2018 UniSey ANNIVERSARY LECTURE

A 30 year journey of research success

Conrad Shamlaye 17 September 2018



Dedicated to all the Seychellois children and parents who are registered as participants and to all the professional and support staff involved in the Seychelles Child Development Study



we remember



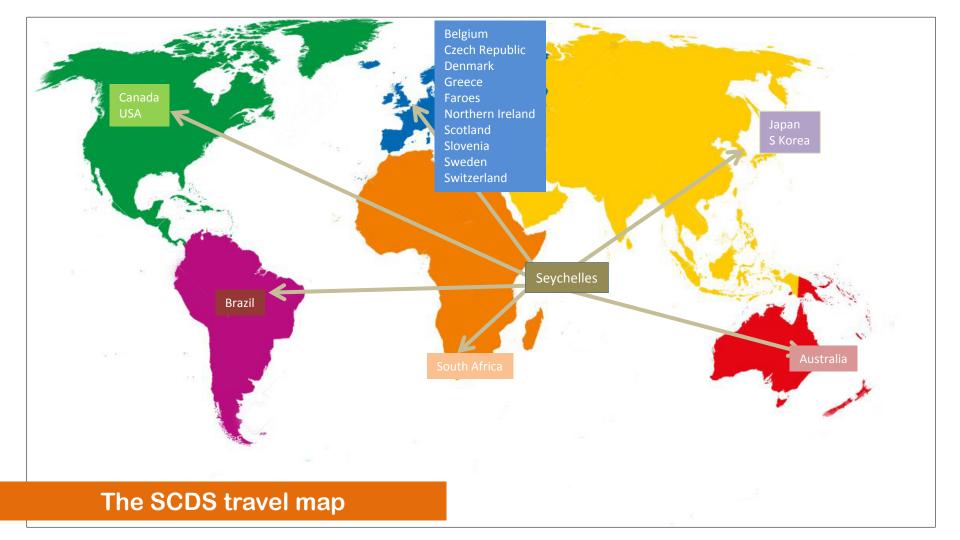
David Marsh, Elsa Cerniciari, Tristram Smith Rochester



Julie Wallace Ulster



Octavie Choisy, Heather Shamlaye Seychelles



 1983 – proposal to study the possible adverse effect on infants of mercury exposure through consumption of fish

during

LETTER OF UNDERSTANDING

DECEMBER 18, 1985

an

opport

if merc

DIETARY FACTORS DURING PREGNANCY AND EARLY DEVELOPMENT

OF CHILDREN IN THE SEYCHELLES" (CHILD DEVELOPMENT STUDY)

TO THE SEYCHELLES (CHILD DEVELOPMENT STUDY)

The Government of Seychelles authorizes this project and will encourage and facilitate its implementation. David Marsh MD Maths Berlin MD Director of Health Professor, Neurology Scientist, WHO Services, Professor Environ-Ministry of Health and Toxicology, Govt. of Seychelles University of mental Sciences. Rochester, New York University of Lund, Sweden

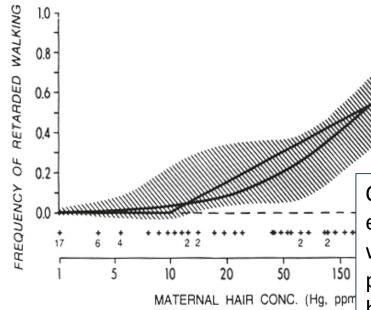
first

Mercury poising from eating fish contaminated with industrial effluent

Minamata 1953 – 1965 Niigata 1960 - 1965

The observation that some children developed severe abnormalities even if the mother showed no symptoms during pregnancy suggested that the developing foetal brain is more vulnerable to mercury exposure

