

械換気の使用が SBS 症状を下げるという共通の結果が得られていた。子どもを対象に行われた研究は、中国の大気汚染レベルの高い地域に限定されており、一般環境レベルでの研究が必要とされる。換気装置の導入や使用、ダンプネスの改善が SBS 有症率の低下につながると考えられる。一方、換気をして排出されない SVOC のような新規の化学物質による SBS への影響に関する知見は乏しく、今後はこのような化学物質に着目した検討が必要であると考えられる。

## ②いわゆる化学物質過敏症に関する世界の動向

化学物質過敏症を訴える患者の身体不調と住宅やシックハウス症候群との関連を逐次検討するうえで、患者の住む住宅や勤務先における化学物質曝露に関する実際の測定データや情報があまりない場合は、近隣の保健所や衛生研究所、労働衛生機関などの相談機関を紹介する必要がある。曝露を推定できるデータがないとき、あるいはすでに環境が改善されているにもかかわらず症状が続くときには、本当に化学物質が問題なのかどうかを検討する必要がある。過去の報告では、実際に自宅などを測定しても厚生労働省のガイドラインを下回るケースが多く、症状が化学物質によるものとは判断できないことがあるとされる。その場合には化学物質ではなくカビやダニアレルゲンなどの生物学的要因、あるいは湿度環境が原因のこともありうる。掃除や換気などの住まい方の改善により症状が良くなることも考えられる。その上で、北欧で行われているマインドフルネス認知療法は（化学物質そのものに対する治療ではないが）、症状を和らげて患者の生活の質を向上させるためには役立つのではないかと勧められる(Hauge et al., 2015; Skovbjerg et al., 2012a)。

## F. 研究発表

### 英語論文

1) Ait Bamai Y, Araki A, Kawai T, Tsuboi T, Yoshioka E, Kanazawa A, Cong S, Kishi R: Comparisons of urinary phthalate

metabolites and daily phthalate intakes among Japanese families. *International Journal of Hygiene and Environmental Health*; 2015;218(5):461-70. 2015.

### その他（解説など）

1) 荒木敦子, アイツバマイゆふ, 岸玲子. 乳幼児のアレルギーと胎児期・小児期の可塑剤、難燃剤曝露. *公衆衛生*. 医学書院. 2015.79(11).  
2) 荒木敦子, アイツバマイゆふ, 岸玲子. 環境化学物質の曝露実態(4)短半減期化学物質の曝露実態. *公衆衛生*. 医学書院. 2015.79(7).

### 国際学会発表

1) Araki A, Ait Bamai Y, Kishi R. Allergic diseases in relation to phthalates in house dust and urine. 27th Conference of the International society for environmental epidemiology. Sao Paulo, Brazil (2015.9)

## G. 知的財産権の出願・登録状況

該当なし

### 引用文献

Alessandrini M, Micarelli A, Bruno E, Ottaviani F, Conetta M, Cormano A, et al.,.. Intranasal administration of hyaluronan as a further resource in olfactory performance in multiple chemical sensitivity syndrome. *Int J Immunopathol Pharmacol* 2013; 26: 1019-25.

American Academy of Allergy, Asthma and Immunology Board of Directors. Position statement: idiopathic environmental intolerances. *J Allergy Clin Immunol*; 113:36-40. 1999.

American Academy of Allergy and Clinical Immunology Executive Committee. Position statement: Clinical ecology. *J Allergy Clin Immunol*; 78:269-271. 1986.

- American College of Physicians. Clinical ecology. *Ann Intern Med* 1989; 111: 168-78.
- American Medical Association, Council on Scientific Affairs. Clinical ecology. *JAMA* 1992; 268: 3465-7.
- Araki A, Watanabe K, Eitaki Y, Kawai T, Kishi R. The feasibility of aromatherapy massage to reduce symptoms of Idiopathic Environmental Intolerance: a pilot study. *Complement Ther Med* 2012; 20: 400-8.
- Ashford NA, Miller CS. Low-level chemical sensitivity: current perspectives. *International Archives of Occupational and Environmental Health* 1996; 68: 367-376.
- Azuma K, Ikeda K, Kagi N, Yanagi U, Osawa H. Prevalence and risk factors associated with nonspecific building-related symptoms in office employees in Japan: relationships between work environment, Indoor Air Quality, and occupational stress. *Indoor Air* 2015; 25: 499-511.
- Bakke JV, Norback D, Wieslander G, Hollund BE, Florvaag E, Haugen EN, et al., Symptoms, complaints, ocular and nasal physiological signs in university staff in relation to indoor environment - temperature and gender interactions. *Indoor Air* 2008; 18: 131-43.
- Barrett S. MCS: multiple chemical sensitivity. New York: American Council on Science and Health 1994.
- Berg ND, Berg Rasmussen H, Linneberg A, Brasch-Andersen C, Fenger M, Dirksen A, et al., Genetic susceptibility factors for multiple chemical sensitivity revisited. *International Journal of Hygiene and Environmental Health* 2010; 213: 131-139.
- Binkley K, King N, Poonai N, Seeman P, Ulpian C, Kennedy J. Idiopathic environmental intolerance: increased prevalence of panic disorder-associated cholecystokinin B receptor allele 7. *J Allergy Clin Immunol* 2001; 107: 887-90.
- Black DW, Doebbeling BN, Voelker MD, Clarke WR, Woolson RF, Barrett DH, et al., Multiple chemical sensitivity syndrome - Symptom prevalence and risk factors in a military population. *Archives of Internal Medicine* 2000; 160: 1169-1176.
- Bourbeau J, Brisson C, Allaire S. Prevalence of the sick building syndrome symptoms in office workers before and after being exposed to a building with an improved ventilation system. *Occup Environ Med* 1996; 53: 204-10.
- Bourbeau J, Brisson C, Allaire S. Prevalence of the sick building syndrome symptoms in office workers before and six months and three years after being exposed to a building with an improved ventilation system. *Occup Environ Med* 1997; 54: 49-53.
- Brauer C, Kolstad H, Orbaek P, Mikkelsen S. No consistent risk factor pattern for symptoms related to the sick building syndrome: a prospective population based study. *Int Arch Occup Environ Health* 2006; 79: 453-64.
- Committee on Environmental Hypersensitivities. Ministry of Health TO. Report of the ad hoc committee on environmental hypersensitivities disorders.

