## The Medical Journal of Australia • MJA MEDIA RELEASE

## HEALTH IMPACTS OF PRESCRIBED BURN-OFFS SIGNIFICANT BUT NOT WELL APPRECIATED

EMBARGOED UNTIL 12:01am Monday 20 April 2020

WHILE prescribed burning of landscapes reduces the risk of bushfires, the health impacts are not widely appreciated and need to be better incorporated into the risk management of burn-off activities, according to the authors of research published online today by the *Medical Journal of Australia*.

Nicholas Borcers, a PhD candidate at the Menzies Institute for Medical Research at the University of Tasmania, and colleagues analysed National Environment Protection Measure reports for Western Australia which identified days during 1 January 2002 – 31 December 2017 on which atmospheric particulate matter levels exceeded air quality standard levels, and classified them according to the most frequently reported sources of pollution: prescribed burns, wildfires, and other (crustal particles such as dust, wood smoke, and indeterminate).

During 2002–2017, particulate air pollution exceeded the national standard on 271 of 5844 days (4.6%), including 197 days (73%) attributable to prescribed burns or wildfires.

"We estimated that 41 premature deaths, 99 hospitalisations for cardiovascular problems and 174 for respiratory conditions, and 123 emergency department visits with asthma were attributable to elevated  $PM_{2.5}$  (particulate matter less than 25  $\mu$ g/m³) concentration," Borchers and colleagues wrote.

"Total estimated health costs were \$188.8 million; \$97.1 million (51%) was attributable to prescribed burns and \$77.7 million (41%) to wildfires. Mean estimated health costs were lower on days affected by smoke from prescribed burns (\$703 984) than those affected by wildfire smoke (\$1.3 million), although more days were affected by prescribed burns (138) than by wildfires (59).

"The estimated smoke-related costs of wildfires were highest in 2012 (\$24.8 million); in many years, prescribed fires often accounted for most health-related costs, peaking in 2017 (\$24.1 million)."

Co-author and fire ecologist, Professor David Bowman said that although the impacts of smoke from individual prescribed fires was much lower than that associated with severe bushfires, their cumulative impacts were similar because of the much greater frequency of prescribed burns.

"While prescribed burning reduces the risk of wildfire, better understanding and incorporation of their full health impacts into strategies for reducing the impact of bushfires are needed for sustainable fire management."

## Please remember to credit The MJA.

The Medical Journal of Australia is a publication of the Australian Medical Association.

The statements or opinions that are expressed in the MJA reflect the views of the authors and do not represent the official policy of the AMA or the MJA unless that is so stated.

CONTACTS: Professor David Bowman

University of Tasmania Ph: 0428 894 500

Email: david.bowman@utas.edu.au