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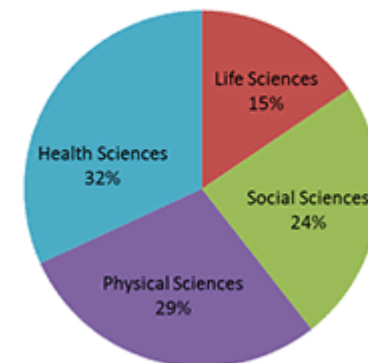
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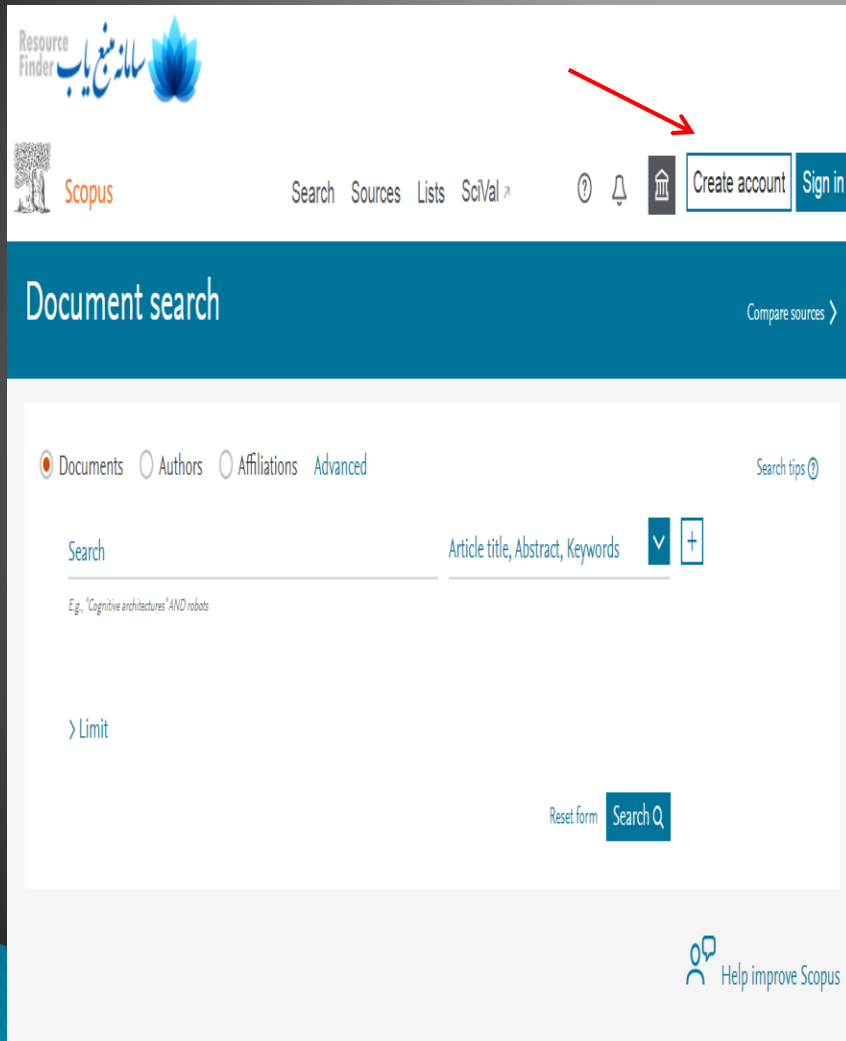
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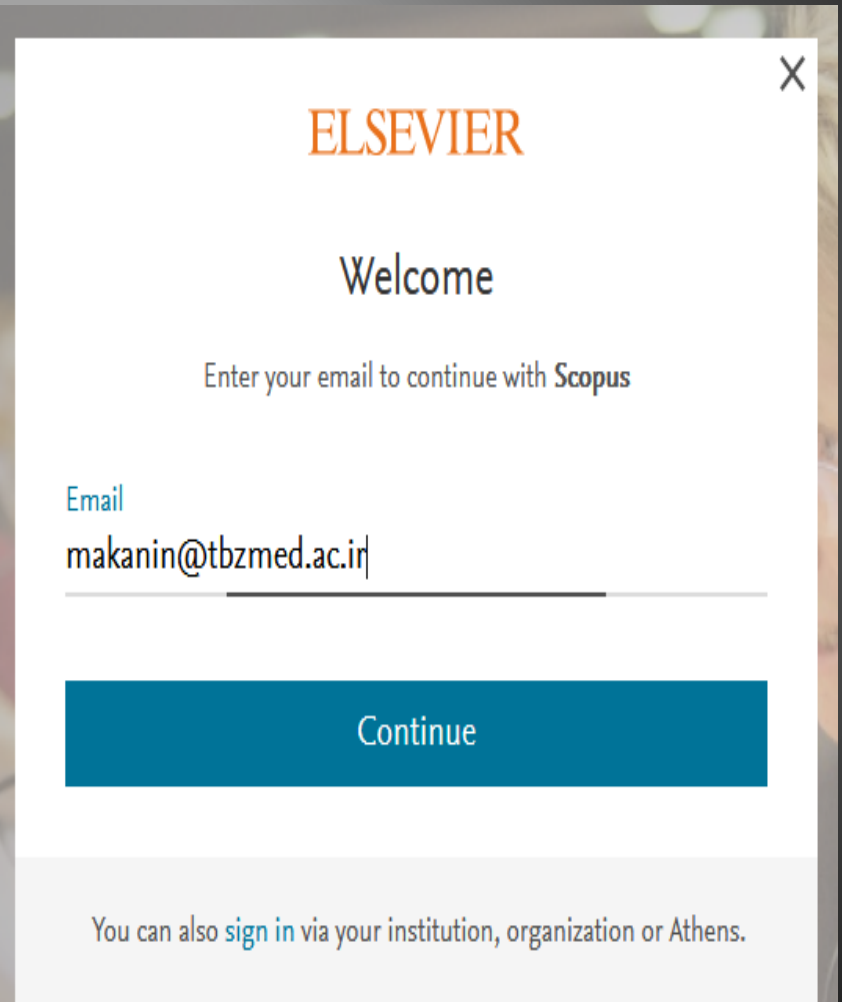
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A.J., Zanobetti, A., (...), Dominici, F., Koutrakis, P.

