



# Human Biological Monitoring of Mercury Through Hair Samples in China

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## Abstract

Mercury (Hg) is a global pollutant that affects environmental and human health. Considering the high toxicity of Hg, it is required to assess the exposure of Hg in human body for appropriate risk management. In this review paper, we summarized data obtained through regional and small-scaled human biomonitoring (HBM) program for Hg in hair samples in China, which can deliver scientific data to make decisions on environmental health policy. Besides, the major conclusions got from this study and perspectives for future works through these HBM program in China were presented. To better understand the current situation of hair Hg levels in China, a well-coordinated and designed national HBM program is urgently needed considering the requirements of the Minamata Convention on Mercury for effectiveness evaluation.

**Keywords** Mercury · Hair samples · China · Human biomonitoring

## Introduction

Human health is significantly impacted by the environment. It was estimated recently by World Health Organization (WHO) that 12.6 million people died due to living or working in contaminated environment in 2012 (Joas et al. 2017; Prüss-Ustün et al. 2017). Mercury (Hg) is a global pollutant that affects environmental and human health (Li et al. 2018). Three different forms of Hg exist in the environment: elemental Hg (Hg<sup>0</sup>), inorganic Hg (Hg<sup>+</sup> and Hg<sup>2+</sup>), and organic (such as methyl, ethyl, and phenyl) mercury. It can cause neurological, hepatic, renal, immunological, cardiovascular, reproductive and genetic damage to animals and human beings (Li et al. 2018). The most adverse impact

of Hg exposure is Minamata Disease, which is due to the prenatal or postnatal exposure to methylmercury (MeHg) in adults and children (Clarkson et al. 2003).

Hg is present in the environment through natural events like volcanic eruptions or anthropogenic activities like metal mining and smelting, and coal-burning. Due to its long-distance travel nature, Hg is ubiquitous and can be found in water, air, and soil. Besides, it can also be found in consumer goods (including some medicines), and food products and people may be exposed to Hg through ingestion, inhalation, and dermal contact (Li et al. 2018).

Considering the high toxicity of Hg, it is required to assess the exposure of Hg in human body for appropriate risk management. Assessment of population exposure to Hg can be achieved through two methodological approaches: (a) environmental monitoring, i.e. analysis of Hg in environmental media and calculation of human exposure according to their intake and (b) measurement of Hg in human body fluids and tissues such as hair, blood, urine or breast milk, i.e. human monitoring (Černá et al. 2017). The assessment of exposure to Hg in human body through environmental monitoring is based on algorithms and/or modeling and concentrations of Hg in environmental media such as water, food, air or products. However, building exposure models requires making many assumptions which introduces uncertainties in exposure estimates (Zidek et al. 2017). On the other hand, human biological monitoring (HBM) provides

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measures of internal exposure and/or effect, integrating all sources and routes of uptake of Hg by direct measurements of biological specimens while environmental monitoring are helpful to identify the contamination sources (Zhang et al. 2017). HBM allows for direct and a more precise assessment of risk of Hg exposure in people, considering individual variability in exposure and kinetics (e.g. absorption, distribution, metabolism and excretion).

National HBM program can provide profiles of chemical exposure like Hg and their temporal trends that are representative at country level. Study designs of such national HBM programs often include data collection of multiple factors from participants such as age, gender, living environment (e.g., urban vs. rural), socioeconomic status (SES), lifestyle habits (e.g., smoking), etc. Countries such as USA, Canada, Germany, France, Belgium, and South Korea, etc have established cross-sectional nationwide HBM surveys and programs to monitor and track the chemicals including Hg and their concentrations within their respective general populations (Choi et al. 2017a). For example, in USA, hundreds of chemicals including Hg have been measured from the general public through National Health and Nutrition Examination Survey (NHANES) (CDC 2015; Yin et al. 2016). In Canada, Canadian Health Measure Survey (CHMS) has been conducted for three cycles since 2007 (Health Canada 2015; Lye et al. 2013). In Korea, the Korean National Environmental Health Survey (KoNEHS) and Environmental Exposure and Health Survey in Children and adolescents (KOrEHS-C) were implemented (Choi et al. 2017b; Park et al. 2016). A more detailed description about these national HBM has been summarized by Choi et al. (2017a).