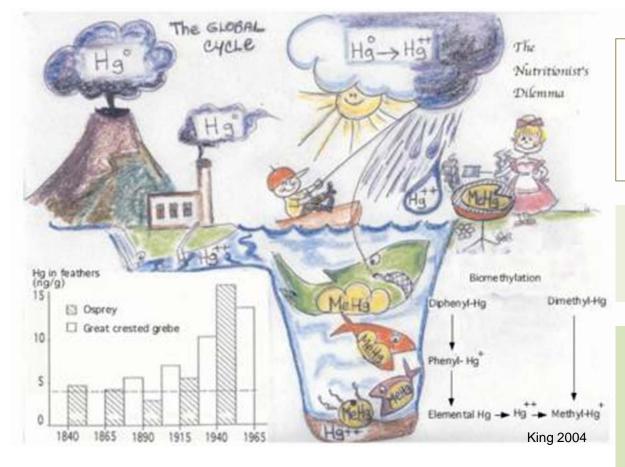
Mercury poisoning from eating seed grains treated with mercury



Could low level mercury exposure from pregnant women eating fish as part of the normal diet harm the unborn child

Why study mercury in fish?





Environmental mercury

- 10% natural sources
- 30% anthropogenic
- 60% recirculation
 UNEP 2013

Artisanal and small-scale gold extraction is now the most important source

For the general population the main source of mercury exposure is the consumption of fish, and to a lesser extent dental fillings

Where does mercury come from?

Mercury occurs naturally in ocean fish. Levels are similar in different parts of the world for the same species, and do not appear to have changed over the past 100 years

	CREOLE COMMON	MEAN	MINIMUM	MAXIMUM
SPECIES	NAME	(PPM)	(PPM)	(PPM)
Carangoides gymnostethus (Bludger trevally)	Karang balo	0.70	0.27	1.1.1
Sphyraena jello (Pickhandle barracuda)	Bekin karo	0.66	0.44	1.58
Carangoides fulvoguttatus (Yellowspotted trevally)	Karang plat	0.40	0.14	0.71
Lethrinus microdon (Small-tooth emperor)	Bek Bek	0.32	0.25	0.52
Euthynnus affinis (Mackerel tuna)	Bonit fol	0.30	0.12	0.39
Lutjanus bohar (Two-spot red snapper)	Vara vara	0.23	0.10	0.43
Variola louti (Yellow-edged lyretail)	Krwasan/Gran ke	0.20	0.06	0.29
Lutjanus sanguineus (Humphead snapper)	Bordmar	0.20	0.07	0.28
Lethrinus mahsena (Sky emperor)	Madanm beri	0.18	0.06	0.36
Lethrinus variegatus (Varigated emperor)	Baksou	0.16	0.06	0.41
Epinephelus chlorostigma (Brown-spot grouper)	Vyey makonde	0.16	0.04	0.28
Lutjanus sebae (Emperor red snapper)	Bourzwa	0.14	0.08	0.27
Gymnocranius grandoculis (Blue-lined large-eye bream)	Kaptenn blan	0.14	0.10	0.24
Aprion virescens (Green jobfish)	Zob gri	0.09	0.04	0.18
Rastralliger kanagurta (Indian mackerel)	Makro dou	0.05	0.02	0.10
Scarus ghobban (Blue-barred parrotfish)	Kakatwa blan	0.04	0.00	0.12
Octopus vulgaris (Octopus)	Zourit	0.01	0.01	0.01
Siganus sutor (Shoemaker spinefoot)	Kordonnyen blan	0.01	0.00	0.01
Scarus rubroviolaceus (Ember parrotfish)	Kakatwa rouz	0.01	0.00	0.02
Siganus argenteus (Streamlined spinefoot)	Kordonnyen soulfanm	0.00	0.00	0.00

Inversity of Rockester Mercury Analytical Laboratory 2010

WEELLLL , Z AND YOU KNOW I'M

WELLLL , Z DOLPHIN-FREE!

