

CHAPTER III

THE ASSOCIATION OF METEREEOLOGICAL VARIABLES AND POLLUTANTS WITH INCIDENCE OF RESPIRATORY ILLNESS IN RELATION WITH THE MEDICAL SALE IN VADODARA CITY

3.1 INTRODUCTION

Global warming has given birth to a variety of effects, namely, rising sea levels, altered patterns of agriculture, increased extreme weather events, and the expansion of the range of tropical diseases (Krosnick *et al.*, 2000). From ancient times weather forecast has been major source for a layman to understand the atmospheric conditions. Based on these forecasts, one used to schedule his day-to-day activities and work accordingly. Earlier these forecasts were based solely upon the observations of sky. Today, meteorologists rely heavily on computer models (numerical weather prediction), it is still relatively common to use techniques and conceptual models that were developed before computers were powerful enough to make predictions accurately or efficiently (Hardin, 2003 and Bronnimann *et al.*, 2005). Meteorological parameters like pressure system, wind speed and direction, humidity, temperature and precipitation, ultimately results from the variable relationships of heat, pressure, wind and moisture which is mainly the result of interactions between each of them with change in time. Respiratory illness is the term for diseases of the respiratory system which includes diseases of the lung, pleural cavity, bronchial tubes, trachea, and upper respiratory tract and of the nerves and muscles of breathing. Respiratory diseases range from mild and self-limiting such as the common cold to life-threatening such as asthma. India is predicted to become the world's most populous nation by the year 2050. Industrialization and urban growth are now occurring at an unprecedented rate in this previously agrarian society (Chowgule *et al.*, 1998). Both prevalence and mortality from asthma appear to have increased in many parts of the world during a time when better asthma medications have been available to more patients suffering from asthma (Alderson, 1987).

The economic burden of asthma is estimated to rank as one of the highest among chronic diseases due to the significant healthcare utilization associated with this condition. Varied studies

have been carried out for evaluation of the economic burden of asthma on society and individuals, wherein the efficient review of the financial impact of asthma to know the trend of the disease has not yet been carried out (Gergen, 2001; Woolcock *et al.*, 2001 and Morgan and Khan, 2003).

It is generally thought that some people are born with a genetic predisposition toward developing asthma, but environmental (and potentially societal) factors play a role in the actual development of the disease (Roemer *et al.*, 2000). It is this knowledge that allows scientists to determine ways in which asthma attacks can be prevented or limited. Human biometeorology refers to the relationship of human beings with the natural climatic conditions prevailing in the atmosphere. It studies influence of various meteorological parameters on man in health and disease, his adaptability to alteration in atmospheric environment and role that these changes play in triggering the onset of respiratory illness. Such studies are important because it directs us to implement policies that can improve air quality and help in understanding climatic changes which further facilitates us in humanizing the overall health condition and prevent respiratory illness in future by forming a proper management plan (Mount Sinai Medical Center, 2009).

A study of the burden of a disease is most needed by any health planner who is responsible for making specific plans to combat, contain and eliminate the disease in the population/community. As most planners are economists who prefer to optimize resource allocations based on the financial implications of the problem for the nation and the quantum of expenditure incurred by the population, this chapter documents the current prevalence of asthma in India and the amount of money presently spent by people for treatment, either to get cured or ameliorate suffering.

Demir *et al.*, (2001) in their studies with prevalence of asthma in Turkey have also reported the similar trend. Clinical studies by Klot *et al.*, (2002) have also proved increased asthma medication associated with pollution. Vijaykumar *et al.*, (2009) in their studies have proved Environmental pollution, in discriminate smoking and congested habitat without proper sanitation are the major reasons for the occurrence of asthma among urban populations. In Vadodara city, precise studies are not available to estimate respiratory health related disease burden. Reliable data on mortality and morbidity are scarce in general; they are almost



nonexistent.. Paucity of this adequate data makes the understanding of the public health situation more complex, but one can use indirect evidence for analysis that may reveal the sickness load. But the data from death registration sources are neither reliable nor complete; good percent of cases will go unregistered out of which only 10% of deaths are medically certified. Globally, the economic costs associated with Asthma exceed those of tuberculosis and HIV/AIDS combined (www.who.int/mediacentre/fact sheets, Fact sheet N°307 2001). The economic cost of Asthma is considerable both in terms of direct medical costs (such as hospital admissions and cost of pharmaceuticals) and indirect medical costs (Masoli *et al.*, 2004). Sources like ORG data can also help us indirectly by finding the facts about the economic burden of the diseases by knowing the medical sale.

Keeping the above points in view, the present study is a step forward to understand the relationship between the medical sales of the respiratory diseases in Vadodara city. The present study aimed to verify the results observed by trend analysis by SPSS which proved a strong correlation between meteorological factors and pollutants city and to extend the number of analyzed pollutants and health endpoints. The role of these factors on the increase of medication use was specifically studied. It was hypothesized that increase in pollution level is associated with increase in respiratory illness medication use prevalence. In particular, it was hypothesized that the increasing pollution level may affect on demand medication.

3.2 MATERIALS AND METHOD

3.2.1 Study parameters:

Along with 8 meteorological parameters and 3 Pollutants (as discussed in Chapter 2), sale of 7 Respiratory medicines were considered in this study, the data was obtained from ORG department for year 2005 to 2007. These 18 parameters were then applied on SPSS 12.0, software termed as Statistical Package for Social Sciences version 12.0 (SPSS 12.0). It was through this package that factor analysis study is performed and the extent of interdependence among these 18 parameters and the trend of interdependence for last three years were analyzed.

The sale of 325 respiratory medicines categorized under 7 groups :

1. B. Inhalant Preparations
2. B. Inhalers
3. Inhaler Devices
4. B. Liquids
5. B. Injecta
6. B. Solids
7. B. Others

Table 3.1: The list of medicines Considered in The Study

Sr. No.	Name Of Drug	Sr. No.	Name Of Drug
Bronchodil.Inhalant Prep.		38	Derinide
1	Seroflo	39	Flohale
2	Asthalin	40	Triohale
3	Duolin	41	Serobid
4	Foracort	42	Duomate
5	Aerocort	43	Inhalex
6	Budecort	44	Momenta
7	Tiova	45	Formoflo
8	Beclate	46	Budesal
9	Asthalin Hfa	47	Vent Bec
10	Simplyone	48	M-Spray
11	Budamate	49	Ipneb
12	Formonide	50	Derisone
13	Esiflo	51	Aquamet
14	Combihale-Ff	52	Azeflo
15	Budate	53	Bekform
16	Ipravent	54	Fomtide
17	Duonase	55	Metatop
18	Salbair-I	56	Derihaler
19	Seretide	57	Ciclohale
20	Metaspray	58	Momeflo
21	Duova	59	Combolin
22	Combihale-Fb	60	Nasicure
23	Forair	61	Foratec
24	Combimist	62	Tiotrop
25	Tiate	63	Aerovent
26	Pulmicort	64	Budez
27	Vent-Sf	65	Duoset
28	Combitide	66	Azenate
29	Ventorlin	67	Aerotaz
30	Fullform	68	Aerotide
31	Levolin	69	Aerovent Dp
32	Salbair	70	Asthalin-Ax
33	Salbair-B	71	Asthavent
34	Vent-Fb	72	Asthavent Dp
35	Maxiflo	73	Autohaler
36	Tiomate	74	Avessa
37	Ciclospray	75	Becoride

Sr. No.	Name Of Drug
76	Bricanyl
77	Budavent
78	Budvent
79	Ciclez
80	Combinase-Aq
81	Cromal
82	Deriform
83	Durasal
84	Fomtaaz
85	Fomtrop
86	Formosone
87	Ipramist
88	Levair
89	Levair-B
90	Levair-I
91	Megaspray
92	Nezalast
93	Osonide
94	Rheoran-F
95	Rheoran-Sf
96	Rheolin
97	Salmeter
98	Salvent
99	Symbicort
100	Symbiva
101	Tioform Novocarts
102	Tiomist Novocarts
103	Tioform
104	Tiomist
105	Vent
106	Vent Plus
107	Ventiflo
108	Ventoride
109	Ventipra
Bronchodilators Solids	
110	Unicontin-E
111	Montair
112	Deriphyllin
113	Doxobid

Sr. No.	Name Of Drug
114	Montair Plus
115	Asthalin
116	Doxolin
117	Bricanyl
118	Theo Asthalin
119	Zordox
120	Doxiflo
121	Phyllocontin
122	Mucomix
123	Romilast
124	Betaday
125	Theobid D
126	Bambudil
127	Od Phyllin
128	Synasma
129	Telekast
130	Ab Phylline
131	Freefil
132	Eto-Salbetol
133	Telekast-L
134	Alupent
135	Telekast-Plus
136	Doxoril
137	Duralyn
138	Romilast-B
139	Broxine
140	Levolin
141	Theobric Plus
142	Ketasma
143	Ventorlin
144	Doxophyl
145	Butabrom
146	Doxovent
147	Doxoril Plus
148	Montek
149	Codofyline
150	Montus-BI
151	Salbetol
152	Freeway

Sr. No.	Name Of Drug
153	Unicontin
154	Vent
155	Bromhexine
156	Montek Plus
157	Grilinctus-Bm
158	Asmatide Br
159	Marax
160	Tsr
161	Ventiphylline
162	Asthakind
163	Salbusun-T
164	Tedral-Sa
165	Durasalyn-Drcm
166	Montus
167	Duralyn-Drcm
168	Sal Mucolite
169	Asthafen
170	Durasal
171	Pulmoza
172	Alergin
173	Doxomax
174	Phylin-1
175	Asmapax
176	Doxfree
177	Montemac
178	Erdozet
179	Mucolinc
180	Tritofen
181	Albutamol
182	Lungfyl
183	Abel
184	Airomol
185	Asthafree
186	Astham
187	Astharid
188	Astharid Plus
189	Asthavil
190	Azofen-T
191	Befree

Sr. No.	Name Of Drug
192	Bronkoplus
193	Bronkotab
194	Dericip
195	Derivent
196	Derivent E
197	Emlucast
198	Etosal
199	Etouxin-B
200	Flohale
201	Ketotif
202	M-Kast
203	Monti
204	Montelast
205	Mucodyne
206	Odimont
207	Odimont-Plus
208	Ozaflo
209	Phylobid
210	Privent
211	Respidac
212	Tedral
213	Terphylin
214	Theobid
215	Theobric
216	Theoday
217	Theoresp
218	Theoresp Plus
219	Theostan-Cr
220	T.R. Phyllin
221	Ventair
222	Vent-T
223	Vent Et
224	Xputum
225	Zomont-Theo
Bronchodilators Liquids	
226	Grilinctus-Bm
227	Ambrodil S
228	Ventorlin
229	Respira-Old