China is a large producer, emitter and user of Hg (Chai et al. 2011; Feng 2005; Hui et al. 2017; Jiang et al. 2006), therefore, the impact of Hg to the Chinese people is required to be evaluated. Besides, since China has signed and ratified the *Minamata Convention on Mercury* coordinated by United Nations Environment Program (UNEP), it is also required to evaluate the effectiveness of the implementation of the Convention and the check of the compliance with this international agreement (UNEP 2013). To the best of our knowledge, there is still no nationwide HBM program implemented in China to date although the investigation of dietary exposure to different chemicals including Hg has been conducted five times through total diet study (Wu et al. 2018). Total diet study was recommended by WHO as a useful tool for exposure assessment of chemicals and nutritional factors through dietary intake, which can be considered as an environmental monitoring method. However, numerous regional or small-scaled HBM program for Hg have been conducted through different funding sources in China. In this review, we will summarize the data obtained through regional and small-scaled HBM program for Hg in hair

samples in China, which can deliver useful scientific data to inform environmental health policy decision. Besides, the major conclusions got from these studies and perspectives for future works through these HBM program in China will also be presented.

## Human Biological Monitoring of Hg in Hair Samples in China

We searched for information on HBM studies conducted in the Chinese population, excluding studies in occupational settings. Relevant sources were a literature review by PubMed search using key words: mercury; hair; China. Besides, since many works regarding the HBM of Hg was reported in Chinese, we also searched the Chinese literature databases including China Knowledge Resource Integrated Database (KNS), China Science Periodical Database (CSPD), and China Science and Technology Journal Database (CSTJ) using the same key words.

Human hair is a well-established and widely used matrix for measuring Hg exposure of an individual. Comparing to blood and urine, hair has several advantages as it is collected through a non-invasive manner, and contains higher Hg concentrations. Although concerns were raised on the suitability of hair as an appropriate matrix for judging Hg exposure in occupational exposed population like Hg miners, chloralkali workers, or small-scale artisanal gold miners, it is a good indicator for general public for assessment of Hg exposure (Li et al. 2008, 2011). The growth rate of hair (1 cm per month) and the tendency of toxins such as Hg to accumulate in hair make it possible to estimate long-term exposure. In addition, tracing the dynamic changes along hair growing direction provides an insight into average exposure on time-scale ranging from weeks to months. Therefore, human hair was used as a biomarker in many Hg exposure studies.

The Hg levels in hair samples of Chinese people are summarized in Table 1 and Fig. 1 (which represents the mean value of respective regions from Table 1). As can be seen in Table 1 and Fig. 1, among the 34 provinces/regions in China, twenty-four provinces/regions have hair mercury data available in the general public. Besides, the time interval covers 40 years of studies (from 1977 to 2017).

As can be seen from Table 1 and Fig. 1, reports on hair Hg levels in 24 provinces, special administrative regions and autonomous regions in China are summarized, which includes inland cities, coastal cities, suburbs, riverside and lakeside cities (Li et al. 2018). It can be seen that the hair levels of Hg in the general public are generally below 1 mg/kg, which is the US EPA recommended reference level for human beings although Chengdu, Harbin and Taiyuan see hair Hg levels over 1 mg/kg. Among the reported inland residents (with samples size over 10, 000), about