Seychelles
Child
Development
Study
Objectives

To study child development in Seychelles

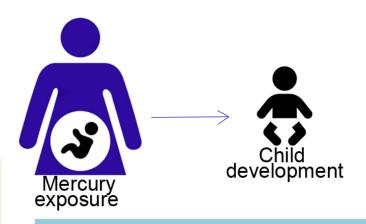
To study association between prenatal mercury exposure and child development

Seychelles is an ideal location for the study

- High fish consumption
- Universal health care and education
- Minimal co-exposures (no lead, PCBs)
- Stable population
- Sentinel population for the study of MeHg:
 - Fish has same level MeHg as US
 - Population has 10x the US exposure

Observational: observing the natural state with no intervention
Longitudinal: looking at events over time, waiting for the child to be born or to reach the right age

Maternal mercury exposure is measured in hair which grows at a known rate. Measuring along the strands of hair therefore captures the exposure during a defined period



Child development is assessed by applying a battery of standard tests designed to reflect global development or specific developmental domains, although there is overlap among these. Tests should be age-appropriate and culture neutral

Statistical analyses seek to identify and quantify association between exposure and developmental outcome. Among study participants, exposure levels will vary, as will test results. If mercury exposure has an adverse effect the test results would tend to go down with increasing exposure levels across the group.

Factors other than mercury may influence the test results. These include the age, sex and health conditions of the child, parental socioeconomic status, maternal intelligence, the home

These are measured as covariates

environment.



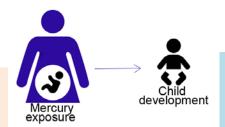
There are also confounding factors that may be related to both the exposure and the outcome

Deciding what factors are important (and therefore must be included in the study design and analysis plan) requires review of the science and careful consideration of the interplay of the potential factors

A study like the SCDS therefore requires the knowledge and skills of professionals of different disciplines, as well as a thorough knowledge and understanding of the Seychelles context and realities

Ethics

- Establishment of independent Ethics
 Committee
- Informed consent
- Confidentiality



Logistics

- Setting up the Child Development Centre
- Communication among collaborators and with participants
- Transfer of data and samples internationally
- Financing

Cultural issues

- Cultural perspective of participants
- Research culture versus service culture
- International and interdisciplinary interaction and collaboration

More than science

More partners and collaborators

Ministry of Health

Ministry of Education

University of Rochester

University of Ulster

Karolinska Institute/Lund Univers
University of Lausanne

More participants

Pilot cohort (87-88): 789 Main Cohort (89-90): 779

NC1 (2001): 300

NC2 (08-11): 1,535

Mothers of MC (2013): 622



Science has expanded

Toxicology Nutrition

Neurodevelopment

Cardiovascular

Immune system
Genetics

Animal models

More measurements
Postnatal mercury exposure
Inorganic mercury exposure
from dental amalgam

Other exposures such as n-3 and n-6 PUFA, amino acids,

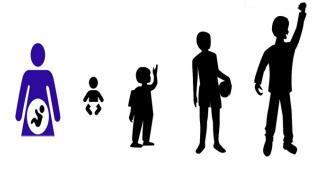
Vitamin D and E, selenium More covariates

More developmental outcomes

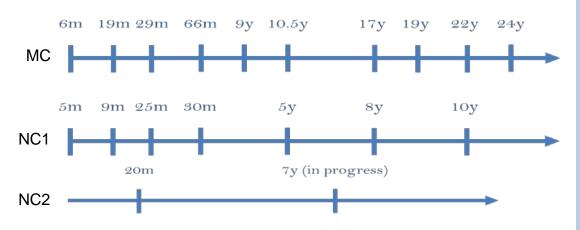
Functional outcomes such as school exams

The **Study design** remains much the same. Study has become bigger and more complex