Sr. No.	Name Of Drug
230	Khadiradi Gutika
231	Vent-Pd
232	Asthalin
233	Spasma
234	Sal Mucolite
235	Levolin
236	Asmotone Plus
237	Albutamol
238	Tuspel Px
239	Ventiphylline
240	Theo Asthalin
241	Eto-Salbetol
242	Airomol
243	Vasavaleha
244	Efelin-Pd
245	Durasalyn
246	Doxoril
247	Ventryl
248	Doxomax
249	Cadiphyllate
250	Bromhexine
251	Bricanyl
252	Doxobid
253	Deriphyllin
254	Theoped
255	Bambudil
256	Euphomin
257	Doxolin
258	Salphyllin-Old
259	Topex-Br-Old
260	Freefil
261	Doxfree
262	Synasma
263	Asthafen
264	Asthafree
265	Broncordil
266	Broncordil-P
267	Broncordil Plus
268	Bronkoplus

Sr. No.	Name Of Drug
269	Bronko
270	Bronko-Ex
271	Bronkotus
272	Derivent
273	Doxiflo
274	Doxovent
275	Epixyl
276	Etoxin-B
277	Filistin
278	Ketotif
279	Mucodyne
280	Respidac
281	Servil
282	Sudex-Br
283	Tritofen
284	Vasavaleha
285	Vasavaleha
286	Vent
287	Vifex
288	Xputum P
Bronchodilators Injecta.	
289	Budecort
290	Mucomix
291	Epitrate
292	Deriphyllin
293	Levolin
294	Bricanyl
295	Efipres
296	Doxovent
297	Doxoril
298	Doxolin
299	Aerovent
300	Delin
301	Theofin
302	Vasocon
Inhaler Device	
303	Rotahaler Transpar
304	Lupihaler
305	Revolizer

Sr. No.	Name Of Drug
306	Zerostat-V
307	Baby Mask
308	Zerostat
309	Spacer
310	Zerostat-Vt Spacer
311	Vent Mate
312	Aerolife
313	Aerotaz
314	Aerotide
315	Easehaler
316	Novolizer

Sr. No.	Name Of Drug
317	Peak Flow Master
318	Respihaler
319	Rheohaler
320	Sunhaler
321	Transpacer
322	Volumatic
Bronchodilators,Others	
323	Asthakind
324	Haleezy
325	Caropram

3.3 RESULTS:

The analysis of 8 of the meteorological parameters for Vadodara city over a period of 3 years, viz. Height of Lowest layer, cloud cover, Maximum temperature, Minimum Temperature, Wind speed, Rainfall, Relative humidity and Vapor pressure, pollutants like SO₂, NO_x and RSPM, with the sale of 7 respiratory medicines categorized under group bronchodilators like inhaler preparations, Inhalers, Liquids, Injecta, Solids, Bronchodilator others and Anti-asthmatics reveals interesting facts. Annual and seasonal variance, component matrix with respective scree plots are represented in **Table 3.2 to 3.39**. There was a distinct difference in the component matrix analysis. On annual basis the meteorological and the pollutants showed a strong correlation. The analysis has been carried out on seasonal and annual basis. It discloses interdependence of certain parameters for both seasonal and annual observations. The observations for the study were made in terms of total variance and the total number of components extracted, which gives the percentage of interdependence among each of the study parameter considered. Total variance and component matrix tables for 2005, 2006 and 2007 annual as well as seasonal observations explain the interdependence of meteorological parameters in a significant manner.

Table 3.2: Component Matrix For 2005

	Component			
	1	2	3	4
wndspd	-.790	-.286	.487	-.057
MxT	-.278	-.772	-.262	-.140
MnT	-.904	-.244	-.148	-.096
RF	-.837	.365	.188	.063
RH	-.578	.804	.095	-.011
VP	-.873	.414	-.034	-.077
CC	-.755	.419	.153	.155
LL	.968	-.404	-.134	-.115
SO ₂	.677	-.192	.683	.089
NOx	.982	.010	.357	.260
RSPM	.934	-.252	.119	.045
B.InhlPrep	.938	.203	-.236	.149
B.Solids	.900	.359	.142	-.050
B.Liquids	.963	.479	-.137	.268
B.Injecta	.999	.408	-.005	-.265
Inhaler.Device	.980	.278	-.437	.123
B.others	.497	.089	.684	-.407
Anti.Others	-.348	-.345	.231	.761

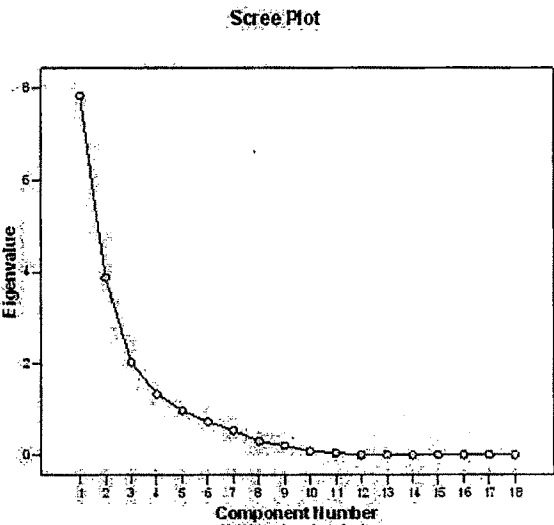


Fig. no. 3.1: Scree Plot For 2005

Table 3.3: Component Matrix For 2006

	Component			
	1	2	3	4
wndspd	.854	-.364	.033	.018
MxT	-.126	-.763	.409	.006
MnT	.885	-.173	.310	.075
RF	.697	.438	.003	-.204
RH	.839	.636	-.011	-.094
VP	.833	.237	.209	.061
CC	.892	.424	-.021	-.016
LL	-.914	-.339	-.144	.057
SO ₂	-.589	.211	.688	.035
NOx	-.606	.114	.612	-.237
RSPM	.669	.334	.093	.577
B.InhlPrep	-.498	.656	-.052	.136
B.Solids	-.409	.218	-.238	.584
B.Liquids	-.654	.645	.047	-.437
B.Injecta	-.653	.625	.143	.198
Inhaler.Device	-.514	.673	-.173	.148
B.others	.000	-.204	.620	.504
Anti.Others	-.285	-.574	-.471	.120

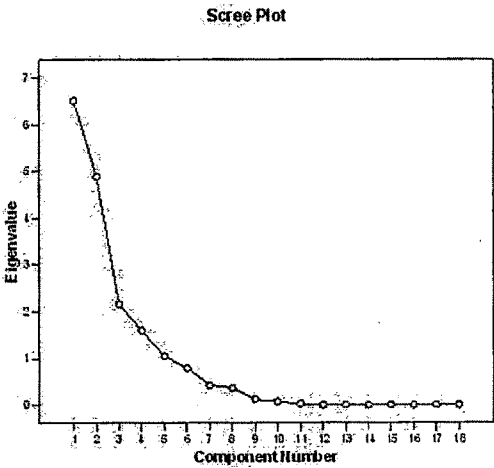


Fig. no. 3.2: Scree Plot For 2006

Table 3.4: Component Matrix For 2007

	Component				
	1	2	3	4	5
wndspd	-.799	-.320	.305	.186	.052
MxT	-.114	-.678	.023	.496	.301
MnT	-.848	-.051	-.075	.437	.080
RF	-.745	.488	.211	-.187	-.035
RH	-.646	.876	.179	-.261	-.071
VP	-.879	.360	.191	.164	.059
CC	-.784	.537	.184	-.136	-.058
LL	.852	-.463	-.159	.083	-.023
SO ₂	.481	-.210	.668	.119	-.460
NO _x	.347	-.255	.622	.201	-.247
RSPM	.401	-.214	.663	-.473	.386
B.InhlPrep	.507	.804	.050	.193	.156
B.Solids	.830	.445	.342	-.159	.139
B.Liquids	.521	.822	-.228	-.136	.127
B.Injecta	.371	.460	.459	.448	.329
Inhaler.Device	.421	.825	-.172	.281	.160
B.others	.408	.577	-.292	.431	-.489
Anti.Others	.062	-.494	-.327	-.335	.374

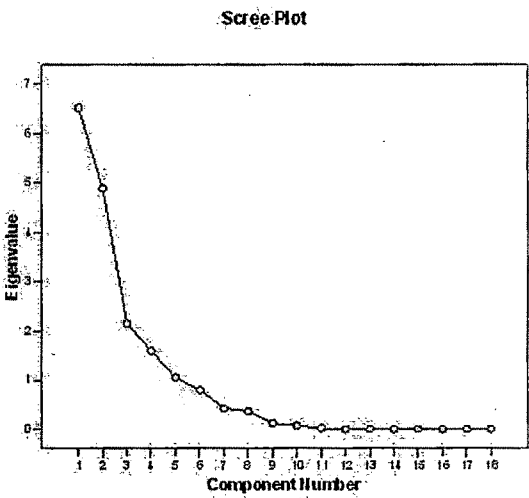


Fig. no. 3.3: Scree Plot For 2007

Table 3.5: Component matrix for 2008 Annual.

	Component			
	1	2	3	4
wndspd	-.064	-.851	-.165	-.082
MxT	-.608	-.478	.486	.357
MnT	.213	-.820	.365	.312
RF	.884	-.341	.096	-.166
RH	.829	-.275	.103	.116
VP	.828	-.276	.103	.121
CC	.387	-.668	.226	-.082
LL	-.935	.203	-.051	-.121
SO ₂	-.515	-.101	.223	.726
NO _x	-.824	-.014	.307	.365
RSPM	-.206	.894	-.046	.292
B.Inhaler	.814	.539	.015	.323
B.Solids	-.263	.295	.731	-.534
B.Liquids	.698	.544	.263	-.078
B.Injecta	-.270	.194	.776	-.519
Inhaler.Devices	.450	.467	.487	.407
B.Others	.504	.892	.049	.128
Anti.Others	-.225	.143	-.522	-.089

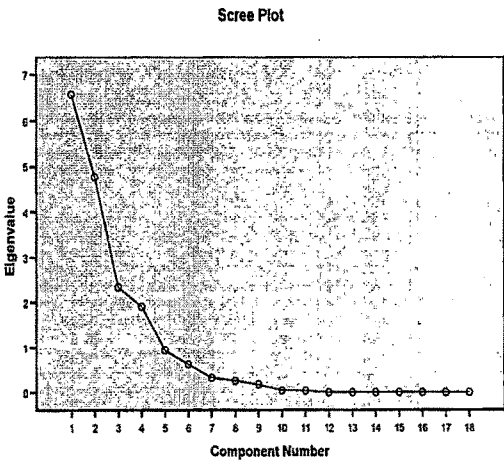


Fig. no. 3.4: Scree Plot For 2008

Table 3.6: Component matrix for 2009 Annual.