1985.  
California Medical Association Scientific Board Task Force on Clinical Ecology. Clinical ecology—a critical appraisal. *West J Med* 1986; 144.
- Cui X, Lu X, Hiura M, Oda M, Miyazaki W, Katoh T. Evaluation of genetic polymorphisms in patients with multiple chemical sensitivity. *PLoS One* 2013; 8: e73708.
- Cullen MR. Multiple chemical sensitivities: summary and directions for future investigators. *Occupational Medicine* 1987; 2: 801-4.
- Engvall K, Norrby C, Bandel J, Hult M, Norback D. Development of a multiple regression model to identify multi-family residential buildings with a high prevalence of sick building syndrome (SBS). *Indoor Air* 2000; 10: 101-10.
- Engvall K, Norrby C, Norback D. Sick building syndrome in relation to building dampness in multi-family residential buildings in Stockholm. *Int Arch Occup Environ Health* 2001; 74: 270-8.
- Engvall K, Norrby C, Norback D. Ocular, nasal, dermal and respiratory symptoms in relation to heating, ventilation, energy conservation, and reconstruction of older multi-family houses. *Indoor Air* 2003; 13: 206-11.
- Fujimori S, Hiura M, Yi CX, Xi L, Katoh T. Factors in genetic susceptibility in a chemical sensitive population using QEESI. *Environ Health Prev Med* 2012; 17: 357-63.
- Hauge CR, Rasmussen A, Piet J, Bonde JP, Jensen C, Sumbundu A, et al.,... Mindfulness-based cognitive therapy (MBCT) for multiple chemical sensitivity (MCS): Results from a randomized controlled trial with 1 year follow-up. *Journal of Psychosomatic Research* 2015; 79: 628-634.
- Idiopathic environmental intolerances. *Journal of Allergy and Clinical Immunology* 1999; 103: 36-40.
- Jaakkola JJ, Miettinen P. Type of ventilation system in office buildings and sick building syndrome. *Am J Epidemiol* 1995a; 141: 755-65.
- Jaakkola JJ, Miettinen P. Ventilation rate in office buildings and sick building syndrome. *Occup Environ Med* 1995b; 52: 709-14.
- Jaakkola MS, Jaakkola JJ. Office equipment and supplies: a modern occupational health concern? *Am J Epidemiol* 1999; 150: 1223-8.
- Jaakkola MS, Yang L, Ieromnimon A, Jaakkola JJ. Office work exposures [corrected] and respiratory and sick building syndrome symptoms. *Occup Environ Med* 2007; 64: 178-84.
- Jung CC, Liang HH, Lee HL, Hsu NY, Su HJ. Allostatic load model associated with indoor environmental quality and sick building syndrome among office workers. *PLoS One* 2014; 9: e95791.
- Kanazawa A, Saijo Y, Tanaka M, Yoshimura T, Chikara H, Takigawa T, et al.,... Nationwide study of sick house syndrome: comparison of indoor environment of newly built dwellings between Sapporo city and Southern areas including those in Honshu and Kyushu. *Nihon Eiseigaku Zasshi* 2010a; 65: 447-58.
- Kanazawa A, Saito I, Araki A, Takeda M, Ma M, Saijo Y, et al., Association

