urinary tract	Star et al. 2018
Other	Lower back pain	Kalkowska et al. 2018
Other	Neoplasms: cancer	Star et al. 2018
Other	Other infectious disease	Hooiveld et al. 2016
Psychological	Acute psychological and social disorders	Star et al. 2018
Psychological	Acute psychological and social problems	Star et al. 2018
Psychological	Anxiety	Baliatsas et al. 2017
Psychological	Anxiety	Baliatsas et al. 2019
Psychological	Anxiety and depression	Star et al. 2018
Psychological	Anxiousness	Hooiveld et al. 2015
Psychological	Depression	Baliatsas et al. 2017
Psychological	Depression	Baliatsas et al. 2019
Psychological	Depression	Dijk et al. 2017
Psychological	IBD patients/Acute somatic symptoms: symptoms of the GI-tract	Star et al. 2018
Psychological	IBD patients/Total acute somatic symptoms/ MUPS	Star et al. 2018
Psychological	IBD patients/Total infections	Star et al. 2018
Psychological	Memory/Concentration problem	Baliatsas et al. 2019
Psychological	Memory/Concentration problems	Baliatsas et al. 2017
Psychological	Memory/Concentration problems	Baliatsas et al. 2019
Psychological	Sadness	Hooiveld et al. 2015
Sleep disorders	Sleep problems	Baliatsas et al. 2017
Sleep disorders	Sleep problems	Baliatsas et al. 2019
Sleep disorders	Sleeping problems	Hooiveld et al. 2015
Stress	Odour annoyance	Hooiveld et al. 2015
Stress	Stress related symptoms	Hooiveld et al. 2015
Upper respiratory disease	Acute URI	Hooiveld et al. 2016

Broad Category	Outcome variable	Reference
Upper respiratory disease	Acute URI (upper respiratory infection)	Hooiveld et al. 2016
Upper respiratory disease	Laryngitis/tracheitis acute	Hooiveld et al. 2016
Upper respiratory disease	Nasal colonization of Enterobacteriaceae	Kock et al. 2016
Upper respiratory disease	Nasal colonization of non-fermenters	Kock et al. 2016
Upper respiratory disease	Nasal colonization of <i>S. aureus</i>	Kock et al. 2016
Upper respiratory disease	Sinusitis acute/chronic	Hooiveld et al. 2016
Upper respiratory disease	Sore throat	Hooiveld et al. 2015
Upper respiratory disease	Upper respiratory infections	Kalkowska et al. 2018
Upper respiratory disease	Upper respiratory tract infections	Baliatsas et al. 2017
Upper respiratory disease	Upper respiratory tract infections	Baliatsas et al. 2019
Upper respiratory disease	Upper respiratory tract infections	Dijk et al. 2017

Table 3: Exposures grouped into broad categories

Broad Category	Outcome variable
Density	CAFO density region
Density	Cattle density† ( >0.96 AU/ha (Q4) versus <0.96)
Density	Livestock density
Density	Livestock farm density
Density	Number of animals in 500 m radius Cattle (ref = No.)
Density	Number of animals in 500 m radius Pigs (ref = No.)
Density	Number of animals in 500 m radius Poultry (ref = No.)
Density	Number of animals within 1000m of the residence Goats (no tertiles)
Density	Number of animals within 1000m of the residence Poultry (tertiles)
Density	Number of cattle within 500 m
Density	Number of farm animals within 1000 m
Density	Number of farms
Density	Number of farms (any type) within 1000m of residence
Density	Number of livestock farms in 1000 m (quartiles)
Density	One or more farms within 100 m
Density	One or more farms within 500 m
Density	One or more farms within 500 m
Density	One or more farms within 500 m (ref no farms)
Density	Permitted farrowing swine per square mile of block group
Density	Permitted non-farrowing swine per square mile of block group
Density	Permitted swine per square mile of block group
Density	Poultry density† ( >0.10 AU/ha (Q4) versus <0.10)
Density	Residence in area with livestock density of
Density	Swine density( > 0.79 AU/ha (Q4) versus <0.79)
Distance	Distance (quartiles expressed in meters) between residence and closest farm with minimum number of animals
Distance	Distance (quartiles expressed in meters) between residence and closest farm with minimum number of animals
Distance	Distance in meters from patient to nearest Farm
Distance	Distance to general practice
Distance	Distance to nearest farm
Distance	Distance to nearest farm Cattle
Distance	Distance to nearest farm Minks
Distance	Distance to nearest farm Poultry
Distance	Distance to nearest farm Poultry (ref = 1000 m or further)
Distance	Distance to nearest farm Sheep
Distance	Distance to nearest farm Swine (ref = 1000 m or further)
Distance	Distance to nearest farm with poultry