	Component				
	1	2	3	4	5
wndspd	.195	.772	.004	.139	.323
MxT	.807	.314	-.336	.281	.035
MnT	.338	.790	-.288	.320	-.035
RF	.148	.689	.254	-.446	-.211
RH	-.270	.763	.323	-.406	-.001
VP	.123	.964	-.148	-.096	.109
CC	-.268	.679	-.366	-.070	.394
LL	-.050	-.781	.084	.463	.064
SO ₂	.690	.251	.532	.283	.183
NO _x	.842	.214	.441	.094	.090
RSPM	.620	.484	.275	.398	-.078
InhlPrep	-.873	.076	.352	.143	.263
solids	.824	-.221	-.093	-.208	-.140
liquids	-.922	.144	.170	.161	.208
Injecta	-.300	.348	-.736	.176	-.192
Inhaler	-.548	.436	.128	.325	-.581
B.other	-.919	.231	.050	.162	.185
AntiOther	.484	-.486	-.251	-.135	.392

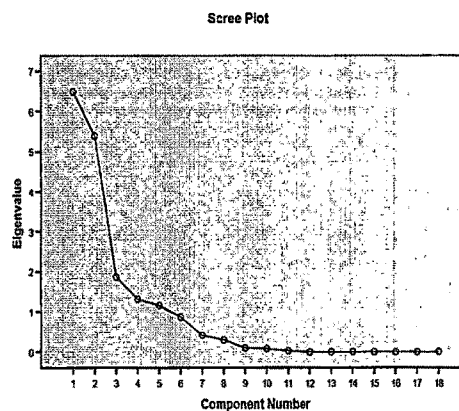


Fig. no. 3.5: Scree Plot For 2009

Table 3.7: Component matrix for 2010 Annual.

	Component		
	1	2	3
wndspd	.382	.606	.466
MxT	.046	.508	.821
MnT	.579	.605	.148
RF	.819	.454	-.418
RH	.829	-.087	-.512
VP	.856	.483	-.005
CC	.899	.337	-.234
LL	-.835	-.495	.165
SO ₂	.024	-.911	.064
NO _x	-.674	.057	-.401
RSPM	-.042	.199	.663
InhlPrep	.862	-.627	.099
solids	-.747	.619	-.214
liquids	.883	-.599	.117
Injecta	.587	-.769	.152
Inhaler	.595	-.026	.340
B.other	.899	-.541	.140
AntiOther	.882	.445	-.253

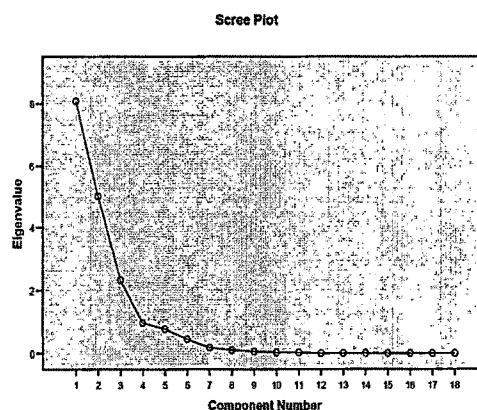


Fig. no. 3.6: Scree Plot For 2010

Table 3.8: Component Matrix For 2005 Summer

	Component		
	1	2	3
wndspd	-.998	-.057	.028
MxT	-.263	-.923	.281
MnT	-.891	-.452	.033
RF	-.759	.305	.510
RH	-.874	.356	.167
VP	-.980	.184	.082
CC	-.674	.352	.550
LL	.829	-.390	-.400
SO ₂	.820	.386	-.066
NO _x	.842	.320	.099
RSPM	.881	-.145	.129
B.InhlPrep	.874	.091	-.208
B.Solids	.832	.322	.287
B.Liquids	.857	.499	.131
B.Injecta	.869	-.189	.158
Inhaler.Device	.841	-.338	.580
B.others	.448	-.694	.563
Anti.Others	.873	.388	.393

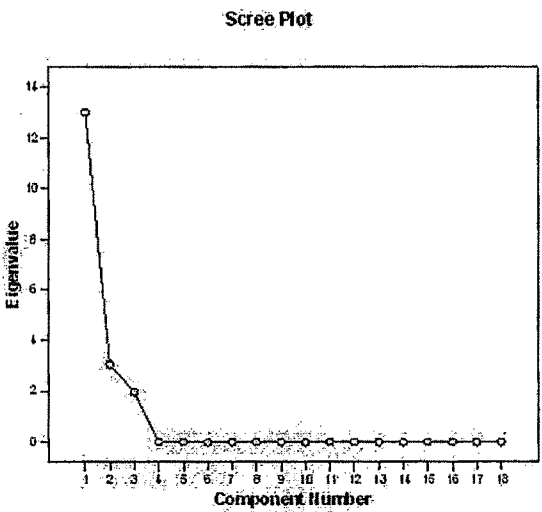


Fig. no. 3.7: Scree Plot For 2005 Summer

Table 3.9: Component Matrix For 2006 Summer

	Component		
	1	2	3
wndspd	.889	-.069	.130
MxT	-.449	-.630	.634
MnT	.891	-.381	.247
RF	.883	.495	-.182
RH	.879	.463	.117
VP	.879	.121	.166
CC	.854	.253	.160
LL	-.892	-.269	-.364
SO ₂	-.954	-.291	.074
NO _x	-.912	.399	.093
RSPM	.886	-.166	.028
B.InhlPrep	-.736	.213	.643
B.Solids	.287	.943	-.167
B.Liquids	-.875	.485	-.001
B.Injecta	-.910	.120	.397
Inhaler.Device	-.781	.488	-.213
B.others	.560	-.826	-.060
Anti.Others	-.343	-.707	-.618

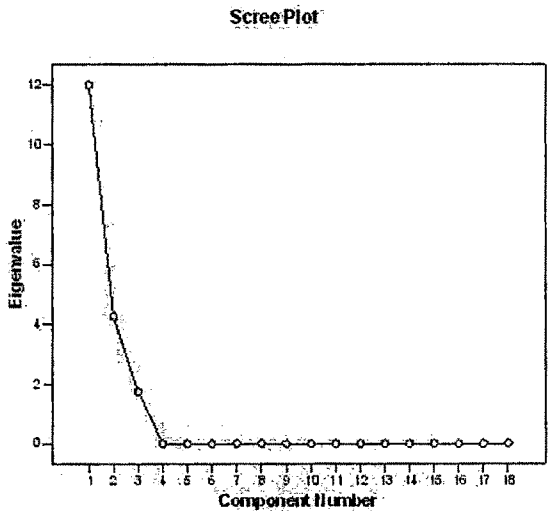


Fig. no.3.8: Scree Plot For 2006 Summer

Table 3.10: Component Matrix For 2007 Summer

	Component		
	1	2	3
wndspd	-.928	-.364	-.075
MxT	.517	-.153	.842
MnT	-.812	-.580	-.072
RF	-.753	.338	.664
RH	-.946	.250	.205
VP	-.977	-.110	.181
CC	-.860	.231	.654
LL	.906	-.239	-.350
SO ₂	.355	-.669	.654
NO _x	-.449	-.511	-.733
RSPM	.569	-.465	.679
B.InhlPrep	.938	-.002	.348
B.Solids	.686	.825	-.066
B.Liquids	.945	.519	-.130
B.Injecta	.606	-.487	-.629
Inhaler.Device	.973	-.086	.214
B.others	-.475	.879	-.040
Anti.Others	.209	.872	-.113

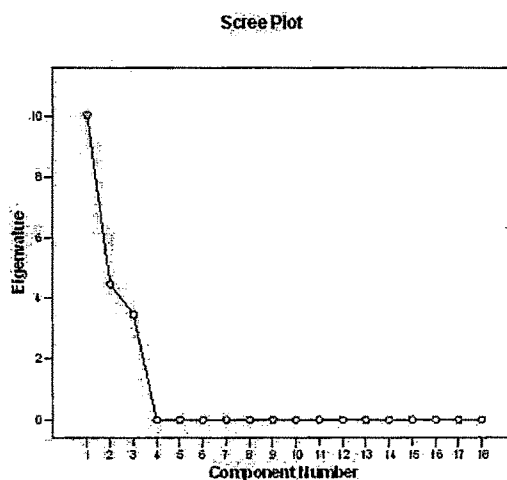


Fig. no. 3.9: Scree Plot For 2007 Summer

Table 3.11: Component matrix for 2008 Summer.

	Component		
	1	2	3
wndspd	-.908	.203	.366
MxT	.611	.773	.170
MnT	-.867	.479	.138
RF	-.880	-.316	-.354
RH	-.941	-.307	.143
VP	-.943	-.300	.144
CC	-.083	.100	-.991
LL	.817	.351	-.190
SO ₂	.224	.727	.516
NO _x	.839	.543	-.047
RSPM	.824	-.661	.198
B.Inhaler	.653	.791	.310
B.Solids	.620	-.779	.093
B.Liquids	.858	-.259	-.126
B.Injecta	.642	-.763	.078
Inhaler.Devices	.840	-.399	.542
B.Others	.841	-.487	-.236
Anti.Others	.378	.732	-.567

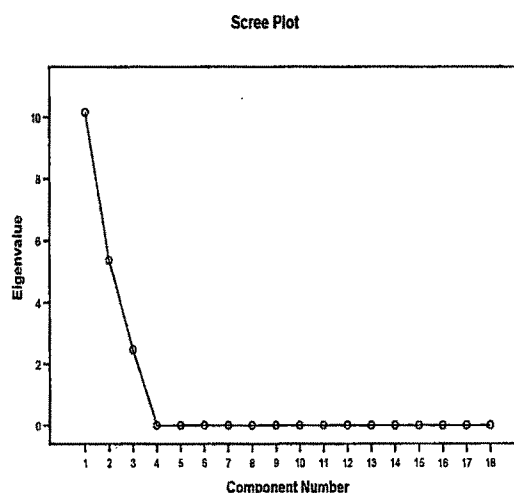


Fig. no. 3.10: Scree Plot For 2008 Summer

Table 3.12: Component matrix for 2009 Summer.

	Component		
	1	2	3
wndspd	.912	-.175	.371
MxT	-.197	.965	.173
MnT	.970	.125	.208
RF	.778	-.110	-.619
RH	.871	-.446	.205
VP	.960	-.229	-.162
CC	.594	.135	.593
LL	-.823	.169	.542
SO ₂	.178	.947	-.269
NO _x	.187	.499	-.846
RSPM	.989	-.139	.046
InhlPrep	.994	.045	-.095
solids	-.978	-.202	-.039
liquids	.981	.022	-.191
Injecta	.995	-.100	-.029
Inhaler	.691	.626	.361
B.other	.983	-.173	-.059
AntiOther	-.832	-.517	-.202

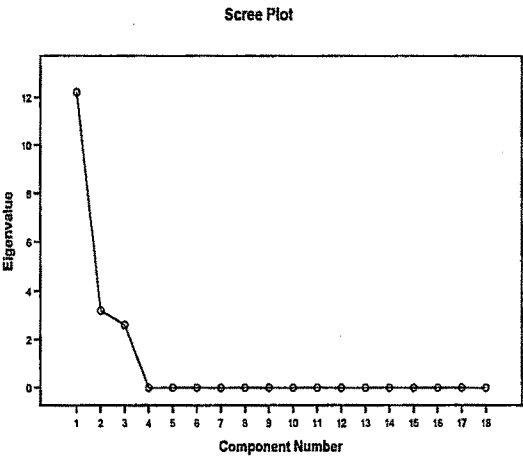


Fig. no. 3.11: Scree Plot For 2009 Summer

Table 3.13: Component matrix for 2010 Summer.