**Table 1** Hg levels in hair samples in general Chinese population (mg/kg)

Region	Population	Sample size	Average	Median	Range	References
Anhui	Residents	110	0.48 ± 0.90	0.19	0.01–6.14	Niu et al. (2016)
Beijing	Mother–baby pair	27	0.59 ± 0.23 (mothers) 0.66 ± 0.31 (babies)			Feng et al. (1994)
	Mother–baby pair	60	0.36 (GM, mothers)			Zhang et al. (2005)
	Urban residents	120	0.46		0.17–1.63	Yin et al. (1980)
Fujian	Suburban residents	133	0.35		0.08–1.66	Yin et al. (1980)
	Residents	211		1.80	0.04–9.58	Chen et al. (1993)
	Mother–baby pair	48	0.68 ± 0.53 (mothers) 0.56 ± 0.30 (babies)		0.13–2.81 0.09–1.34	Yang (2011)
Guangdong	Zhanjiang fishermen	78	1.80 ± 0.93			Tian (2011)
	Zhanjiang residents	50	0.63 ± 0.18			Tian (2011)
	Guangzhou residents	72	0.78 ± 0.22			Tian (2011)
	Zhuhai residents	52	0.57 ± 0.19			Tian (2011)
	Shenzhen residents	13	0.71 ± 0.15			Tian (2011)
Guizhou	Guiyang residents	209			ND–3.50	Yang and Chen (1987)
Hainan	Coastal children	94	0.80 ± 0.65		0.06–4.20	Liu et al. (2014)
	Coastal adults	83	1.02 ± 0.92		0.18–4.81	Liu et al. (2014)
Hebei	Shijiazhuang residents (20–50 years)	324	0.46 (GM)		ND–3.00	Wu et al. (1982)
	Qinhuangdao fishermen	100	1.91			Yin et al. (1981)
	Qinhuangdao farmers	100	0.43			Yin et al. (1981)
Henan	Residents (4.5–64 years)	154		0.41	ND–4.90	Chen and Wang (1978)
	Kaifeng and Jiaozuo residents	101	0.19 ± 0.17 (GM)		0.07–1.42	Niu et al. (2012)
	Lingbao farmers around gold smelting area	47	1.05			Ba et al. (1996)
	Lingbao farmers at control areas	40	0.51			Ba et al. (1996)
Heilongjiang	Haerbin residents	362	1.69		0.11–36.40	Feng et al. (1998)
Hubei	Huangshi Residents (15–60 years)	834		0.53	0.02–2.70	Li and Zhou (1993)
Hong Kong	Female	35	1.57			Dickman et al. (1998)
	Male	166	3.97			Dickman et al. (1998)
	Vegetarians	16	0.38 ± 0.49			Dickman et al. (1998)
	Fertile (17–72 years)	94	3.33			Dickman et al. (1999)
	Male subfertile (17–72 years)	117	4.23			Dickman et al. (1999)
	Vegetarians (22–61 years)	45	1.21 ± 0.49			Dickman et al. (1999)
Jilin	Changchun residents	839	0.45(GM)			Department of Hygiene of Jilin Medical University et al. (1977)
	Changchun children (0–10 years)	81	0.77 ± 0.49			Department of Hygiene of Jilin Medical University et al. (1977)
	Changchun residents	140	0.45		0.09–10.46	Li et al. (2006)
Jiangsu	Suzhou children (1–12 years)	60	0.85 (GM)		0.14–3.75	Zhang (2003)
	Suzhou adults (23–68 years)	60	0.95		0.42–9.45	Zhang (2003)
	Wujiang neonates	2321	0.24 (GM)			Song et al. (2013)
	Wujiang pregnant women	303	0.49 ± 0.002			Cai et al. (2014)
	Wujiang mother–infant pair	213	0.61 ± 0.39 (mothers) 0.29 ± 0.18 (infants)		0.10–2.20 0.03–0.85	Guo et al. (2013)
	Lianyungang fishermen	100	2.88			Yin et al. (1981)
	Lianyungang farmers	100	0.44			Yin et al. (1981)