Evolution of SCDS over time



Developmental Assessments



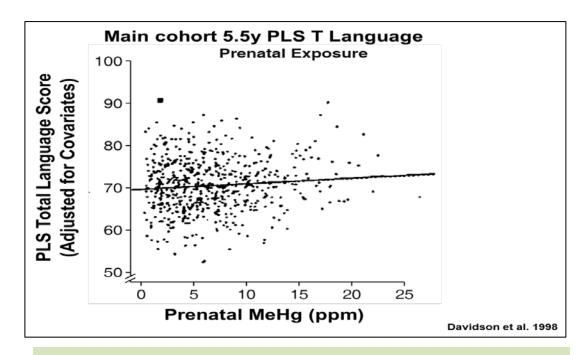
SCDS objectives

- > To study child development in Seychelles
- To study associations between mercury exposure and child development
 - effects of prenatal and postnatal mercury exposure
 - exposure to organic and inorganic mercury
 - factors that may modulate these associations

Multiple assessment, refined study objectives

Main Cohort after 24 years follow up

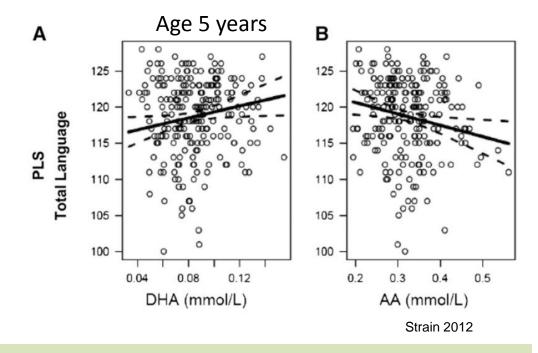
- No consistent pattern of adverse associations between mercury and multiple outcomes
- Beneficial associations found at different ages for different outcomes



Since mercury cannot be good for child development, something that parallels mercury exposure must be responsible. **Negative confounding by nutrients?**

NC1 after 10 years follow up

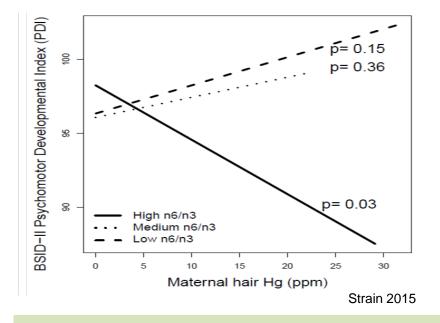
- Beneficial n3 PUFA association
- Adverse n6 PUFA association
- No adverse association with mercury



Possible interaction between PUFA and mercury (effect of mercury on development may depend on level of PUFA). Cohort size is too small to evaluate this possibility

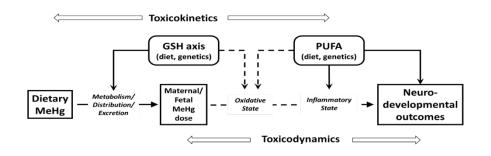
NC2 after 20 months follow up

- No overall adverse association of endpoints with prenatal mercury exposure
- Higher DHA (n3 PUFA) associated with improved language development) but adversely associated with Mental Development Index
- Increasing mercury associated with lower Psychomotor Development Index but only in children of mothers with higher n-6/n-3
- Adverse association between n-6/n-3 ratio and McArthur-Bates CDI



Interaction between PUFA and mercury (effect of mercury on development may depend on level of PUFA) confirmed. The impact of PUFA on development appears to be influenced by the relative amounts of n3 and n6

- No overall association between prenatal MeHg exposure and child development
- Relationship between fish nutrients and mercury far more complex than previously anticipated
- ➤ There could be an optimal balance between the different types of fatty acids
- Genetics may play a role in making some people more or less susceptible to mercury effects. How that works is likely to be complex



More research is needed!

Blood pressure

Prenatal mercury exposure is not associated with blood pressure

Thurston 2007

P6 and S3 school results

Prenatal mercury exposure is not associated with P6 and S3 national exam scores

Davidson 2010

ASD

Prenatal mercury exposure is not associated ASD symptomatology (as measured by SCQ)

Van Winjngaarden 2013

Auditory system function

Prenatal and recent postnatal mercury exposure not associated with auditory function using tests that look at the auditory system peripherally and centrally Orlando 2014

Telomere length

TL in mothers and children not associated with mercury exposure

Yeates 2017

Similar studies in the **Faroe Islands** have consistently found adverse effects of mercury exposure on neurodevelopment and cardiovascular outcomes