Broad Category	Outcome variable
Distance	Distance to nearest farm with swine
Distance	Distance to the nearest farm
Distance	Distance to the nearest farm
Distance	Distance to the nearest farm
Distance	Distance to the nearest farm
Distance	Distance to the nearest farm (quartiles)
Distance	Live within 1 mile of a concentrated animal feeding operation
Distance	Living within 500 meter of all animals farms
Distance	Living within 500 meter of no animals farms
Distance	Living within 500 meter of pigs farms
Distance	Living within 500 meter of poultry farms
Distance	Poultry operation Activity quantile
Distance	Presence of any type of farm within a certain distance of residence
Distance	Presence of cattle within 500 m
Distance	Presence of farm animals in 1000 m (yes or no)
Distance	Presence of farm animals in 500 m (yes or no)
Distance	Presence of farm animals within 1000 m (yes/no)
Distance	Presence of farm animals within 1000 m (yes/no)
Distance	Presence of farm animals within 500 m Cattle (ref no cattle)
Distance	Presence of farm animals within 500 m Goats (ref no goats)
Distance	Presence of farm animals within 500 m Minks (ref no minks)
Distance	Presence of farm animals within 500 m Poultry (ref no poultry)
Distance	Presence of farm animals within 500 m Sheep (ref no sheep)
Distance	Presence of farm animals within 500 m Swine (ref no swine)
Distance	Presence of farm animals within 500 m (yes/no)
Distance	Presence of farm animals within 500 m (yes/no)
Distance	Presence of farm animals within 500 n
Distance	Presence of farm with minimum amount of animals within 500m-intervals of residence (1000m)
Distance	Presence of farm with minimum amount of animals within 500m-intervals of residence (1500m)
Distance	Presence of farm with minimum amount of animals within 500m-intervals of residence (2000m)
Distance	Presence of farm with minimum amount of animals within 500m-intervals of residence (500m)
Distance	Presence of livestock farms (yes or no)
Distance	Presence of livestock within 500 m Poultry (ref = 0)
Distance	Presence of livestock within 500 m Swine (ref = 0)
Distance	Proximity to industrial food animal production (swine or dairy/veal)
Distance	Proximity to industrial food animal production (swine or dairy/veal)
Distance	Residential distance to farms of one or more livestock categories (0.5, 1.0, 1.5, . . . , 5.0 km)
Distance	Residential distance to farms of one or more livestock categories (Km)
Distance	Residential distance to the nearest CAFO
Emissions	Distance to the nearest farm
Emissions	Distance weighted PM10 emission from farms within 500 m
Emissions	Lag 0 NH3
Emissions	Lag 0 PM10
Emissions	Lag 1 NH3
Emissions	Lag 1 PM10
Emissions	Lag 2 NH3
Emissions	Lag 2 PM10
Emissions	Log-weighted ammonia (NH3) emission
Emissions	Log-weighted ammonia (NH3) emission
Emissions	Log-weighted fine dust emission
Emissions	Log-weighted fine dust emission
Emissions	Modelled fine dust emission from farms

Broad Category	Outcome variable
Emissions	PM 10 emission from within 500 m
Emissions	PM10 Emission from farms within 500 m
Emissions	Weekly ammonia exposure
Odor	Ever have contact with horses
Odor	Ever have contact with pigs, chickens, cows, or turkeys
Odor	Ever have contact with uncooked meat products at work or at home
Odor	Ever smell odor from a farm with animals when at home
Odor	Reporting odour annoyance in neighbourhood
Other	Live in a rural area
Other	Living within 1500m of Q-fever positive farm
Other	Living within 2000m of Q-fever positive farm
Other	Serostatus for <i>Coxiella burnetii</i>
Other	Serostatus for <i>Coxiella burnetii</i> (Q-fever)
Type of CAFO	Type of CAFO (ALL)
Type of CAFO	Type of CAFO (Goat only)
Type of CAFO	Type of CAFO (Poultry only)
Type of CAFO	Type of CAFO (Swine only)

## References

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