- between indoor exposure to semi-volatile organic compounds and building-related symptoms among the occupants of residential dwellings. *Indoor Air* 2010b; 20: 72-84.
- Katerndahl, D.A., Bell, I. R., Palmer, R. F., Miller, C. S., Chemical intolerance in primary care settings: prevalence, comorbidity, and outcomes. *Ann Fam Med*, 2012. 10(4): p. 357-65.
- Kishi R, Saijo Y, Kanazawa A, Tanaka M, Yoshimura T, Chikara H, et al.,... Regional differences in residential environments and the association of dwellings and residential factors with the sick house syndrome: a nationwide cross-sectional questionnaire study in Japan. *Indoor Air* 2009; 19: 243-54.
- Kubo T, Mizoue T, Ide R, Tokui N, Fujino Y, Minh PT, et al.,... Visual display terminal work and sick building syndrome--the role of psychosocial distress in the relationship. *J Occup Health* 2006; 48: 107-12.
- Li L, Adamkiewicz G, Zhang Y, Spengler JD, Qu F, Sundell J. Effect of Traffic Exposure on Sick Building Syndrome Symptoms among Parents/Grandparents of Preschool Children in Beijing, China. *PLoS One* 2015; 10: e0128767.
- Marmot AF, Eley J, Stafford M, Stansfeld SA, Warwick E, Marmot MG. Building health: an epidemiological study of "sick building syndrome" in the Whitehall II study. *Occup Environ Med* 2006; 63: 283-9.
- Matsuzaka Y, Ohkubo T, Kikuti YY, Mizutani A, Tsuda M, Aoyama Y, et al.,... Association of sick building syndrome with neuropathy target esterase (NTE) activity in Japanese. *Environ Toxicol* 2014; 29: 1217-26.
- McKeown-Eyssen G, Baines C, Cole DE, Riley N, Tyndale RF, Marshall L, et al., Case-control study of genotypes in multiple chemical sensitivity: CYP2D6, NAT1, NAT2, PON1, PON2 and MTHFR. *Int J Epidemiol* 2004; 33: 971-8.
- Miller CS. Chemical sensitivity: symptom, syndrome or mechanism for disease? *Toxicology* 1996; 111: 69-86.
- Mizoue T, Andersson K, Reijula K, Fedeli C. Seasonal variation in perceived indoor environment and nonspecific symptoms in a temperate climate. *J Occup Health* 2004; 46: 303-9.
- Mizoue T, Reijula K, Andersson K. Environmental tobacco smoke exposure and overtime work as risk factors for sick building syndrome in Japan. *Am J Epidemiol* 2001; 154: 803-8.
- Multiple Chemical Sensitivities: Idiopathic Environmental Intolerance. *Journal of Occupational and Environmental Medicine* 1999; 41: 940-942.
- Nakayama K, Morimoto K. Relationship between, lifestyle, mold and sick building syndromes in newly built dwellings in Japan. *Int J Immunopathol Pharmacol* 2007; 20: 35-43.
- National Research Council. Multiple chemical sensitivities. . National Academy Press, Washington (DC) 1992.
- Norback D, Nordstrom K. Sick building syndrome in relation to air exchange rate, CO(2), room temperature and relative air humidity in university computer

- classrooms: an experimental study. *Int Arch Occup Environ Health* 2008; 82: 21-30.
- Report of multiple chemical sensitivities (MCS) workshop: International Programme on Chemical Safety (IPCS) German Workshop on Multiple Chemical Sensitivities - Berlin, Germany, 21-23 February 1996. *International Archives of Occupational and Environmental Health* 1997; 69: 224-226.
- Royal College of Physicians and Royal College of Pathologists. Good allergy practice—standards of care for providers and purchasers of allergy services within the National Health Service. *Clin Exp Allergy* 1995; 25.
- Runeson R, Wahlstedt K, Wieslander G, Norback D. Personal and psychosocial factors and symptoms compatible with sick building syndrome in the Swedish workforce. *Indoor Air* 2006; 16: 445-53.
- Sahlberg B, Mi YH, Norback D. Indoor environment in dwellings, asthma, allergies, and sick building syndrome in the Swedish population: a longitudinal cohort study from 1989 to 1997. *Int Arch Occup Environ Health* 2009; 82: 1211-8.
- Sahlberg B, Norback D, Wieslander G, Gislason T, Janson C. Onset of mucosal, dermal, and general symptoms in relation to biomarkers and exposures in the dwelling: a cohort study from 1992 to 2002. *Indoor Air* 2012; 22: 331-8.
- Saijo Y, Kanazawa A, Araki A, Morimoto K, Nakayama K, Takigawa T, et al., Relationships between mite allergen levels, mold concentrations, and sick building syndrome symptoms in newly built dwellings in Japan. *Indoor Air* 2011; 21: 253-63.
- Saijo Y, Kishi R, Sata F, Katakura Y, Urashima Y, Hatakeyama A, et al., Symptoms in relation to chemicals and dampness in newly built dwellings. *Int Arch Occup Environ Health* 2004; 77: 461-70.
- Schnakenberg E, Fabig KR, Stanulla M, Strobl N, Lustig M, Fabig N, et al., A cross-sectional study of self-reported chemical-related sensitivity is associated with gene variants of drug-metabolizing enzymes. *Environ Health* 2007; 6: 6.
- Skovbjerg S, Christensen KB, Ebstrup JF, Linneberg A, Zachariae R, Elberling J. Negative affect is associated with development and persistence of chemical intolerance: a prospective population-based study. *J Psychosom Res* 2015; 78: 509-14.
- Skovbjerg S, Hauge CR, Rasmussen A, Winkel P, Elberling J. Mindfulness-based cognitive therapy to treat multiple chemical sensitivities: a randomized pilot trial. *Scand J Psychol* 2012a; 53: 233-8.
- Skovbjerg S, Rasmussen A, Zachariae R, Schmidt L, Lund R, Elberling J. The association between idiopathic environmental intolerance and psychological distress, and the influence of social support and recent major life events. *Environ Health Prev Med* 2012b; 17: 2-9.
- Skyberg K, Skulberg KR, Eduard W, Skaret E, Levy F, Kjuus H. Symptoms prevalence among office