Exposure	Faroe Islands	Seychelles
Methylmercury	Pilot whale	Fish
Omega -3 LCPUFA	Fish	Fish
Selenium:mercury	Low	High
PCBs	Present	Absent
Findings	Faroe Islands	Seychelles
Methylmercury	Consistent adverse effect	No consistent adverse effect
Omega-3 LCPUFA	Beneficial	Beneficial

Policy instruments used

- Legally enforceable maximum commercialized fish
 - 1 ppm mercury in large preda
 - 0.5 ppm mercury in other fisl
- Guidelines for safe level of inta
 - EU 1.3 μg/Kg bw/week
 - USA (EPA/FDA) 0.1 µg/Kg b
 - Alaska 0.56 μg/Kg bw/day
 - Canada 0.2 μg/Kg bw/day
- Advisories on fish consumptior

Advice About **Eating Fish**

What Pregnant Women & Parents **Should Know**

Fish and other protein-rich foods have nutrients that can help your child's growth and development.

For women of childbearing age (about 16-49 years old), especially pregnant and breastfeeding women, and for parents and caregivers of young children.

- Eat 2 to 3 servings of fish a week from the "Best Choices" list OR 1 serving from the "Good Choices" list.
- Eat a variety of fish.
- Serve 1 to 2 servings of fish a week to children, starting at age 2.
- If you eat fish caught by family or friends, check for fish advisories, If there is no advisory, eat only one serving and no other fish that week.*

Use this chart!

You can use this chart to help you choose which fish to eat, and how often to eat them. based on their mercury levels. The "Best Choices" have the lowest levels of mercury.

What is a servina?





To find out. use the palm of your hand!

Good Choices EAT 1 SERVING A WEEK

Monkfish

Rockfish

Sablefish

Snapper

For an adult 4 ounces

ages 4 to 7 2 ounces

Best Choices EAT 2 TO 3 SERVINGS A WEEK

Herring

Anchovy Atlantic croaker Atlantic mackerel Black sea bass Butterfish Catfish Clam Cod Crab

Crawfish

Flounder

Haddock

Hake

Lobster. American and spiny Mullet Ovster Pacific chub mackerel Perch, freshwater and ocean Picke re l Plaice Pollock Salmon Sardine

*Some fish caught by family and friends, such as larger carp, catfish, trout and perch.

are more likely to have fish advisories due to mercury or other contaminants. State

advisories will tell you how often you can safely eat those fish

Trout, freshwater Tuna, canned light (includes skipjack) Whitefish Whiting

Scallop

Shad

Shrimp

Skate

Smelt

Sauid

Tilapia

Sole

Bluefish Buffalofish Carp Chilean sea bass/ Patagonian toothfish Grouper

Halibut Mahi mahi/

Striped bass (ocean) dolphinfish

Tilefish (Atlantic Ocean)

Tuna, albacore/ white tuna, canned Sheepshead and fresh/frozen

Tuna, yellowfin Weakfish/seatrout White croaker/

Pacific croaker

Choices to Avoid HIGHEST MEDICURY I EVELS

Spanish mackerel

King mackerel Marlin Orange roughy

www.FDA.gov/fishadvice

www.EPA.gov/fishadvice

Shark Swordfish (Gulf of Mexico)

Tuna, bigeve





THIS ADVICE REFERS TO FISH AND SHELLFISH COLLECTIVELY AS "FISH." / ADVICE UPDATED JANUARY 201

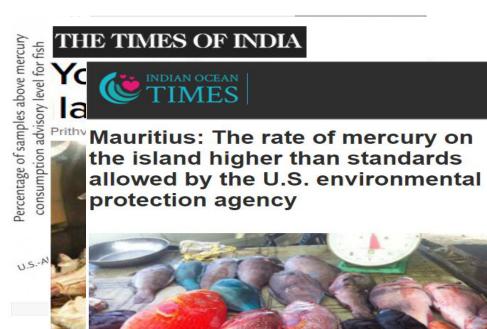
In populations where people do not eat a lot of fish, the tendency is for people to reduce consumption as a result of the advisories

