

Table 6. Research in Malaysia*

Citation	Design	Study Location	Study Period	Study Sample	Pollutants	Health Outcomes	Summary of Published Findings
Hashim JH, Hashim Z, Omar A, et al. 2000. Blood lead levels of urban and rural Malaysian primary school children. <i>Asia Pac J Public Health</i> 12:65–70.	Cross sectional	Malaysia Kuala Lumpur Kemaman Setiu	—	346 school-children	Lead	Respirable and blood lead concentrations	Respirable and blood lead concentrations were highest in schoolchildren in urban Kuala Lumpur, followed by semi-urban Kemaman and rural Setiu. Excessive blood lead concentrations (> 10 µg/dL) were found in 6.36% of the children overall and in 11.73% in Kuala Lumpur. The Kuala Lumpur children had a 25 times greater risk of excessive blood lead concentrations than the Kemaman and Setiu children did.
Mott JA, Mannino DM, Alverson CJ, et al. 2005. Cardiorespiratory hospitalizations associated with smoke exposure during the 1997, Southeast Asian forest fires. <i>Int J Hyg Environ Health</i> 208:75–85.	Cohort	Malaysia Kuching	1995–1998	Patients admitted to 7 hospitals	Forest-fire smoke	Hospitalizations (all-cause, respiratory disease, cardiorespiratory disease, circulatory disease, COPD, asthma)	Significant fire-related increases were observed in respiratory hospitalizations, especially for COPD and asthma. Survival analyses indicated that people > 65 yr with previous hospital admissions were significantly more likely to be rehospitalized after the fires for any cause, cardiorespiratory disease, and respiratory disease.
Sastry N. 2002. Forest fires, air pollution, and mortality in southeast Asia. <i>Demography</i> 39:1–23.	Time series (episode)	Malaysia Multiple cities	1997	All deaths	Forest-fire smoke	Mortality	Smoke haze from widespread forest fires had a deleterious effect on the health of the population.

* Last updated September 2007. — = not provided.