- employees and associations to building characteristics. *Indoor Air* 2003; 13: 246-52.
- Staudenmayer H, Selner J, Buhr M: Double-blinded provocation chamber challenges in 20 patients presenting with “multiple chemical sensitivity”. *Regul Toxicol Pharmacol* 1993; 18:44-53.
- Sparks PJ. Idiopathic environmental intolerances: overview. *Occup Med* 2000; 15: 497-510.
- Takeda M, Saijo Y, Yuasa M, Kanazawa A, Araki A, Kishi R. Relationship between sick building syndrome and indoor environmental factors in newly built Japanese dwellings. *Int Arch Occup Environ Health* 2009; 82: 583-93.
- Takigawa T, Saijo Y, Morimoto K, Nakayama K, Shibata E, Tanaka M, et al., A longitudinal study of aldehydes and volatile organic compounds associated with subjective symptoms related to sick building syndrome in new dwellings in Japan. *Sci Total Environ* 2012; 417-418: 61-7.
- Takigawa T, Wang BL, Saijo Y, Morimoto K, Nakayama K, Tanaka M, et al., Relationship between indoor chemical concentrations and subjective symptoms associated with sick building syndrome in newly built houses in Japan. *Int Arch Occup Environ Health* 2010; 83: 225-35.
- Takigawa T, Wang BL, Sakano N, Wang DH, Ogino K, Kishi R. A longitudinal study of environmental risk factors for subjective symptoms associated with sick building syndrome in new dwellings. *Sci Total Environ* 2009; 407: 5223-8.
- Teculescu DB, Sauleau EA, Massin N, Bohadana AB, Buhler O, Benamghar L, et al., Sick-building symptoms in office workers in northeastern France: a pilot study. *Int Arch Occup Environ Health* 1998; 71: 353-6.
- Wang BL, Li XL, Xu XB, Sun YG, Zhang Q. Prevalence of and risk factors for subjective symptoms in urban preschool children without a cause identified by the guardian. *Int Arch Occup Environ Health* 2012; 85: 483-91.
- Wang BL, Takigawa T, Takeuchi A, Yamasaki Y, Kataoka H, Wang DH, et al.,.. Unmetabolized VOCs in urine as biomarkers of low level exposure in indoor environments. *J Occup Health* 2007; 49: 104-10.
- Wang J, Li B, Yang Q, Yu W, Wang H, Norback D, et al., Odors and sensations of humidity and dryness in relation to sick building syndrome and home environment in Chongqing, China. *PLoS One* 2013; 8: e72385.
- Zhang X, Li F, Zhang L, Zhao Z, Norback D. A longitudinal study of sick building syndrome (SBS) among pupils in relation to SO<sub>2</sub>, NO<sub>2</sub>, O<sub>3</sub> and PM<sub>10</sub> in schools in China. *PLoS One* 2014; 9: e112933.
- Zhang X, Sahlberg B, Wieslander G, Janson C, Gislason T, Norback D. Dampness and moulds in workplace buildings: associations with incidence and remission of sick building syndrome (SBS) and biomarkers of inflammation in a 10 year follow-up study. *Sci Total Environ* 2012; 430: 75-81.
- Zhang X, Zhao Z, Nordquist T, Larsson L,

- Sebastian A, Norback D. A longitudinal study of sick building syndrome among pupils in relation to microbial components in dust in schools in China. *Sci Total Environ* 2011a; 409: 5253-9.
- Zhang X, Zhao Z, Nordquist T, Norback D. The prevalence and incidence of sick building syndrome in Chinese pupils in relation to the school environment: a two-year follow-up study. *Indoor Air* 2011b; 21: 462-71.
- 石川哲. 化学物質過敏症. *アレルギー*, 2001 ; 50(4) : 361-364.
- 厚生労働科学研究「シックハウス症候群の実態解明および具体的対応方策に関する研究」研究班. シックハウス症候群に関する相談と対策マニュアル. (財)日本公衆衛生協会, 2009年9月.
- 辻内裕子, 熊野宏昭, 吉内一浩, 辻内琢也, 中尾睦宏, 久保木富房, 岡野禎治. 化学物質過敏症における心身医学的検討. *心身医学*, 2002; 42: 206-216.
- 長谷川 眞紀, 大友 守, 水城 まさみ, 秋山一男. 化学物質過敏症の診断 化学物質負荷試験 51 症例のまとめ. *アレルギー*, 2009. 58(2): p. 112-118.
- 平田 衛, 吉田 辰. 特発性環境不耐症患者(いわゆる「化学物質過敏症」)の発症における心理負荷. *日本職業・災害医学会会誌*, 2015; 63: 109-115.
- 宮田 幹夫, 坂部 貢, 松井 孝子, 遠乗 秀樹, 石川 哲. 【環境医学と神経眼科】 多種類化学物質過敏症患者の二重盲検ホルムアルデヒド負荷試験と瞳孔. *神経眼科*, 2002. 19(2): p. 155-161.
- 吉田 辰夫, 平田 衛, 小川 真規. 特発性環境不耐症(いわゆる「化学物質過敏症」)患者に対する単盲検法による化学物質曝露負荷試験. *日本職業・災害医学会会誌*, 2012. 60(1): p. 11-17.