Many people depend on fish for important macro and micronutrients and do not have readily available alternative

Replacing fish by meat products has important impact on health

http://americablog.com/2013/03/mercury-fish-poisoning-salmon-us-italy-japan.html

84% of world's fish not safe to eat more than once a month



Fish







INVENTORY OF MERC

36% of hair samples "exceeded the widely recognised US Environmental Protection Agency guideline"

"The study's report concluded that the levels in individuals ... is enough to put life of the fetus at risk."

Ministry of Environment and Sustainable D Ministry of Health and Quality of Life February 2014

LAWS OF SEYCHELLES

CHAPTER 77A

Act 18 of 1996 Act 2 of 2003 Act 32 of 2016

EXPORT OF FISHERY PRODUCTS ACT

Heavy metal contaminants present in the aquatic environment

 Batches of fishery products in which the levels of heavy metal contaminants exceed the maximum limits indicated in the following table shall be regarded as unfit for human consumption.

- Consumption.	-			
Substrate	Maximum Limit (ppm)			
	Lead	Cadmium	Mercury	
Muscle mest of all fishexcept where indicated below:	0.3	0.05	0.5	
Little tuna (Euthynnus app.)		0.1	1.0	
Tunas (thunnus spp. and	3			
katsuwonus pelamis.)				
Marlin (Maraira spp.)	-	0.05	1.0	
Sail fish (Istiophorus platypterus)				
Rays (Raja species)				
Shark and dogfish (all species)		Schedule		

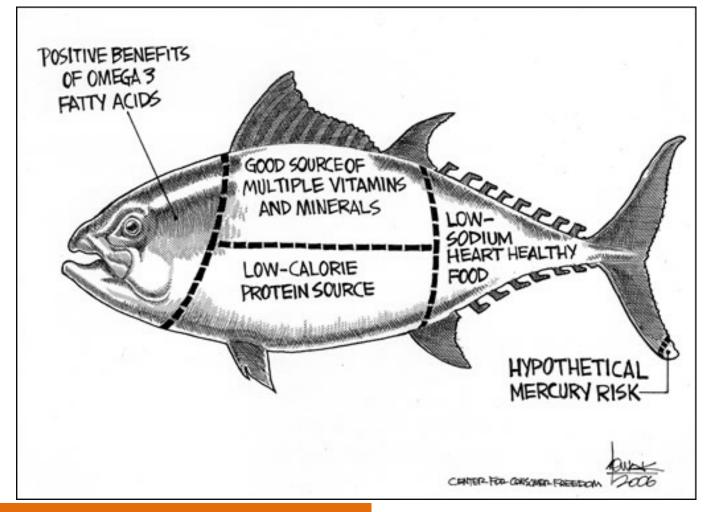
Governments can overreact

Member states should:

Emphasize the neurodevelopment benefits to offspring of fish consumption by women of childbearing age, particularly pregnant women and nursing mothers, and the neurodevelopment risks to offspring of such women not consuming fish

FAO and WHO Expert Consultation on the Risks and Benefits of Fish Consumption, January 2010

WHO/FAO expert opinion



A bit of perspective

Global response strategy to tackle the mercury problem throughout its entire life cycle

- limit mercury mining
- regulate trade
- reduce/eliminate use of mercury in gold mining
- control mercury emissions into the air and water
- promote sound waste disposal.
- reduce use of mercury in products and processes
 - eliminate use in medical devices
 - phase down use of dental amalgam

The Convention is silent on mercury exposure from fish consumption

Adopted October 2013
Came into force 16/08/2017

Seychelles signed May 2014, ratified January 2015







- The SCDS is an internationally recognized health research success
- Demonstrates the capacity to study the complex relation between mercury exposure and health better than most studies
- Provides evidence that guides fish consumption recommendations worldwide
- Guides national nutrition policy development and health promotion by emphasizing importance of fish
- Provides longitudinal data on child development and info child health and education programmes
- Promotes research and builds capacity
- Assists other projects (Autism)