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☐ 2	[No title available] 	Zeeb, H., Shannoun, F.	2009	WHO Handbook on Indoor Radon	649
☐ 3	Residential radon and risk of lung cancer: A combined analysis of 7 North American case-control studies	Krewski, D., Lubin, J.H., Zielinski, J.M., (...), Weinberg, C., Wilcox, H.B.	2005	Epidemiology 16(2), pp. 137-145	378

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Environment International
Volume 130, September 2019, Article number 104865

County-level radon exposure and all-cause mortality risk among Medicare beneficiaries (Article) (Open Access)

Yitshak-Sade, M.^a , Blomberg, A.J.^a, Zanobetti, A.^a, Schwartz, J.D.^{a,b}, Coull, B.A.^{a,d}, Kloog, I.^c, Dominici, F.^{a,d}, Koutrakis, P.^a

^aExposure, Epidemiology, and Risk Program, Department of Environmental Health, Harvard T.H. Chan School of Public Health, Boston, MA, United States

^cChanning Division of Network Medicine, Department of Medicine, Brigham and Women's Hospital and Harvard Medical School, Boston, MA, United States

^dDepartment of Geography and Environmental Development, Faculty of Humanities and Social Sciences, Ben-Gurion University, Beer-Sheva, Israel

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Background: Radon is an inert gas formed from the decay of naturally-occurring materials in the earth's crust. It infiltrates into homes from soil, water, and construction materials. Its decay products are radionuclides, which associate with ambient particles. Residential radon is one of the leading risk factors for lung cancer. The scarce evidence for associations with other mortality causes originates mostly from occupational studies. Methods: In a cohort study with 14 years of follow-up (2000–2013), we evaluated the association between chronic radon exposure and all-cause mortality, and explored whether there are subpopulations who are more vulnerable to radon effects. We included 87,296,195 person-years of follow-up from all Medicare beneficiaries in the Mid-Atlantic and Northeastern U.S. states. We examined the association between the logarithm of county-averaged radon ($\ln(Rn)$) and mortality and assessed effect modification by chronic conditions. Results: An interquartile range increase in the $\ln(Rn)$ was associated with a 2.62% increase (95% CI 2.52%; 2.73%) in mortality, independent of $PM_{2.5}$ exposure. Larger mortality risks were observed among individuals with respiratory, cardiovascular and metabolic diseases, with