表 1. オフィスビルにおける研究

著者	年	国	デザイン	対象・年齢	調査票	曝露因子・測定物質	結果
Jaakkola	1995	Finland	cross-sectional	399 workers from 14 mechanically ventilated office buildings	SBS の 9 症状 at least weekly, work related	Ventilation rate	ORs for ocular (1.27, 1.11 to 1.46), nasal (1.17, 1.06 to 1.29), skin symptoms (1.18, 1.05 to 1.32), and lethargy (1.09, 1.00 to 1.19) increased significantly by a unit decrease in ventilation from 25 to 0 l/s per person.
Jaakkola	1999	Finland	cross-sectional	2,678 workers in 41 office buildings	SBS の 9 症状 at least weekly, work related	office equipment and supplies	Work with self-copying paper was significantly related to weekly work-related eye, nasopharyngeal, and skin symptoms, headache and lethargy, as well as to the occurrence of wheezing, cough, mucus production, sinusitis, and acute bronchitis.
Jaakkola	1995	Finland	cross-sectional	399 workers from 14 office buildings	SBS の 9 症状 at least weekly, work related:(previous year)	ventilation type (airflow) and other building characteristics	The ORs for ocular, nasal, skin symptoms, and lethargy increased significantly by a unit decrease in ventilation from 25 to 0 l/s per person.
Jaakkola	2007	Finland	cross-sectional	342 office workers	独自の調査票：SBS-related の 6 症状	carbonless copy paper (CCP), paper dust, and fumes from photocopiers and printers (FPP)	<ul style="list-style-type: none"> <li>• All three exposures were related to a significantly increased risk of general symptoms.</li> <li>• A dose-response relations was observed between the number of exposures and occurrence of headache. The risk of tonsillitis and sinus infections also increased with increasing number of exposures.</li> </ul>
Teculescu	1998	France	cross-sectional	Personnel of air conditioned building (n=425), and of a naturally ventilated building (n=351)	独自の調査票: Burge et al., (1990)	Air-conditioning Air temperature and humidity, bacterial and fungal densities	Air-conditioning was associated with an increased prevalence of symptoms (odds ratios-OR-between 1.54 and 2.84). A significant increase in sickness absence was also found among subjects working in air-conditioned offices.
Mizoue	2001	Japan	cross-sectional	1281 workers	MM040EA	working conditions	Both ETS exposure and extensive amounts of overtime work contribute to the development of SBS symptoms and that the association between overtime and SBS can be explained substantially by the work environment and personal lifestyle correlated with overtime.



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分担研究報告書

表 1. オフィスビルにおける研究（つづき）

著者	年	国	デザイン	対象・年齢	調査票	曝露因子・測定物質	結果
Mizoue	2004	Japan	cross-sectional	116 workers	MM040EA	4 seasons	Symptoms in the mucous membrane and skin increased considerably in the winter and spring.
Kubo	2006	Japan	cross-sectional	1881 office workers	MM040EA	VDT work	<ul style="list-style-type: none"> <li>The OR for SBS was significantly 2.5 times higher for men engaged in VDT work for 4 or more hours a day compared with less than 1 hour a day, showing a significant trend association.</li> </ul>
Azuma	2014	Japan	cross-sectional	3335 employees	United States Environmental Protection Agency (USEPA) Questionnaire	Office indoor quality and Occupational Stress	SBS was associated with multiple factors, including work environment, Indoor Air Quality, and occupational stress. Improving the physical office environment appears to be important for the health of employees, and it may be best achieved by providing appropriate air-conditioning and a clean and uncrowded workspace.
Skyberg	2003	Norway	cross-sectional	3562 employees in 32 buildings	16 on specific symptoms The Swedish Indoor Air Questionnaire (Stenberg et al., 1993)	floor surface materials, ventilation, cleaning procedures, heating and cooling, individual factors	Women reported symptoms more frequently than men. Employees with allergy had a 1.8-2.5 times risk of reporting a high score for general, skin, or mucosal symptoms. The risk of a high symptom score increased with VDU work time. Passive smoking and psychosocial load were also relatively strong predictors of symptoms.
Runeson	2006	Sweden	cross-sectional	532 general population aged 20-65yrs.	16 different SBS symptoms, used in earlier investigations (Norbäck and Edling 1991).	demand-control-support (DCS), personal factors	Female gender, low age, asthma, atopy and psychosocial work environment are associated with SBS.
Jung	2014	Taiwan	cross-sectional	143 office workers (≥20 yrs.) in 21 Office spaces	WHO の定義.SBS standard questionnaire	8-OHdG (8-hydroxydeoxyguanosine)	The risks for SBS syndromes were related with neuroendocrine and metabolic system of the AL.
Marmot	2006	UK	cross-sectional	4052 participants aged (42-62 years) in 44 buildings	独自の調査票“Have you had any of the following symptoms in the last 14 days?”.	physical and psychosocial work environment	<ul style="list-style-type: none"> <li>No significant relation was found between most aspects of the physical work environment and symptom prevalence.</li> <li>Only psychosocial work characteristics and control over the physical environment were independently associated with symptoms .</li> </ul>
Bourbeau	1996	Canada	cross-sectional	1390 workers in 5 buildings	独自の調査票	new building with an improved ventilation system.	The prevalence of most symptoms decreased when workers moved to the new building: skin (54%), respiratory system (53%), nose and throat (46%), fatigue (44%), headache (37%), eyes (23%).