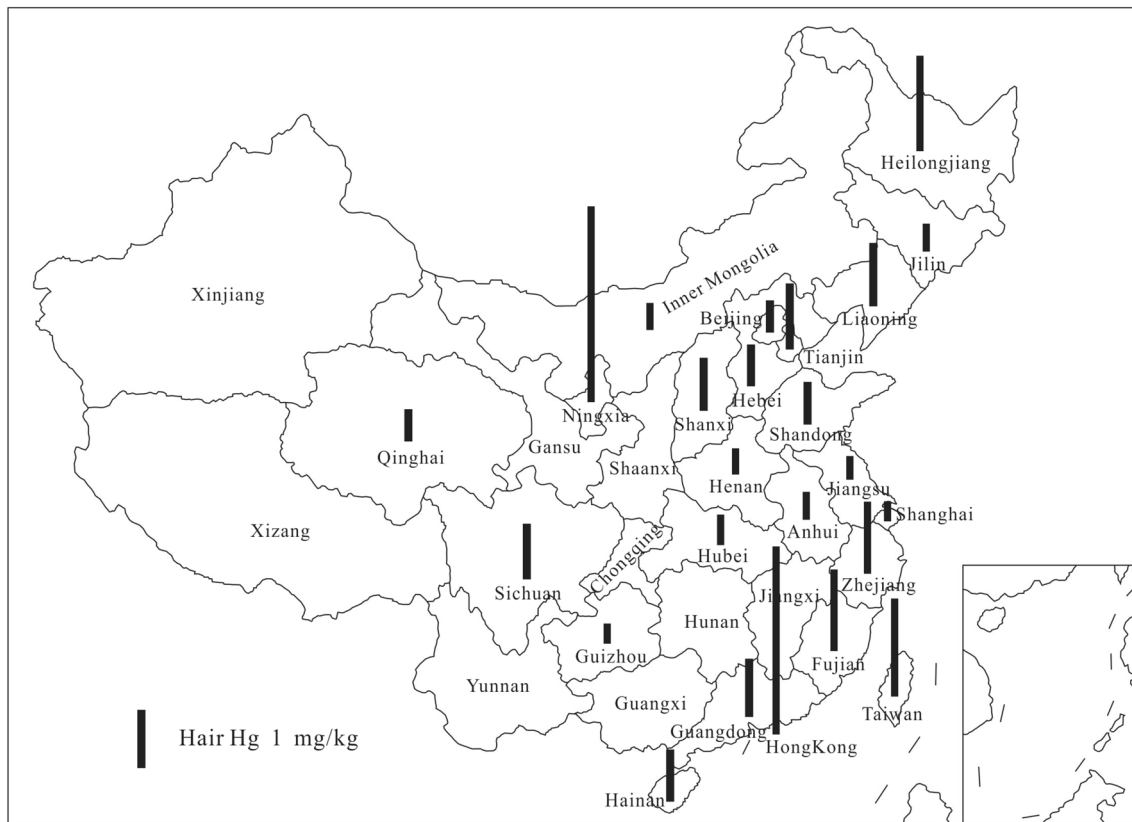
**Table 1** (continued)