	Component	
	1	2
wndspd	.969	-.147
MxT	.363	-.795
MnT	.849	-.389
RF	.873	.468
RH	.907	.415
VP	.997	-.029
CC	.990	.105
LL	-.950	-.097
SO ₂	.017	.998
NO _x	-.172	.930
RSPM	.787	.615
InhlPrep	.993	-.053
solids	-.907	.299
liquids	.988	-.054
Injecta	.962	-.126
Inhaler	.994	-.059
B.other	.989	-.124
AntiOther	.977	.152

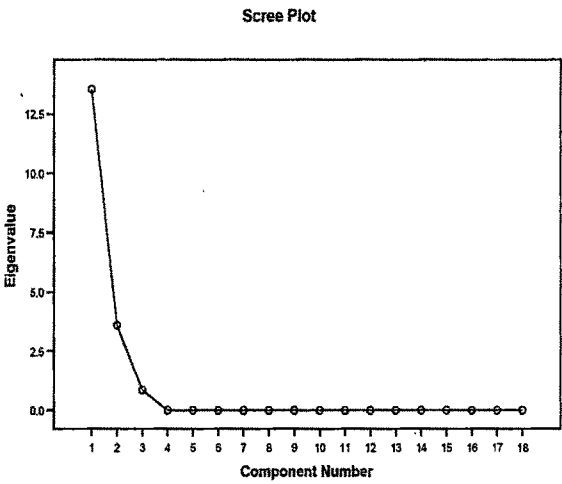


Fig. no. 3.12: Scree Plot For 2010 Summer

Table 3.14: Component Matrix For 2006 Monsoon

	Component		
	1	2	3
wndspd	-.923	.381	-.053
MxT	.926	-.084	-.683
MnT	-.919	-.385	.083
RF	-.824	.382	.418
RH	-.963	-.047	.264
VP	-.978	-.184	.099
CC	-.985	.089	.150
LL	.978	-.057	-.203
SO ₂	.922	.388	-.005
NO _x	.961	.277	-.003
RSPM	.962	-.616	.199
B.InhlPrep	.910	-.260	.426
B.Solids	.461	.775	.146
B.Liquids	.936	-.505	.215
B.Injecta	.866	.576	.473
Inhaler.Device	.921	-.556	.129
B.others	.652	.756	.059
Anti.Others	-.309	.173	-.935

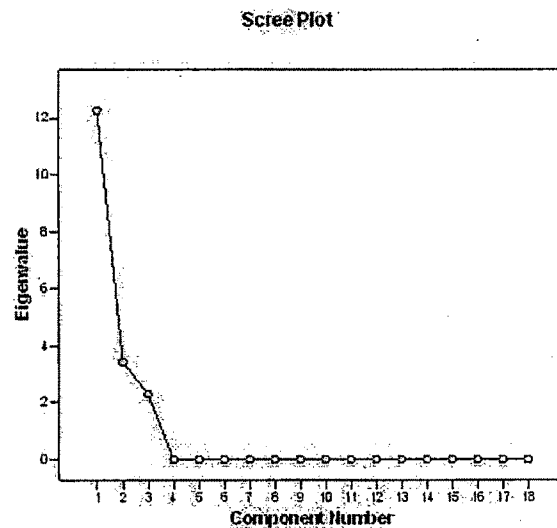


Fig. no. 3.13: Scree Plot For 2006 Monsoon

Table 3.15: Component Matrix For 2007 Monsoon

	Component		
	1	2	3
wndspd	.966	-.045	-.253
MxT	-.799	.563	-.210
MnT	.935	-.110	.337
RF	.940	.257	.224
RH	.935	-.284	.213
VP	.941	-.218	.261
CC	.951	-.271	.148
LL	-.931	.273	-.240
SO ₂	.755	.591	.283
NO _x	.435	.583	.444
RSPM	.925	.365	.104
B.InhlPrep	-.840	-.018	.342
B.Solids	-.959	-.283	-.022
B.Liquids	-.931	.255	.261
B.Injecta	-.560	-.211	.801
Inhaler.Device	-.952	-.007	.306
B.others	-.934	.059	.353
Anti.Others	-.096	-.983	.159

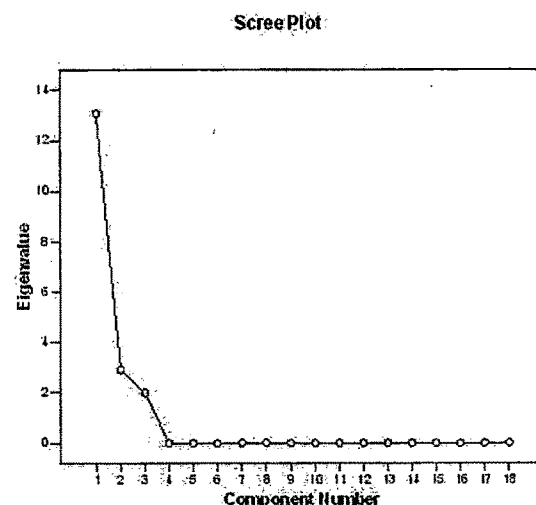


Fig.no. 3.14: Scree Plot For 2007 Monsoon

Table 3.16: Component matrix for 2008 Monsoon.

	Component		
	1	2	3
wndspd	-.994	-.023	-.106
MxT	.913	-.406	-.041
MnT	-.989	-.145	-.001
RF	-.938	.308	-.161
RH	-.923	.248	.295
VP	-.919	.243	.309
CC	-.862	-.426	-.275
LL	.929	-.262	-.262
SO ₂	.923	-.688	-.059
NO _x	.973	-.118	-.198
RSPM	.994	.050	.096
B.Inhaler	.245	.910	-.335
B.Solids	.968	.310	.389
B.Liquids	-.228	.967	.116
B.Injecta	.663	.590	.460
Inhaler.Devices	.544	.375	.751
B.Others	.417	.684	-.598
Anti.Others	-.331	-.700	.633

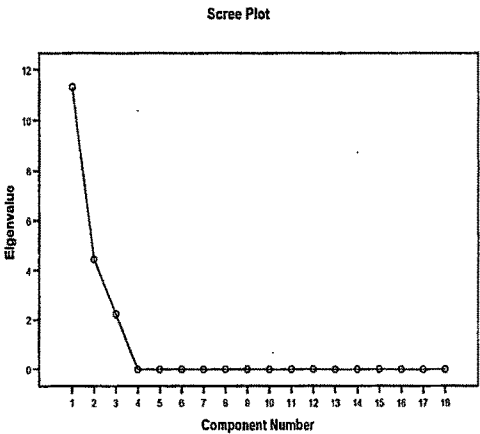


Fig.no. 3.15: Scree Plot For 2008 Monsoon

Table 3.17: Component matrix for 2009 Monsoon.

	Component		
	1	2	3
wndspd	.308	.951	.018
MxT	-.222	.955	-.198
MnT	.535	.732	-.422
RF	.922	-.369	.115
RH	.965	.070	-.251
VP	.901	.572	-.176
CC	-.587	.684	-.433
LL	-.539	.233	.809
SO ₂	.669	.317	.672
NO _x	.971	.324	.369
RSPM	.697	.570	.436
InhlPrep	-.998	.027	.056
solids	.993	.032	-.110
liquids	-.999	-.026	.047
Injecta	-.998	.066	-.020
Inhaler	.721	-.680	-.133
B.other	-.998	.016	.053
AntiOther	.771	-.624	-.128

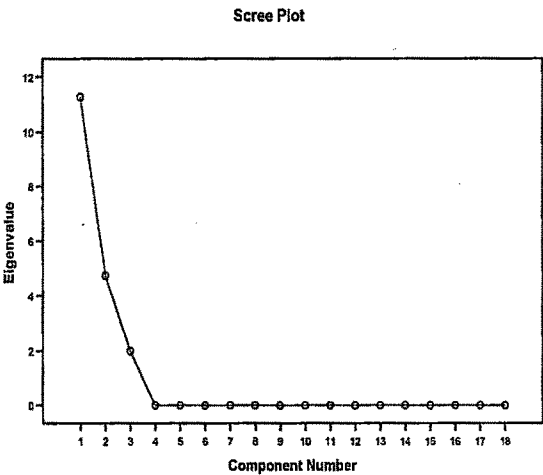


Fig.no. 3.16: Scree Plot For 2009 Monsoon

Table 3.18: Component matrix for 2010 Monsoon.

	Component	
	1	2
wndspd	.774	.144
MxT	-.612	-.732
MnT	-.175	-.983
RF	.903	-.429
RH	.977	.163
VP	.997	.062
CC	.980	-.175
LL	-.983	.129
SO ₂	-.797	.467
NO _x	-.877	.414
RSPM	-.980	-.140
InhlPrep	.904	.403
solids	.910	-.370
liquids	.904	.367
Injecta	.982	-.099
Inhaler	.650	.748
B.other	.540	.842
AntiOther	.937	.348

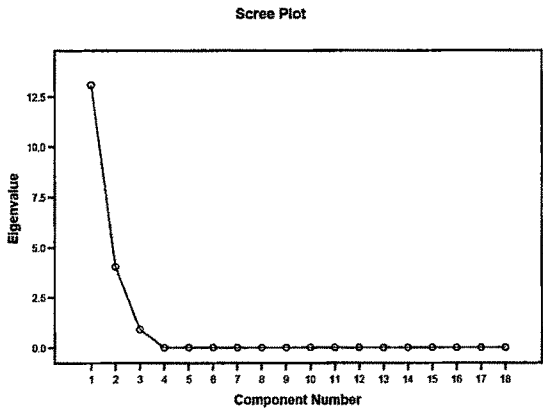


Fig.no. 3.17: Scree Plot For 2010 Monsoon

Table 3.19: Component Matrix For 2007 Winter

	Component		
	1	2	3
wndspd	-.222	.916	.334
MxT	.935	.676	.062
MnT	.917	-.428	-.387
RF	.954	.279	-.110
RH	.136	.985	.105
VP	.940	.224	.494
CC	-.181	.923	-.341
LL	.595	-.628	-.501
SO ₂	.982	.181	-.057
NO _x	.968	.251	-.011
RSPM	.990	-.059	.127
B.InhlPrep	.401	-.905	.139
B.Solids	.163	.365	-.917
B.Liquids	.994	-.078	.442
B.Injecta	.556	-.197	-.807
Inhaler.Device	.332	.909	.422
B.others	-.233	-.862	.450
Anti.Others	.436	-.704	.461

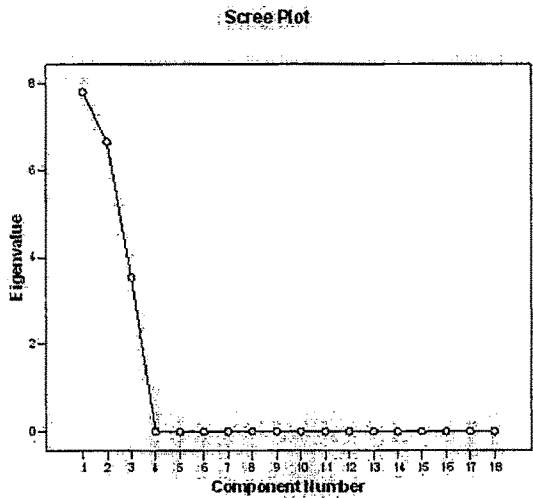


Fig. no. 3.18: Scree Plot For 2007 Winter

Table 3.20: Component matrix for 2008 Winter.