表 2. 学校における研究

著者	年	国	デザイン	対象・年齢	調査票	曝露因子	バイオマーカー	結果
Bakke	2008	Norway	cross-sectional	173 employees in four university buildings	MM040 NA	Room temperature, humidity, CO2, PM10, Air velocity, lightning, Noise	BUT, selfreported-BUT, NAL, ECP, MPO, Total serum IgE, specific IgE	Thermal climate in university buildings may be associated with both perceptions and physiological signs. Reduced night time air temperature, increased difference in air temperature between day and night, and fast changes in air temperature might impair indoor environment.
Zhang	2014	China	prospective	2134 pupils	junior high school	16 symptoms compatible with SBS: (Bjornsson et al., 1998)	-	At baseline, both indoor and outdoor SO2 were found positively associated with prevalence of school-related symptoms. Indoor O3 was shown to be positively associated with prevalence of skin symptoms. At follow-up, indoor PM10 was found to be positively associated with new onset of skin, mucosal and general symptoms.CO2 and RH were positively associated with new onset of mucosal, general and school-related symptoms.
Zhang	2011	China	prospective	1143 school children (11–15 yrs.)	School	16 symptoms compatible with SBS(Bjornsson et al., 1998 ; Sahlberg et al., 2012).	Airborne pet al.,lergens, fungal DNA 30, Stachybotrys DNA 30, and Asp/Pen DNA in the dust	<ul style="list-style-type: none"> <li>• Bacterial compounds (LPS and MuA) seem to protect against the development of mucosal and general , but fungal exposure measured as fungal DNA could increase the incidence of school-related .</li> </ul>
Zhang	2011	China	prospective	1143 school children (11–15 yrs.)	Classroom	16 symptoms compatible with SBS(Bjornsson et al., 1998 ; Sahlberg et al., 2012).	SO2, NO2, CO2, Temperature, Relative humidity	<ul style="list-style-type: none"> <li>• The prevalence study indicated that NO2 and SO2 might be related to various of the SBS type.</li> <li>• Parental asthma and allergy (heredity) and to some extent own atopy were consistent risk factors for both prevalence and incidence of SBS ,</li> </ul>

表 3. 集合住宅における研究

著者	年	国	デザイン	対象・年齢	調査票	曝露因子	結果
Engvall	2000	Sweden	cross-sectional	609 multi-family buildings with 14,235 dwellings	MM040NA: Weekly symptoms	personal factors and building age	SBS is related to personal factors, building age, and ownership of the building. To identify multi-family buildings with more SBS than expected, it is necessary to adjust for ownership and population characteristics.
Engvall	2001	Sweden	cross-sectional	9808 participants in the dwellings in Stockholm	MM040NA: Weekly symptoms	Dampness	A combination of mouldy odour and signs of high air humidity was related to an increased occurrence of all types of symptoms. A combination of mouldy odour and water leakage.
Engvall	2003	Sweden	cross-sectional	4815 inhabitants in 231 multi-family buildings built before 1961	MM040NA Weekly symptoms	heating, ventilation, energy conservation, and reconstruction	<ul style="list-style-type: none"> <li>• Subjects in buildings with a mechanical ventilation system had less ocular and nasal symptoms.</li> <li>• Heating by electric radiators, and wood heating was associated with an increase of most symptoms.</li> <li>• Major reconstruction of the interior of the building was associated with an increase of most symptoms.</li> </ul>

表4. 新築一戸建て住居における研究

著者	年	国	デザイン	対象・年齢	調査票	曝露因子	測定物質	結果
Saijo	2004	Japan	cross-sectional	317 residents	MM040EA	VOCs and Dampness	17 VOCs	・ VOCs were related to the symptoms, and TVOC was related to throat and respiratory symptoms, although the concentrations of VOCs were relatively low.
Wang	2007	Japan	cross-sectional	24 subjects in 13 houses	MM040EA	VOCs in air and urine	Toluene, ethylbenzene, xylene isomers, styrene and p-dichlorobenzene in the air and urine	Only air VOCs in the bedroom influenced the morning urinary VOC concentrations.
Nakayama	2007	Japan	cross-sectional		MM040EA	Mold, lifestyle	-	presence of <i>Penicillium</i> sp. in females and <i>Alternaria alternata</i> in males increases the risk of SBS, whereas sufficient sleep, moderate alcohol consumption for males, and fewer working hours for females might alleviate SBS symptoms.
Takeda	2009	Japan	cross-sectional	343 residents in 104 houses	MM040EA	Dampness and indoor chemicals	Formaldehyde, acet al., dehyde, VOCs, airborne fungi, and dust mite allergen	Dampness, formaldehyde, and alpha-pinene had significantly higher ORs for SBS symptoms.
Takigawa	2010	Japan	cross-sectional	1,479 residents in 425 houses	MM040EA	Indoor aldehydes and VOCs	-	Formaldehyde dose-dependently showed to be a significant risk factor for SBS.
Kanazawa	2010	Japan	cross-sectional	134 occupants	MM040EA	SVOCs (PFRs and phthalates) in indoor air and dust	-	TBP was strongly and directly associated with mucosal symptoms of SBS. DEP and TBEP were inversely associated with SBS.
Saijo	2011	Japan	cross-sectional	1479 residents in 425 houses	MM040EA	mite allergen and airborne fungi	mite allergen (Der 1), airborne fungi, aldehydes, and VOCs	・ Der 1 had a significantly high OR for nose symptoms. ・ <i>Rhodotorula</i> had a significantly high OR for any symptoms, and <i>Aspergillus</i> had significantly high OR for eye symptoms.