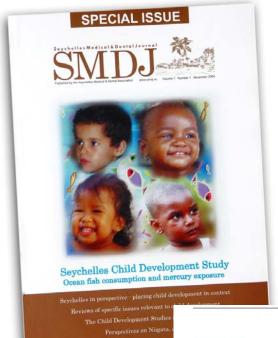


- Analysis of P6 and S3 exam scores confirms that girls outperform boys in all subjects
- The presence of the father through childhood and adolescence impacts positively on school exam performance
- Poorer performance at P6 associated with later substance abuse at 17 years in boys and girls, and more antisocial behaviour among girls

- Dental caries is more common in children whose parents have lower socioeconomic status
- Dental caries is associated with poorer outcomes measuring cognitive abilities and achievement

Analysis of NC2 mothers' food consumption identifies 4 main dietary patterns. Oily fish, bouyon bred, veg and fruit combined associated with the highest serum levels of good n3 PUFA

- Numerous publications in scientific journals
- Presentation at international scientific conferences
- Participation in policy and regulatory fora
- International conferences in Seychelles 1998, 2003, 2010, 2015
- Special issue of Seychelles
 Medical and Dental Journal
 2004



VOL 7 SO I NOVEMBER 1984

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PAST ISSUES

Section 1. - Introduction to the Special Issue and the 2nd International Conference on Child Development in Saychella Section III - Saychellas in perspective - placing child development in confest.

Section IV - The Child Development Studies in

Section V - Perspectives on Nilpata, Japan Section VI - Additional conference paper



Ocean fish consumption & mercury expo

Promote knowledge and research culture

- Establish a National Research Council
- Strengthen National Data Centre
- Establish research in every Ministry
- Increase financing for research
- Train researchers and develop networking
- Promote dissemination of research findings
- Promote utilisation of research as evidence base for policies and services









CHILD DEVELOPMENT CONFERENCE SEYCHELLES 3 - 6 NOVEMBER 2003

NATIONAL INSTITUTE OF EDUCATION

PROGRAMME

TUESDAY, NOVEMBER 4

Transport from hotel to the National Institute of Education 8:30

MORNING SESSION: Co-Chairs Dr. Kazuko Kamiya & Dr. Michel Rosalie

Nutrition versus toxicity in the Arctic. Dr. Eric DeWailly 9:00-9:30

Omega-3 fatty acids and child development. Dr. Sylvie Dodin 9:30-10:00

Cohort study on the neurobehavioral effects of perinatal exposure to 10:00-10:30

halogenated organic environmental pollutants and heavy meals in Japanese

children. Dr. Hiroshi Satoh

BREAK 10:30-11:00

to heavy meals

What kind of data have we collected?