	Component	
	1	2
wndspd	.989	.458
MxT	.996	.094
MnT	.684	-.730
RF	.974	.228
RH	.987	-.162
VP	.982	-.189
CC	.104	.995
LL	.228	-.974
SO ₂	-.235	.972
NO _x	.987	-.462
RSPM	.263	-.965
B.Inhaler	-.998	.058
B.Solids	.978	.479
B.Liquids	-.917	.398
B.Injecta	-.998	-.068
Inhaler.Devices	.980	.199
B.Others	.914	.900
Anti.Others	.913	.408

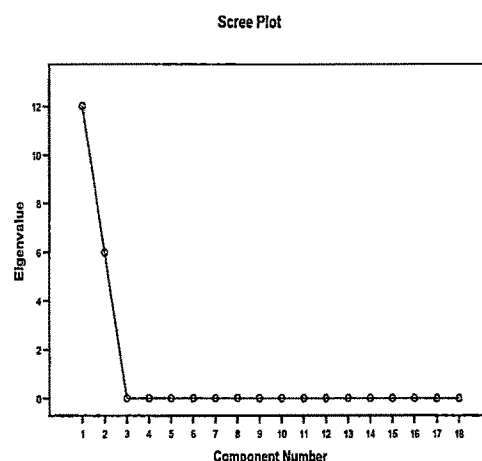


Fig. no. 3.19: Scree Plot For 2008 Winter

Table 3.21: Component matrix for 2009 Winter.

	Component		
	1	2	3
wndspd	.111	-.963	.243
MxT	-.185	-.399	.898
MnT	-.934	.343	-.101
RF	-.590	.521	.617
RH	-.904	-.348	-.247
VP	-.587	.529	.613
CC	-.846	.532	.030
LL	.938	-.058	.341
SO ₂	.951	.138	.275
NO _x	.890	-.315	.329
RSPM	.907	.384	.174
InhlPrep	.917	.373	-.142
solids	-.952	.264	-.153
liquids	.935	.318	-.157
Injecta	.912	.390	-.131
Inhaler	-.358	-.933	-.030
B.other	.927	-.299	-.225
AntiOther	-.987	-.163	.013

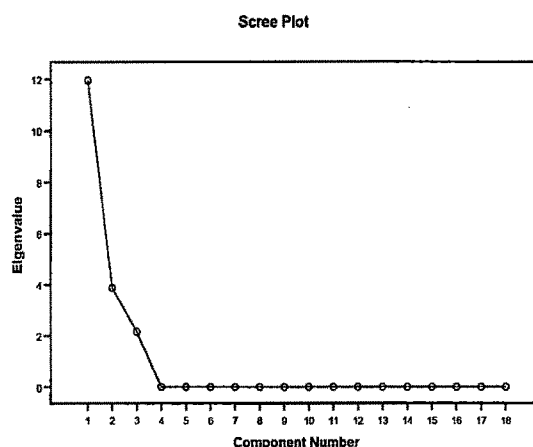


Fig. no. 3.19: Scree Plot For 2009 Winter

Table 3.22: Component matrix for 2010 Winter.

	Component		
	1	2	3
wndspd	.345	-.114	.932
MxT	.705	.513	.490
MnT	-.061	.983	-.174
RF	.427	.902	-.055
RH	.975	.098	.198
VP	.959	.257	-.122
CC	.996	.059	-.071
LL	-.753	-.589	-.294
SO ₂	.959	-.278	-.056
NO _x	-.783	-.139	.607
RSPM	.626	.775	-.082
InhlPrep	.972	-.207	-.111
solids	-.958	.282	.055
liquids	.973	-.208	-.095
Injecta	.979	-.167	-.113
Inhaler	.526	-.680	.510
B.other	.959	-.280	-.044
AntiOther	.433	-.819	-.377

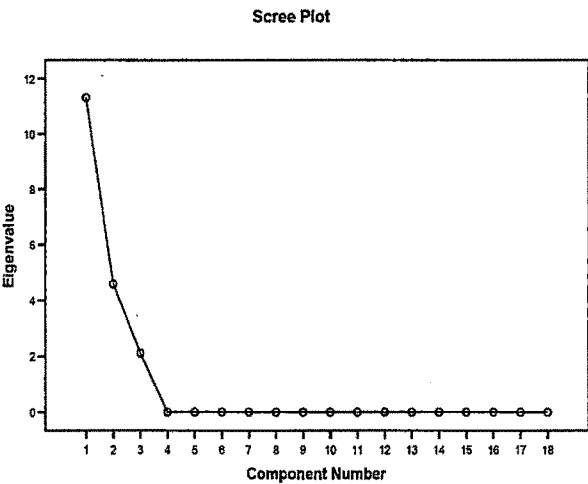


Fig. no. 3.20: Scree Plot For 2010 Winter

Table 3.23: Component Matrix of 2005 Summer For Specific Medicines.

Correlation With CC (In Yellow) and MxT. (In Green)			
	Component		
	1	2	3
wndspd	.986	.146	-.077
MxT	.225	.896	.383
MnT	.851	.525	-.002
RF	.846	-.399	.355
RH	.920	-.391	-.003
VP	.993	-.101	-.058
CC	.775	-.373	.509
LL	-.900	.362	-.241
SO ₂	-.889	-.457	-.017
NO _x	-.895	-.417	.157
RSPM	-.965	.034	.260
Inhaler	-.685	.185	.505

	Component		
	1	2	3
Wndspd	.981	.138	-.134
MxT	.218	.959	.179
MnT	.842	.523	-.136
RF	.861	-.305	.407
RH	.927	-.372	.054
VP	.993	-.099	-.063
CC	.794	-.248	.555
LL	-.912	.292	-.287
SO ₂	-.881	-.461	.104
NO _x	-.884	-.386	.266
RSPM	-.959	.076	.274
B.other	-.418	.996	.584

	Component	
	1	2
wndspd	.993	-.096
MxT	.291	-.771
MnT	.885	-.457
RF	.821	.421
RH	.891	.438
VP	.983	.148
CC	.755	.526
LL	-.877	-.463
SO ₂	-.919	.384
NO _x	-.919	.384
RSPM	-.957	-.036
AntiOther	-.813	.557

	Component	
	1	2
wndspd	.985	-.146
MxT	.241	-.860
MnT	.855	-.518
RF	.851	.431
RH	.917	.395
VP	.991	.101
CC	.785	.519
LL	-.903	-.386
SO ₂	-.893	.449
NO _x	-.894	.424
RSPM	-.958	-.017
Injecta	-.945	.555

Table 3.24: Component Matrix of 2006 Summer For Specific Medicines.

Correlation With MxT. (In Green)						
	Component			Component		
	1	2		1	2	3
wndspd	.985	.170	Wndspd	.967	.254	.011
MxT	-.467	.728	MxT	-.497	.513	.614
MnT	.866	.493	MnT	.824	.556	.106
RF	.821	-.563	RF	.859	-.468	-.208
RH	.921	-.357	RH	.956	-.287	.063
VP	.993	-.006	VP	.995	.071	.066
CC	.980	-.137	CC	.995	-.063	.079
LL	-.931	.108	LL	-.956	.065	-.286
SO ₂	-.970	.230	SO ₂	-.980	.128	.151
NO _x	-.867	-.430	NO _x	-.811	-.537	.234
RSPM	.967	.239	RSPM	.937	.336	-.099
B.other	.480	.727	AntiOther	-.523	.558	-.644

Table 3.25: Component Matrix of 2007 Summer For Specific Medicines.

Correlation With CC (In Yellow), SO2 (In Orange), LL (In Blue) and RSPM (In Grey)							
	Component				Component		
	1	2	3		1	2	3
wndspd	.801	-.021	.433	Wndspd	.751	-.010	.525
MxT	-.567	-.818	.094	MxT	-.543	.839	-.031
MnT	.768	-.020	.640	MnT	.699	.012	.515
RF	.748	.594	-.295	RF	.796	.546	-.263
RH	.851	.247	-.184	RH	.773	.204	-.104
VP	.856	.232	.177	VP	.741	.219	.256
CC	.852	.492	-.178	CC	.883	.451	-.127
LL	.903	-.390	.180	LL	-.930	-.348	.116
SO2	-.435	-.648	.625	SO2	-.472	.710	.723
NOx	.445	-.699	.560	NOx	.360	-.663	.657
RSPM	-.634	.659	.405	RSPM	-.647	.708	.283
Inhaler	.986	.667	.009	B.other	.821	-.119	.775

Table 3.26: Component Matrix of 2008 Summer For Specific Medicines.

Correlation With Wndspd (In Yellow), SO2 (In Orange), LL (In Blue) and RSPM (In Grey)							
Component				Component			
	1	2	3		1	2	3
wndspd	-.764	.633	-.120	Wndspd	.832	.846	.330
MxT	.649	.516	.113	MxT	-.760	.650	.017
MnT	-.638	.744	.199	MnT	.747	.663	.055
RF	-.949	-.135	.287	RF	.941	-.189	-.281
RH	-.982	.121	-.144	RH	.975	-.078	.207
VP	-.982	.128	-.141	VP	.976	-.070	.207
CC	-.083	-.344	.935	CC	.109	-.066	-.992
LL	.973	-.098	.208	LL	-.958	.117	-.261
SO ₂	.519	.846	-.121	SO ₂	-.407	.843	.350
NO _x	.473	.152	.175	NO _x	-.926	.343	-.155
RSPM	.954	-.693	-.559	RSPM	-.587	-.748	.311
InhlPrep	.965	.498	-.053	Inhaler	-.671	.836	.600

Table 3.27: Component Matrix of 2009 Summer For Specific Medicines.

Correlation With VP (In Teal) and RSPM (In Grey)							
	Component				Component		
	1	2	3		1	2	3
wndspd	.619	-.306	.249	Wndspd	.611	-.321	.258
MxT	-.357	.501	.788	MxT	-.363	.491	.792
MnT	.931	.021	.365	MnT	.625	.003	.379
RF	.501	.454	-.392	RF	.512	.451	-.371
RH	.627	-.369	-.064	RH	.624	-.379	-.057
VP	.988	.055	-.144	VP	.991	.046	-.128
CC	.544	-.438	.715	CC	.528	-.457	.716
LL	-.853	-.362	.376	LL	-.863	-.358	.357
SO ₂	.027	.849	.527	SO ₂	.029	.839	.543
NO _x	.124	.975	-.185	NO _x	.138	.976	-.166
RSPM	.997	-.036	.066	RSPM	.996	-.049	.081
InhlPrep	.976	.192	.105	Liquids	.971	.235	.040

b.)