表 5. 子どもを対象とした研究

著者	年	国	デザイン	対象・年齢	セッティング	調査票	測定物質	結果
Li	2015	China	cross-sectional	children	kindergartens	CCHHstudy Northern Swedish Office Illness study で使用した調査票	-	Univariate analysis showed that living near a main road or highway (OR = 1.40), female gender (OR = 1.44), and ETS (OR = 1.13) were significant risk factors for general symptoms. The adjusted odds ratio (aOR) for the association between living close to a highway and general symptoms remained significant in the multivariable model (aOR = 1.39; 95% CI = 1.21: 1.59).
Wang	2012	China	cross-sectional	661 urban preschool children	House and kindergarten	MM075NA	-	Furniture materials, traffic pollution, kindergarten environment quality and allergies were associated with SSWICG and mucosal, dermal and general .
Zhang	2014	China	prospective	2134 pupils	junior high school	16 symptoms compatible with SBS: (Bjornsson et al., 1998)	-	At baseline, both indoor and outdoor SO <sub>2</sub> were found positively associated with prevalence of school-related symptoms. Indoor O <sub>3</sub> was shown to be positively associated with prevalence of skin symptoms. At follow-up, indoor PM <sub>10</sub> was found to be positively associated with new onset of skin, mucosal and general symptoms. CO <sub>2</sub> and RH were positively associated with new onset of mucosal, general and school-related symptoms.
Zhang	2011	China	prospective	1143 school children (11-15 yrs.)	School	16 symptoms compatible with SBS(Bjornsson et al., 1998 ; Sahlberg et al., 2012).	Airborne pet al., lergens, fungal DNA 30, Stachybotrys DNA 30, and Asp/Pen DNA in the dust	<ul style="list-style-type: none"> <li>• Bacterial compounds (LPS and MuA) seem to protect against the development of mucosal and general , but fungal exposure measured as fungal DNA could increase the incidence of school-related .</li> </ul>
Zhang	2011	China	prospective	1143 school children (11- 15 yrs.)	Classroom	16 symptoms compatible with SBS(Bjornsson et al., 1998 ; Sahlberg et al., 2012).	SO <sub>2</sub> , NO <sub>2</sub> , CO <sub>2</sub> , Temperature, Relative humidity	<ul style="list-style-type: none"> <li>• The prevalence study indicated that NO<sub>2</sub> and SO<sub>2</sub> might be related to various of the SBS type.</li> <li>• Parental asthma and allergy (heredity) and to some extent own atopy were consistent risk factors for both prevalence and incidence of SBS ,</li> </ul>

表 6. 症例対照研究

著者	年	国	デザイン	対象・年齢	調査票	目的	バイオマーカー	結果
Matsuza ka	2014	Japan	case-cont rol	188 Japanese patients with SBS and age- and sex-matc hed 40 healthy controls	WHO の 定義	To determine whether there was a difference in Neuropathy target esterase (NTE) activity in the peripheral blood mononuclear cells (PBMCs) of Japanese patients with SBS and healthy controls and whether PNPLA6 (alias NTE) gene polymorphisms were associated with SBS.	enzymatic activity of NTE, SNPs	We found that the enzymatic activity of NTE was significantly higher in SBS patients compared with controls. Moreover, population with an AA genotype of a single nucleotide polymorphism (SNP), rs480208, in intron 21 of the PNPLA6 gene strongly reduced the activity of NTE.

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表7. 前向きコホート研究

著者	年	国	デザイン	対象・年齢	セッティング	調査票	曝露因子	測定物質	バイオマーカー	結果
Bourbeau	1997	Canada	prospective	1390 workers in 5 buildings	Office	独自の調査票：SBSの7症状: only at work two to three times a week or more often に起こる	new building with an improved ventilation system.	-	-	The decrease of 40% to 50% in the prevalence of most symptoms investigated six months after workers were exposed to a new building with an improved ventilation system was maintained three years later.
Brauer	2006	Denmark	prospective	2164 at baseline, 1402 at follow-up	Office	独自の調査票 (Brauer et al., 2000; Brauer 2005).	Indoor environment	-	-	<ul style="list-style-type: none"> <li>Mucous membrane symptoms in the cross-sectional analysis were significantly associated with self-reported high temperature and dry air, the prospective analyses showed that onset of mucous membrane symptoms was associated with the sensation of draught, dry air, and noise.</li> </ul>
Takigawa	2009	Japan	prospective	86 men and 84 women residing in Okayama	Newly built detached House	MM040EA	indoor aldehydes, VOCs, airborne fungi, and dust mite allergens	-	-	Increases in benzene and in Aspergillus contributed to the occurrence of SBS.
Sahlberg	2009	Sweden	prospective	348 adults	House	16 symptoms compatible with SBS(Bjornsson et al., 1998 ; Sahlberg et al., 2012).	building factors, and personal factors	-	-	<ul style="list-style-type: none"> <li>Smokers at baseline reported more onset of SBS symptoms than non-smokers. Furthermore, remission from mucosal symptoms was less likely in subjects that were tobacco smoker.</li> <li>Subjects with any indoor painting during follow-up period reported more onset of SBS symptoms, and those with intermediate education level had more onset of skin symptoms.</li> </ul>