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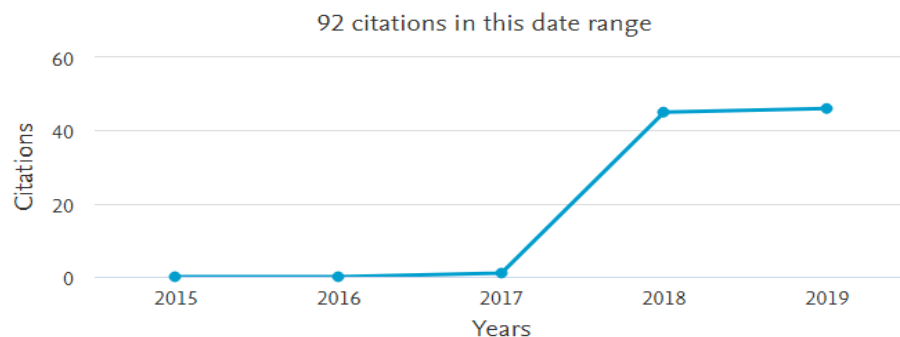
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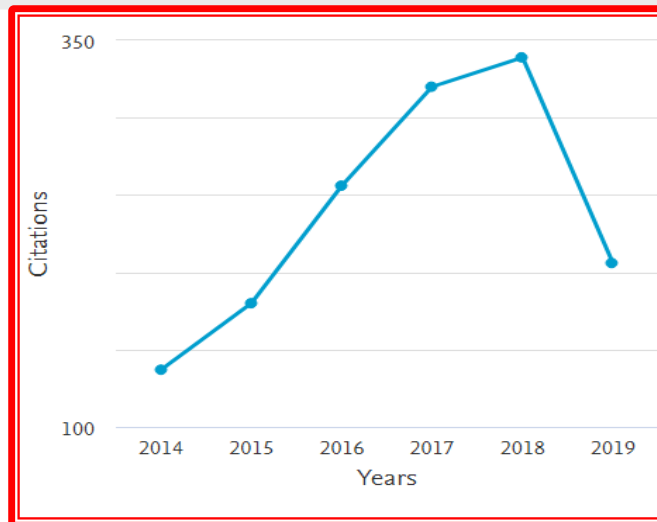


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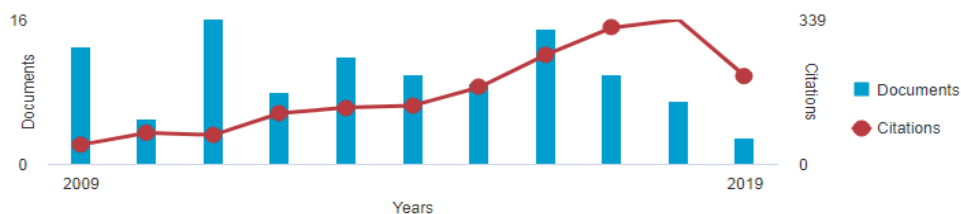
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Advances in nanomaterial based optical biosensing and bioimaging of apoptosis via caspase-3 activity: a review	Khalilzadeh, B., Shadjou, N., Kanberoglu, G.S., (...), Ostadrahimi, A., Rashidi, M.-R.	2018	Microchimica Acta 185(9),434	3
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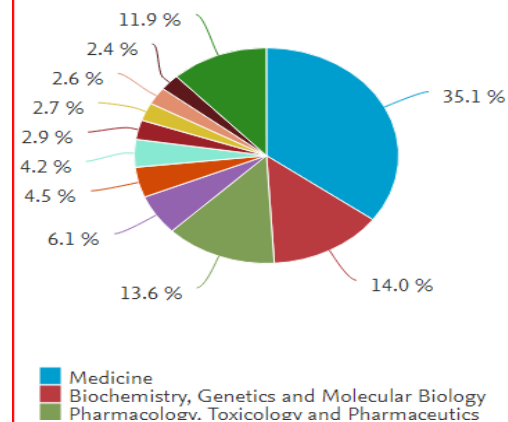
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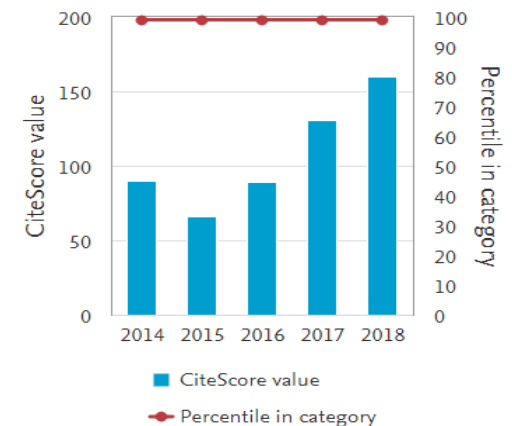


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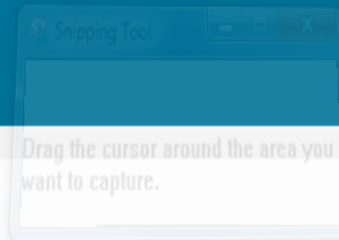
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