Region	Population	Sample size	Average	Median	Range	References
Liaoning	Shenyang mother–child pair	58	0.71 ± 0.28 (children) 0.68 ± 0.28 (mothers)		0.10–1.58 0.10–1.60	Dong et al. (2002)
	Dalian residents	174	0.46 ± 0.28 (GM)		0.04–6.62	Niu et al. (2014)
	Jinzhou fishermen	100	3.3 (GM)			Yin et al. (1981)
	Jinzhou farmers	100	0.29			Yin et al. (1981)
Inner Mongolia	Hohhot residents (15–60 years)	417		0.52	0.02–2.70	Liu and Li (1991)
	Baotou residents	207		0.35	0.1–1.13	Kang et al. (1994)
Ningxia	Qingtongxia fishermen	13	6.73		1.55–16.9	Zhang et al. (1988)
	Xiji residents	13	0.22		ND–1.45	Zhang et al. (1988)
Qinghai	Qinghai lake fishermen (23–58 years)	74	1.59 ± 0.65	1.88	0.31–4.55	Xu and Mo (1981)
	Xining residents	543	0.41 ± 0.42	0.26	ND–2.10	Xu and Mo (1981)
Shandong	Qingdao	103	0.13 (GM)		0.02–4.24	Zhang (2009)
		40	0.47		0.09–12.19	
		40	0.30		0.09–0.86	
		40	0.80		0.12–28.75	
	Qingdao fishermen	100	2.30			Yin et al. (1981)
	Qingdao farmers	100	0.47			Yin et al. (1981)
	Jining fishermen	101	1.04 ± 1.05	0.81	0.03–6.70	Feng and Han (1988)
	Jining farmers	92	0.17 ± 0.22	0.12	0.01–1.08	Feng and Han (1988)
Shanxi	Taiyuan residents	143		0.2	ND–0.66	Cao (2002)
	Taiyuan adults	503	1.05	0.81	ND–6.20	Department of Environmental Hygiene (1980)
	Taiyuan children	164	1.15	0.79	ND–5.40	Department of Environmental Hygiene (1980)
Shanghai	Residents (0–92 years)	492	0.53	0.42	0.04–9.73	Song (2010)
	Preschool children	1982	0.29			Yan et al. (2017)
Sichuan	Chengdu residents	238	1.42 ± 1.57	1.34		Wang and Zhang (1981)
	Luzhou mother–baby pair	123	0.10 ± 0.07 (mothers) 0.20 ± 0.16 (babies)			Chen et al. (2004)
Taiwan	Women (31.3 ± 10.7 years)	263	1.73 ± 2.12		0.02–16.34	Chien et al. (2010)
Tianjin	Tanggu fishermen	100	1.54			Yin et al. (1981)
	Tanggu farmers	100	0.79			Yin et al. (1981)
Zhejiang	Ningbo residents	262	1.18 ± 0.62		0.22–5.79	Song et al. (2007)
	Hangzhou residents	357		1.43	ND–7.2	Shao (1977)
	Hangzhou farmers	143		1.10	ND–2.5	Shao (1977)
	Hangzhou fishermen	48			0.9–15.2	Shao (1977)
	Zhoushan mothers	405	1.25 (GM)			Gao et al. (2007)
	Zhoushan pregnant women	3109	1.27	1.09	0.04–17.19	Wang et al. (2010)

GM geometric mean, ND not detected

17% is over 1 mg/kg. When considering the levels of Hg in hair samples in coastal/riverside city residents (with samples size over 10,000, too), most of them are over 1 mg/kg like people in Zhejiang, Ningxia, and Hong Kong, which could be ascribed to the fish consumption in these people. When comparing the hair Hg levels with other Asian countries, it can be seen that it is in a relatively low levels of

hair Hg in China (Li et al. 2018). This may be ascribed to the low consumption of fishes and other marine foods in China. Besides, the Hg levels in fishes in China are generally low because fishes consumed in China are mostly from aquaculture and the fishes have very short food chain, thus the chances of bioaccumulation of high levels of Hg, especially MeHg are rare (Liu et al. 2018; Xu and Wang 2017).



**Fig. 1** Hg levels in hair samples from general population in different regions in China, in which the data is the mean value of respective regions from Table 1

## Conclusions and Perspectives

In all, the hair levels of Hg in the general population were generally below 1 mg/kg, which is the US EPA recommended reference level for human beings. However, it should also be noticed that the levels of Hg in hair samples in some coastal and lakeside cities exceeded the reference level of 1 mg/kg, which may be ascribed to frequent consumption of fishes and other aquacultural foods.

There is still no nationwide HBM program implemented in China to date. To better understand the current situation of Hg levels in China, a well-coordinated and designed national HBM program is urgently necessary considering the requirements of the Minamata Convention on Mercury for effectiveness evaluation.

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