Correlation With Wndspd (In Yellow), VP (In Teal), LL (In Blue), CC (In Yellow), RH (In D. Blue) and RSPM (In Grey)												
Component												
	1	2	3									
wndspd	.725	-.285	.251									
MxT	-.380	.468	.797									
MnT	.726	.038	.376									
RF	.491	.488	-.370									
RH	.738	-.339	-.064									
VP	.987	.089	-.131									
CC	.549	-.441	.709									
LL	-.846	-.397	.356									
SO ₂	-.004	.835	.551									
NO _x	.096	.983	-.157									
RSPM	.997	-.008	.077									
Injecta	.996	.075	.057									

Component												
	1	2	3									
Wndspd	.923	-.282	.262									
MxT	-.394	.460	.796									
MnT	.720	.040	.389									
RF	.693	.495	-.355									
RH	.941	-.334	-.053									
VP	.989	.095	-.116									
CC	.542	-.444	.714									
LL	-.848	-.404	.341									
SO ₂	-.016	.830	.557									
NO _x	.093	.985	-.148									
RSPM	.996	-.003	.090									
B.other	.998	.055	-.004									

Component												
	1	2	3									
wndspd	.740	-.166	.297									
MxT	-.296	.845	.447									
MnT	.758	.174	.228									
RF	.759	.164	-.630									
RH	.723	-.380	.060									
VP	.772	-.058	-.229									
CC	.908	-.029	.794									
LL	.914	-.091	.774									
SO ₂	.061	.998	.015									
NO _x	.095	.739	-.667									
RSPM	.800	-.029	-.004									
Inhaler	.933	.573	.522									

Table 3.28: Component Matrix of 2010 Summer For Specific Medicines.

Correlation With RF (In Pink), Wndspd (In Yellow), VP (In Teal), CC (In Yellow), RH (In D. Blue) and RSPM (In Grey)								
Component			Component			Component		
	1	2		1	2		1	2
wndspd	.751	-.249	wndspd	.950	-.249	wndspd	.951	-.234
MxT	.286	-.829	MxT	.283	-.828	MxT	.288	-.819
MnT	.796	-.477	MnT	.798	-.478	MnT	.609	-.471
RF	.916	.373	RF	.716	.373	RF	.713	.383
RH	.945	.317	RH	.946	.316	RH	.942	.328
VP	.989	-.135	VP	.989	-.135	VP	.990	-.121
CC	.997	-.001	CC	.997	-.001	CC	.996	.013
LL	-.960	.005	LL	-.959	.004	LL	-.955	-.012
SO ₂	.124	.990	SO ₂	.124	.990	SO ₂	.109	.993
NO _x	-.067	.943	NO _x	-.068	.944	NO _x	-.085	.946
RSPM	.646	.528	RSPM	.847	.528	RSPM	.940	.538
InhlPrep	.979	-.158	liquids	.974	-.159	Injecta	.945	-.218

Component			Component			Component		
	1	2		1	2		1	2
wndspd	.952	-.248	wndspd	.955	-.235	wndspd	.945	-.292
MxT	.288	-.829	MxT	.300	-.825	MxT	.266	-.845
MnT	.796	-.476	MnT	.802	-.466	MnT	.761	-.508
RF	.715	.374	RF	.909	.387	RF	.925	.334
RH	.945	.318	RH	.940	.331	RH	.955	.276
VP	.990	-.134	VP	.991	-.120	VP	.984	-.178
CC	.998	.000	CC	.998	.014	CC	.998	-.045
LL	-.961	.004	LL	-.961	-.010	LL	-.968	.049
SO ₂	.123	.990	SO ₂	.109	.992	SO ₂	.169	.983
NO _x	-.067	.943	NO _x	-.079	.942	NO _x	-.014	.942
RSPM	.946	.529	RSPM	.938	.540	RSPM	.966	.491
Inhaler	.980	-.163	B.other	.972	-.214	AntiOther	.995	.003

Table 3.29: Component Matrix of 2005 Monsoon For Specific Medicines

Correlation With LL (In Blue)

	Component	
	1	2
wndspd	.998	.045
MxT	-.817	-.576
MnT	.977	-.190
RF	.902	-.423
RH	.965	-.115
VP	.954	.232
CC	.919	.326
LL	-.646	.663
SO ₂	-.988	-.152
NO _x	-.899	-.351
RSPM	-.972	-.152
InhlPrep	-.782	.612

Table 3.30: Component Matrix For 2006 Monsoon For Specific Medicines

a. Correlation With RF (In Pink)

Correlation With RF (In Pink)								
Component			Component			Component		
	1	2		1	2		1	2
wndspd	.891	.374	wndspd	.899	.287	wndspd	.887	.392
MxT	-.819	-.198	MxT	-.804	-.353	MxT	-.818	-.188
MnT	.933	-.360	MnT	.932	-.339	MnT	.937	-.350
RF	.866	.449	RF	.861	.499	RF	.862	.451
RH	.993	.002	RH	.990	.042	RH	.994	.009
VP	.987	-.160	VP	.987	-.154	VP	.988	-.148
CC	.993	.117	CC	.993	.112	CC	.992	.128
LL	-.995	-.095	LL	-.994	-.107	LL	-.994	-.104
SO ₂	-.923	.377	SO ₂	-.924	.377	SO ₂	-.927	.364
NO _x	-.958	.267	NO _x	-.960	.279	NO _x	-.961	.252
RSPM	-.703	-.580	RSPM	-.715	-.438	RSPM	-.696	-.602
B. Solids	-.461	.484	Injecta	-.615	.448	B.other	-.666	.443

b) Correlation With RSPM and MxT.

Correlation With RSPM (In Grey) and MxT. (In Green)

	Component	
	1	2
wndspd	.925	-.378
MxT	-.801	-.256
MnT	.907	.351
RF	.880	-.136
RH	.984	.152
VP	.975	.185
CC	.998	-.023
LL	-.996	-.029
SO ₂	-.901	-.314
NO _x	-.944	-.217
RSPM	-.758	.550
InhlPrep	-.755	.510

	Component	
	1	2
wndspd	.930	-.355
MxT	-.815	-.099
MnT	.896	.421
RF	.895	-.249
RH	.985	.137
VP	.969	.231
CC	1.000	-.020
LL	-.998	-.021
SO ₂	-.888	-.406
NO _x	-.933	-.299
RSPM	-.766	.522
liquids	-.830	.516

	Component	
	1	2
wndspd	.930	-.345
MxT	-.820	-.066
MnT	.894	.432
RF	.899	-.268
RH	.986	.133
VP	.967	.240
CC	1.000	-.018
LL	-.998	-.020
SO ₂	-.885	-.422
NO _x	-.931	-.314
RSPM	-.766	.508
Inhaler	-.830	.535

	Component		
	1	2	3
Wndspd	.913	.292	-.285
MxT	-.820	.519	.243
MnT	.914	-.078	.399
RF	.884	-.164	-.438
RH	.990	-.136	.026
VP	.978	-.021	.208
CC	.998	.016	-.065
LL	-.998	.041	.052
SO ₂	-.904	.005	-.427
NO _x	-.945	-.037	-.324
RSPM	-.737	-.482	.473
AntiOther	.172	.574	.145

Table 3.31: Component Matrix For 2007 Monsoon For Specific Medicine

Correlation With MxT. (In Green), RF (In Pink), NOx (In Brown) and RSPM (In Grey)			
	Component		
	1	2	
wndspd	.911	-.111	
MxT	-.850	.482	
MnT	.903	-.011	
RF	.981	.310	
RH	.970	-.213	
VP	.901	-.136	
CC	.915	-.218	
LL	-.911	.195	
SO ₂	.762	.648	
NO _x	.463	.876	
RSPM	.910	.382	
liquids	.986	.813	

Table 3.32: Component Matrix For 2008 Monsoon For Specific Medicine

Correlation With LL (In Blue), Wndspd (In Dark Yellow), SO2 (In Orange) and RSPM (In Grey)				
	Component			
	1	2		
wndspd	.871	.168	wndspd	.979
MxT	-.964	.265	MxT	-.961
MnT	.755	.289	MnT	.760
RF	.761	-.168	RF	.768
RH	.766	-.104	RH	.753
VP	.763	-.100	VP	.750
CC	.771	.545	CC	.790
LL	.972	.118	LL	-.961
SO ₂	-.820	.572	SO ₂	.912
NO _x	-.990	-.030	NO _x	-.984
RSPM	.968	-.195	RSPM	-.976
InhlPrep	.927	-.940	Inhaler	.974

Table 3.33: Component Matrix For 2009 Monsoon For Specific Medicine

Correlation With LL (In Blue), Wndspd (In Dark Yellow), RH (In D. Blue), VP (In Teal), NOx (In Brown), CC (In Yellow), SO2 (In Orange) and RSPM (In Grey)												
	Component			Component			Component			Component		
	1	2	3	1	2	3	1	2	3	1	2	3
wndspd	.629	.768	.121	Wndspd	.594	.804	.039					
MxT	.124	.992	-.033	MxT	.077	.989	-.125					
MnT	.738	.564	-.369	MnT	.705	.561	-.433					
RF	.734	-.678	-.043	RF	.764	-.645	.004					
RH	.912	-.224	-.345	RH	.716	-.213	-.340					
VP	.942	.282	-.180	VP	.725	.307	-.223					
CC	-.326	.909	-.262	CC	.972	.865	-.337					
LL	-.376	.260	.890	LL	.974	.323	.869					
SO ₂	.773	-.055	.632	SO ₂	.784	.039	.620					
NO _x	.935	-.065	.313	NO _x	-.954	.007	.299					
RSPM	.777	.210	.433	RSPM	.772	.288	.395					
solids	.932	-.294	-.214	Inhaler	.956	-.857	-.239					

	Component		
	1	2	3
wndspd	.917	.778	.117
MxT	.108	.994	-.031
MnT	.726	.577	-.375
RF	.744	-.666	-.052
RH	.912	-.208	-.354
VP	.736	.298	-.188
CC	-.343	.904	-.256
LL	-.371	.252	.894
SO ₂	.780	-.044	.624
NO _x	.752	-.051	.303
RSPM	.678	.223	.425
B.other	.926	.334	.176