Demographic and background

Mother and father education Anthropometric measureme

Mother and father occupatio Vision and Hearing

Home Environment

Early child-care arrangement Food consump

Food consumption

Maternal status

Antenatal, perinatal paramet Pregnancy

Family composition and state Health and Nutritional State

Oral health status

Medication

Life events

Exposure measurements

Prenatal mercury exposure

Recent mercury exposure

Dental amalgam

LCPUFA

Iron, iodine, taurine

Calanium

Developmental and other outcomes

Health, illness, Cognitive

Memory

Perceptual-Motor

Mood

Social Communication

Language

Problem-solving and Learning

Scholastic Achievement

Behavioural, alcohol, smoking, drugs, disciplinary

issues at school

Neurophysiological: Auditory Processing

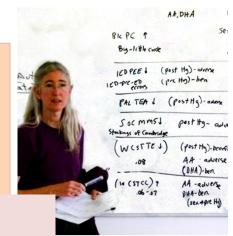
Cardiovascular Status, HRV

Genetics

Gene polymorphism

Telomere length

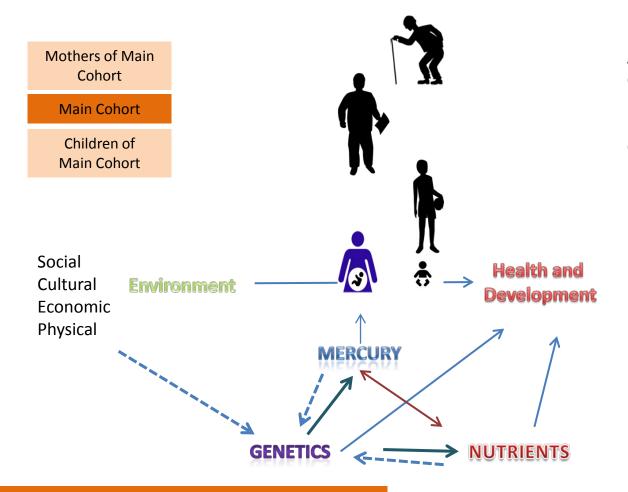
Mitochondrial DNA





- Multinational and multidisciplinary scientific team with long and successful research track record
- Study participants reviewed many times and still going strong
- Huge amount of high quality data collected and archived
- Agility and versatility to look at issues in different ways:
 - at each time point has data on wide range of exposures and outcomes and can look at many different aspects of exposure and outcome
 - Can take longitudinal, prospective as well as restrospective view of exposure and outcome relationships
 - Can interact with other studies sharing similar designs and data sets
- Consistent approach to study design, hypothesis-driven approach and analysis planning and conduct
- Large output in terms of publications, conferences
- Good record of human resource development and careers

SCDS keeps going



Ageing
Cardiovascular function
Neurodegenerative
Immune system function
Cancers

School performance Risky behaviour

Cognitive
Social
Language
Motor
ASD
Immune system

Paulette Anaou Patricia Charlette Flizabeth Arrisol Betsy Chavez **Ghislaine Auguste** Nadia Ciseau Georgie Azemia Daniella Balette Ian de Broek Linda Barallon Helene Basset Raymonde Bellard Daniel Belmont Lanka Dorby Rose-May Benoit **Egbert Benstrong** Lymiah Bibi Anne-Marie Bibi Florida Bijoux Jude Bijoux Jude Faure Nathalie Bodin **Agnes Boniface** Pascal Boyet Julita Fostel-William Rubell Brewer Joanne Fred Daphnee Brice **Brigitte Gabriel**

Octavie Choisy Johnette Denis Joachim Didon Marie-Helene Dogley Jean-Paul d'Offay Agnes Elizabeth Kathleen Frnesta Christina Esther Frica Fanchette Maxime Ferley **Agnes Florentine**

Lina Gabriel Jude Gedeon Leeory Gedeon Juliette Henderson Françoise Hoareau Stephanie Hollanda **Hubert Innane** Meganne Jean Sharon Jean Rose-Mai Jolicoeur **Prosper Kinabo** Judy Labiche-Jean Baptiste Sylvette Labrosse Diana Laporte Joel Lawen Jeanne Legaie Aubrey Lesperance Andre Leste Veraine Louis-Marie Jeanne Low-Toy

Lindy Lucas Catriona Monthy Judy Morel Naddy Morel Marie-Helene Niole Dana Padayachy Philip Palmyre Marie-Antoine Pavet Cyril Pillay **Brigitte Pool** Harold Pothin Vivian Radegonde Jan Robinson Sarah Romain Brian Santache Paulette Sarah **Conrad Shamlaye Heather Shamlaye Emelyn Shroff** Jude Shroff

Josianne Sifflore

Jeanne-D'Arc Suzette

Bharathi Viswanathan

Bernard Valentin

Helene Valentin

Justin Valentin

Simone Victor

Sandra Vidot

Midwives

Teachers

Marija Zlatkovic

Child Health Nuses

Graham Sims

Flavie Sinon

Seychelles SCDS personnel



