Table 3.34: Component Matrix For 2010 Monsoon For Specific Medicine

Correlation With LL (In Blue), Wndspd (In Dark Yellow), SO2 (In Orange) and RSPM (In Grey)					
	Component			Component	
	1	2		1	2
wndspd	.714	-.208	wndspd	.715	-.177
MxT	-.554	.795	MxT	-.635	.721
MnT	-.080	.996	MnT	-.178	.980
RF	.941	.337	RF	.902	.423
RH	.963	-.261	RH	.985	-.162
VP	.981	-.159	VP	.989	-.070
CC	.997	.075	CC	.985	.173
LL	-.997	-.029	LL	-.991	-.129
SO ₂	-.863	-.379	SO ₂	-.829	-.480
NO _x	-.928	-.321	NO _x	-.896	-.420
RSPM	-.968	.239	RSPM	-.988	.139
solids	.928	.282	AntiOther	.936	-.351

Table 3.35: Component Matrix For 2006 Winter For Specific Medicine

Correlation With RSPM (In Grey)							
	Component				Component		
	1	2	3		1	2	3
wndspd	.924	.319	-.213	Wndspd	-.903	.391	-.177
MxT	-.629	.205	-.750	MxT	.639	.237	-.732
MnT	-.727	-.656	.203	MnT	.687	-.714	.137
RH	.049	.464	.884	RH	-.021	.383	.924
VP	-.988	.051	.148	VP	.989	-.021	.147
CC	-.730	.606	.316	CC	.765	.531	.366
LL	.872	-.241	.427	LL	-.884	-.228	.408
SO ₂	.998	.056	-.022	SO ₂	-.993	.116	-.011
NO _x	.882	.382	-.276	NO _x	-.858	.457	-.234
RSPM	-.427	.976	-.224	RSPM	.478	.966	-.145
InhlPrep	.019	.988	.153	Injecta	.214	.969	.126

Correlation With RSPM (In Grey)			
	Component		
	1	2	3
wndspd	.913	.347	-.214
MxT	-.632	.172	-.756
MnT	-.704	-.678	.211
RH	.029	.480	.877
VP	-.989	.020	.144
CC	-.752	.586	.303
LL	.877	-.204	.434
SO ₂	.996	.090	-.019
NO _x	.870	.408	-.278
RSPM	-.456	.957	-.240
solids	-.117	.980	.158

Table 3.36: Component Matrix For 2007 Winter For Specific Medicine

Correlation With CC (In Yellow)							
	Component				Component		
	1	2	3		1	2	3
wndspd	-.210	.978	-.012	Wndspd	-.081	.983	-.164
MxT	.758	.651	.048	MxT	.835	.550	-.021
MnT	.832	-.538	.131	MnT	.753	-.613	.240
RF	.974	.217	.063	RF	.993	.100	.066
RH	.176	.968	.178	RH	.298	.954	.039
VP	.786	.351	-.510	VP	.833	.168	-.527
CC	-.089	.778	.622	CC	.003	.868	.996
LL	.616	-.760	.208	LL	.508	-.791	.341
SO ₂	.990	.140	-.020	SO ₂	1.000	.009	-.004
NO _x	.974	.221	-.041	NO _x	.995	.088	-.037
RSPM	.963	-.033	-.267	RSPM	.955	-.194	-.223
Injecta	.637	-.442	.631	Solids	.280	.173	.944

Table 3.37: Component Matrix For 2008 Winter For Specific Medicine

Correlation With LL (In Blue), SO2 (In Orange) and RSPM (In Grey)							
	Component				Component		
	1	2	3		1	2	3
wndspd	-.697	.509	.505	Wndspd	.954	.560	.344
MxT	-.688	-.429	.585	MxT	.607	-.278	.744
MnT	-.887	.025	-.460	MnT	.690	-.254	-.378
RF	-.838	.398	.373	RF	.679	.393	.268
RH	.600	.723	.343	RH	-.495	.868	.027
VP	-.950	.224	-.216	VP	.677	.008	-.215
CC	-.225	.967	-.116	CC	.365	.826	-.430
LL	.911	-.285	.297	LL	-.948	-.041	.314
SO ₂	.749	.312	.427	SO ₂	.903	.550	.231
NO _x	.738	-.072	.340	NO _x	-.945	.174	.278
RSPM	.994	.165	-.417	RSPM	-.852	.120	-.509
InhlPrep	.992	.412	-.451	Inhaler	.974	.177	.093

Table 3.38: Component Matrix For 2009 Winter For Specific Medicine

Correlation With VP (In Teal) and RSPM (In Grey)							
	Component				Component		
	1	2	3		1	2	3
wndspd	.244	-.884	.398	Wndspd	.250	-.871	.423
MxT	-.080	-.246	.966	MxT	-.080	-.220	.972
MnT	-.974	.212	-.083	MnT	-.975	.203	-.091
RF	-.612	.256	.563	RF	-.618	.567	.545
RH	-.867	-.486	-.109	RH	-.863	-.495	-.097
VP	.911	.563	.557	VP	.916	.574	.540
CC	-.903	.331	.004	CC	-.906	.424	-.010
LL	.757	.110	.269	LL	.655	.125	.268
SO ₂	.742	.291	.169	SO ₂	.639	.303	.163
NO _x	.741	-.148	.306	NO _x	.641	-.132	.312
RSPM	.961	.508	.030	RSPM	.957	.515	.018
InhlPrep	.953	.541	-.279	Liquids	.975	.384	-.294

b.)

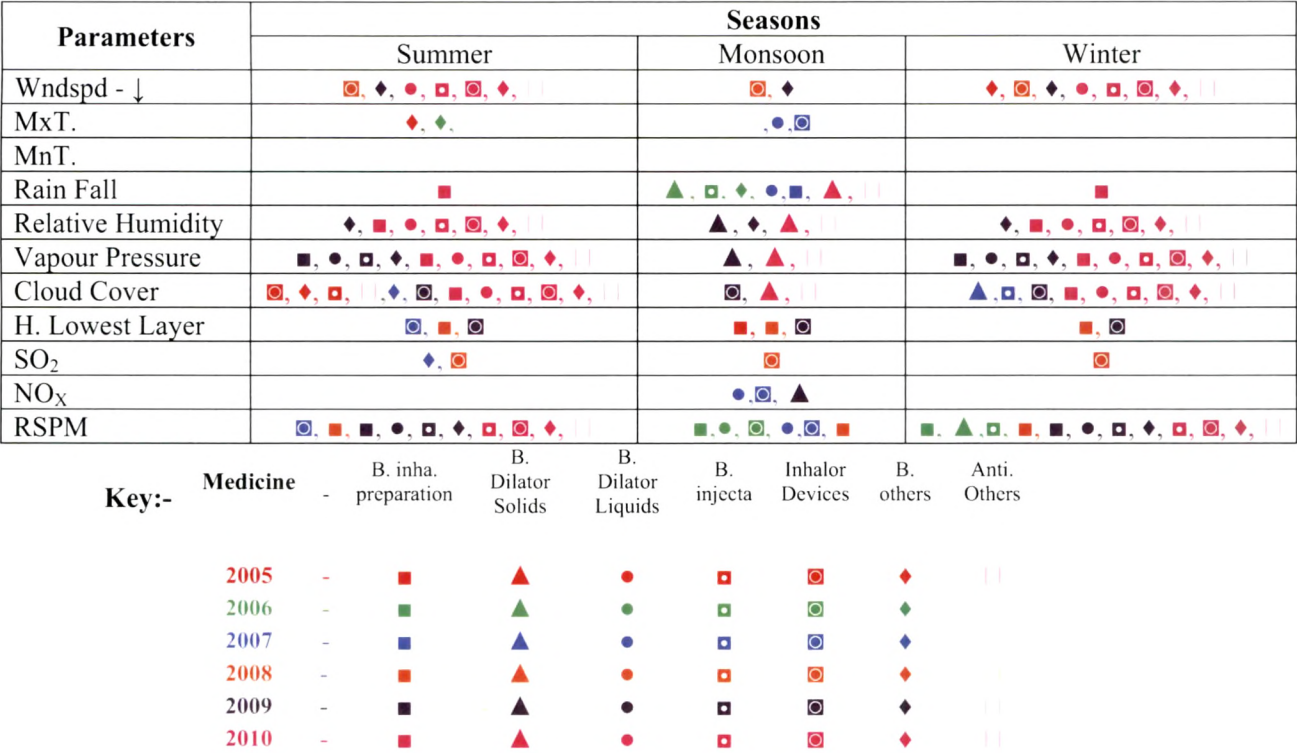
Correlation With LL (In Blue), Wndspd (In Dark Yellow), RH (In D. Blue), VP (In Teal), CC (In Yellow) and RSPM (In Grey)												
	Component			Component			Component			Component		
	1	2	3	1	2	3	1	2	3	1	2	3
wndspd	.243	-.886	.396	Wndspd	.939	-.608	.718					
MxT	-.079	-.248	.966	MxT	-.054	.173	.983					
MnT	-.973	.215	-.081	MnT	-.991	.059	-.121					
RF	-.610	.356	.565	RF	-.671	.675	.308					
RH	-.869	-.483	-.108	RH	.908	-.572	.141					
VP	.908	.564	.559	VP	.970	.679	.299					
CC	-.902	.333	.007	CC	-.945	.300	-.135					
LL	.758	.108	.268	LL	.738	.309	.156					
SO ₂	.743	.289	.168	SO ₂	.603	.429	-.009					
NO _x	.741	-.151	.304	NO _x	.650	.089	.298					
RSPM	.962	.506	.030	RSPM	.900	.558	-.221					
Injecta	.947	.557	-.271	B.other	.962	-.214	-.168					

	Component		
	1	2	3
wndspd	-.296	.881	.369
MxT	.030	.268	.963
MnT	.984	-.173	-.040
RF	.611	-.519	.598
RH	.850	.519	-.084
VP	.610	-.526	.593
CC	.918	-.392	.050
LL	.962	-.145	.233
SO ₂	-.935	-.327	.137
NO _x	-.958	.114	.265
RSPM	-.840	-.543	.006
Inhaler	.994	-.969	.152

b.)

Correlation With Wndspd (In Dark Yellow), RH (In D. Blue), VP (In Teal), CC (In Yellow) and RSPM (In Grey)							
	Component				Component		
	1	2	3		1	2	3
wndspd	.923	-.326	.888	Wndspd	.906	.132	.943
MxT	.854	.194	.483	MxT	.876	-.223	.427
MnT	.263	.962	-.075	MnT	.351	-.886	-.303
RF	.701	.713	.000	RF	.765	-.622	-.168
RH	.959	-.250	.133	RH	.934	.300	.195
VP	.984	-.059	-.168	VP	.971	.191	-.143
CC	.955	-.263	-.139	CC	.924	.377	-.066
LL	-.917	-.272	-.292	LL	-.943	.247	-.223
SO ₂	.809	-.568	-.153	SO ₂	.749	.662	-.007
NO _x	-.760	.056	.647	NO _x	-.741	-.282	.610
RSPM	.945	.532	-.054	RSPM	.990	-.420	-.176
B.other	.908	-.572	-.142	AntiOther	.931	.965	-.260

Table: 3.40 Representation of Seasonal Medicinal sale with the Triggering factors



3.4 DISCUSSION

Changes in certain environmental risk factors and exposures contribute to increased trends in the respiratory diseases, but little information is available relating specific risk factors to longitudinal trends, geographic variability, or high-risk populations (Evalyn *et al.*, 1999). At the national level, there is good evidence that over the last decade, increased sales of respiratory illness drugs were associated with a decline in rates of hospital admission for the disease. The level of drug sales and their trends will reflect not only the burden of respiratory illness but also the proportion of patients being treated (Gupta *et al.*, 2006). Several hypotheses have been proposed to account for the increase, but there is still controversy, and the issue remains unresolved. The present work is an attempt to find the co-relation between the meteorological factors and the respiratory illness medical sale for Vadodara city, an indirect evidence for the prevalence of respiratory illness burden in Vadodara city.

When observed on annual basis in SPSS with all the meteorological factors, pollutants and total respiratory illness medical sale all the three pollutants had strong participatory role and showed a direct correlation with the altered medical sale. Individual meteorological factors also played an important participatory role.

In the treatment of respiratory illness, inhaled medications are generally preferred, which act directly on the airway surface and airway muscles. Moreover, absorption of inhaled medications into the rest of the body is minimal. Bronchodilators open up the air passages making breathing easier. Narrowing of the air passages causes wheezing, commonly seen in people with asthma and chronic obstructive pulmonary disease. Inhaled bronchodilator medications can more quickly open narrowed air passages since they are inhaled directly into the lungs (Nelson *et al.*, 1998; Wallin *et al.*, 1999; Li *et al.*, 1999 and Kips and Pauwels, 2001). The direct costs of treating respiratory illness and indirect costs are substantial (Schramm *et al.*, 2003; Reed *et al.*, 2004 and Thomas *et al.*, 2005).

Annual component matrix analysis was carried out for the individual medical sale as one group and the meteorological parameters and pollutants as another group; it exposed the fact that in 2005 (Table 3.2) increase in **RH** was associated with increase sale of B. Solids and B. Liquids. However, the principal component analysis when carried out for individual medical sale as one group and the rest of the factors as another group for 2006 (Table 3.3), it was established that **RH** was responsible for increasing sale of inhaler devices, B. Liquids and B. Inhalant preparations. At the same time the increasing concentration of **SO₂** was responsible for the increasing sale of B. Injecta, and that the increasing **MxT** was responsible for the increasing sale of B. others. Principal component analysis when carried out for the year 2007 (Table 3.4), it was found that increase in **RH** was responsible increasing sale of B. Solids and that the increasing concentration of **SO₂** was responsible for the increasing sale of B. Others. Patankar *et al.*, (2011) in their investigation have proved the link between air pollution and health impacts for Mumbai, and estimate the monetary burden of these impacts.

When annual component matrix analysis was carried out for the individual medical sale as one group and the meteorological parameters and pollutants as another group; it exposed the fact that in 2008 (Table 3.5), it was observed that **SO₂** and sale of B. Inhalant preparations, inhaler devices and B. Others, **CC** and B. Solids as well as B. Injecta and **RSPM** are positively correlated; wherein the increase in concentration in any of the meteorological factor as well as the pollutant is increasing the sale of the respective medicine.

Principal component analysis for 2009 (Table 3.6) with individual medicine sale revealed that **RH** and **CC** was positively correlated with the sale of B. Inhalant preparations, B. Liquids and B. others. Also, increase in concentration of **NO_x** was responsible for the increasing sale of B. Solids and that increasing **MxT** for the increasing sale of B. Injecta. Similarly in 2010 (Table 3.7), it was observed that increasing concentration of **SO₂** was responsible for the increasing sale of B. Others. Similarly there was a positive correlation between **NO_x** and B. Solids; **CC** and Anti- asthmatics others; **VP** and Anti asthmatics others

In the present study also the increase in the medical sale is dependent on distinct meteorological factors as well as pollutants and that each factor acts as trigger for the increase in the specific medical sale and thus proves the direct link between the triggering factors and respiratory illness.

To have better understanding whether there is any seasonal variation in the triggering factors for the medical sale seasonal extraction was also carried out. 2005 (Table 3.8 and 3.23) summer component matrix analysis revealed that there was a positive correlation with the sale of inhaler devices, B. Others, B. Injecta and anti – asthmatics others and CC. At the same time increasing MxT. was responsible for the increasing sale of B. Others. 2006 (Table 3.9 and 3.24) summer on the other hand revealed that when MxT. was increasing sale of B. Others and Anti – asthmatics others was also increasing. And 2007 summer (Table 3.10 and 3.25), disclosed the fact that sale of Inhalers devices was increasing with the increase in LL and RSPM level in the atmosphere. Also, the sale of B. Others were increasing with the increase in CC and SO₂ level in the atmosphere. In 2008, as observed in Table 3.11 and 3.26, sale of B. Inhalant preparation was increasing with the increasing level of LL and RSPM in the atmosphere. Similarly, sale of inhaler devices was increasing with the increasing wndspd and SO₂. In 2009 (Table 3.12 and 3.27), it revealed that increasing VP and RSPM was responsible for the sale of B. Inhalant preparation, B. Liquids, B. Injecta and B. Others. At the same time, sale of inhaler devices was increasing due to increasing level of CC and LL and that of B. Others was increasing due to increasing RH and wndspd. For 2010 (Table 3.13 and 3.28), increasing concentration of RF, RH, VP and CC was responsible for the increasing sale of B. Inhalant preparations. On the other hand the sale of B. Liquids was increasing due to increasing concentration of VP, CC, Wndspd and RH. At the same time the increasing concentration of wndspd, RH, VP, CC and RSPM was increasing the sale of B. Inecta, Inhaler devices, B.others and Anti-asthmatics others.

Component matrix analysis was also carried out for the individual medical sale as one group and the meteorological parameters and pollutants as another group for monsoon season. In 2005 monsoon (Table no. 3.29), it make known that sale of B. Inhalant preparations was increasing

with the increasing level of **LL** in the atmosphere. During monsoon 2006 (**Table 3.14** and **3.30**) in **RF** was increasing the sale of B. Solids, B. Injecta and B. Others. At the same time increase in **RSPM** concentration was responsible for the increasing sale of B. Inhalant preparation, B. Liquids and inhaler devices. Increase in **max. Temp** was increasing the sale of Anti – asthmatics others. Data analysis for 2007 (**Table 3.15** and **3.31**) monsoon revealed that increase in **NO_x**, **RSPM** and **MxT** and **RF** was responsible for the increase in sale of B. Liquids. Increase in **NO_x** and **RSPM** in combination was also increasing the sale of inhaler devices. Increase in **SO₂** and **RSPM** was increasing the sale of B. Others. Rising **min temp** was increasing the sale of B. Injecta. Hence, it gave a positive correlation between the meteorological parameters, pollution and medication sale. In 2008 (**Table 3.16** and **3.32**), sale of B. Inhalant preparation was increasing with the increasing level of **LL** and **RSPM** in the atmosphere. Similarly, sale of inhaler devices was increasing with the increasing **wndspd** and **SO₂**. For 2009 (**Table 3.17** and **3.33**), increasing **RH**, **VP** and **NO_x** was responsible for the sale of B. Solids. At the same time, sale of inhaler devices was increasing due to increasing level of **CC** and **LL** and that of B. Others was increasing due to increasing **RH** and **wndspd**. In 2010 (**Table 3.18** and **3.34**), it was found that sale of B. Solids and Anti – asthmatic others was increasing due to increasing concentration of **RF**, **RH**, **VP** and **CC**.

Winter season again showed a very different analysis and when component matrix analysis was carried out for the individual medical sale as one group and the meteorological parameters and pollutants as another group, it revealed that for 2005, decrease in **wndspd** was increasing the sale of B. Others. During 2006 (**Table 3.35**) winter increase in sale of B. Inhalant preparations, B. Injecta and B. Solids was due to the increasing level of **RSPM** in the atmosphere to give a positive correlation. At the same time sale of inhaler devices was decreasing to give a negative correlation. When component matrix analysis was carried out for the individual medical sale as one group and the meteorological parameters and pollutants as another group for 2007 (**Table 3.19** and **3.36**), it revealed that increase in **CC** level was increasing the sale of B. Solids and B. Injecta. In 2008 (**Table 3.20** and **3.37**), sale of B. Inhalant preparation was increasing with the increasing level of **LL** and **RSPM** in the atmosphere. Similarly, sale of inhaler devices was increasing with the increasing **wndspd** and **SO₂**. Analysis for 2009 (**Table 3.21** and **3.38**)

revealed that increasing **VP** and **RSPM** was responsible for the sale of B. Inhalant preparation, B. Liquids, B. Injecta and B. Others. At the same time, sale of inhaler devices was increasing due to increasing level of **CC** and **LL** and that of B. Others was increasing due to increasing **RH** and **wndspd**. Whereas in 2010 (Table 3.22 and 3.39), it was found that sale of B. Inhalant preparations was increasing due to increasing concentration of **RF**, **RH**, **VP** and **CC**. Similarly the sale of B. Liquids was increasing due to increasing concentration of **VP**, **CC**, **Wndspd** and **RH**. At the same time the increasing concentration of **wndspd**, **RH**, **VP**, **CC** and **RSPM** was increasing the sale of B. Inecta, Inhaler devices, B.others and Anti-asthmatics others.

Our results are in agreement with the recent work of Schwela (2000), Chauhan and Johnston (2003) and Watts (2006) on the human health effects of current air pollution trends in urban areas are reviewed and summarized that the association of the SO_2 exposure increases the mortality and morbidity. van der Zee *et al.*, (1999) in their studies have reported that proper use of the medication prevents the exacerbations of the respiratory illness.

In the present study the pollutants as well as the meteorological factors were found to be directly showing the co-relation with the medical sale for respiratory illness. The results of this study confirm those of some earlier studies (Roemer *et al.*, 2000), and suggest that aggravation of respiratory illness is related to daily variations in air quality. The increase in medication use with altered meteorological factors and pollution concentration thus can prove to be a marker for increasing respiratory illness. Given the increased prevalence of these diseases, effective predictions would benefit a large segment of the population. As the link between triggering factors in the form of meteorology as well as the pollutants thus is an indirect evidence to prove the prevailing condition of the illness and also indicate that it may be appropriate to examine severe respiratory illness symptoms separately.

3.5 CONCLUSION:

The aim of the present study was to find the correlation and interdependence between the meteorological factors and pollution level concentration in the city with the sale of respiratory illness medicines in the city. In total 18 parameters (8 meteorological + 3 pollutants + 7 medicines sales) were applied on SPSS 12.0 to find the correlation between each of them. It was found that pollutants as well as the meteorological factors were found to be directly showing the co-relation with the medical sale for respiratory illness. Also, it was observed that as and how the years were passing by the role of meteorological parameters in the sale of medicines was increasing. Hence, our next aim was find the correlation between the asthma exacerbations and the environmental factors in the vadodara city to identify the season in particular affecting the asthma exacerbations as well as the role of gender and age in the exacerbations trend.