表7. 前向きコーホート研究（つづき）

著者	年	国	デザイン	対象・年齢	セッティング	調査票	曝露因子	測定物質	バイオマーカー	結果
Zhang	2011	China	prospective	1143 school children (11– 15 yrs.)	School	16 symptoms compatible with SBS(Bjornsson et al., 1998 ; Sahlberg et al., 2012).	-	Airborne pet al., lergens, fungal DNA 30, Stachybotrys DNA 30, and Asp/Pen DNA in the dust	-	<ul style="list-style-type: none"> <li>• Bacterial compounds (LPS and MuA) seem to protect against the development of mucosal and general , but fungal exposure measured as fungal DNA could increase the incidence of school-related .</li> </ul>
Zhang	2011	China	prospective	1143 school children (11– 15 yrs.)	Classroom	16 symptoms compatible with SBS(Bjornsson et al., 1998 ; Sahlberg et al., 2012).	School environment	SO <sub>2</sub> , NO <sub>2</sub> , CO <sub>2</sub> , Temperature, Relative humidity	-	<ul style="list-style-type: none"> <li>• The prevalence study indicated that NO<sub>2</sub> and SO<sub>2</sub> might be related to various of the SBS type.</li> <li>• Parental asthma and allergy (heredity) and to some extent own atopy were consistent risk factors for both prevalence and incidence of SBS ,</li> </ul>
Takigawa	2012	Japan	prospective	871 people living in 260 single-family houses	Newly built detached House	MM040EA	indoor concentrations of aldehydes and VOCs.	-	-	Increases in aldehydes and aliphatic hydrocarbons contributed to the occurrence of SBS.
Zhang	2012	Sweden	prospective	429 adults	Office	16 symptoms compatible with SBS(Bjornsson et al., 1998 ; Sahlberg et al., 2012).	Dampness	-	EOS, ECP, Slope, IL-6, Slope, HCRP	<ul style="list-style-type: none"> <li>• Signs of dampness in the floor in any workplace during follow up was associated with incidence of mucosal.</li> <li>• Cumulative exposure to moldy odor was associated with incidence of work-related.</li> <li>• Working in a building repaired because of dampness (repaired building) or mould was associated with decreased remission of work-related.</li> </ul>



表7. 前向きコホート研究（つづき）

著者	年	国	デザイン	対象・年齢	セッティング	調査票	曝露因子	測定物質	バイオマーカー	結果
Sahlberg	2012	Sweden	prospective	452 adults who were followed from 1992 to 2002 within the Uppsala part of ECRHS.	House	16 symptoms compatible with SBS(Bjornsson et al., 1998 ; Sahlberg et al., 2012).	Medical history, demographic data, and the home environment	-	Slope, Total IgE, CRP (mg/l), IL-6 (ng/l), ECP (lg/l) , EOS (lg/l)	<ul style="list-style-type: none"> <li>• Dampness or indoor molds at baseline was a predictor of incidence of general ,mucosa, and dermal.</li> <li>• Bronchial responsiveness, EOS in blood, total IgE and ECP in serum at baseline were predictors of incidence of</li> <li>• Subjects with doctor-diagnosed asthma at baseline had a higher incidence of general and mucosal.</li> </ul>
Zhang	2014	China	prospective	2134 pupils	junior high school	16 symptoms compatible with SBS:The questionnaire was based on previous SBS studies (Bjornsson et al., 1998)	SO <sub>2</sub> , NO <sub>2</sub> , O <sub>3</sub> and PM <sub>10</sub>	-	-	At baseline, both indoor and outdoor SO <sub>2</sub> were found positively associated with prevalence of school-related symptoms. Indoor O <sub>3</sub> was shown to be positively associated with prevalence of skin symptoms. At follow-up, indoor PM <sub>10</sub> was found to be positively associated with new onset of skin, mucosal and general symptoms.CO <sub>2</sub> and RH were positively associated with new onset of mucosal, general and school-related symptoms.

表 8. 介入研究

著者	年	国	デザイン	対象・年齢	セッティング	調査票	曝露因子	結果
Norback	2008	Sweden	intervention	335 university students	School	独自の調査票	Temperature and CO2	Increased temperature and CO2 may affect mucosal membrane symptoms, headaches and tiredness. Room temperature was most important. CO2 associations may partly be temperature effects.

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表 9. 化学物質過敏症と遺伝子多型に関する研究

著者	年	国	デザイン	対象	遺伝子多型	結果	考察
Cui	2013	Japan	cross-sectional	男性労働者 324 人	QEESI と遺伝子多型 (CYP2E1、NAT2、GSTM1、GSTT1、GSTP1、ALDH2、SOD2)	SOD Val/Val と比較して、Ala/Ala、Val/Ala は化学物質過敏である OR がそれぞれ 4.30(1.23-15.3)、4.53(1.52-13.51)	QEESI カットオフ以上を 3 群にしたとき、最も得点が高い群は SOD2 遺伝子が活性酸素を増やす多型を保持していた。つまり環境化学物質のためではないと思われる。
Fujimori	2012	Japan	cross-sectional	従業員 1084 人	WEESI、MCI 歴、SHS 歴 GSTM1、GSTT1、ALDH2、PON1 遺伝子多型	MCS 歴 4 名、SHS 0 人、QEESI 得点で 4 群、あるいは Hojo criteria でカットオフ、遺伝子多型に有意差なし	遺伝子多型の頻度はケースとコントロールに差はみられなかった。
Berg	2010	Denmark	Case-control	MCS 96 人とコントロール 1207 人	CYP2D6、arylamine N-actyltransferase 2、paraoxonase 1、methylene tetrahydrofolate reductase、chleycstoknin 2 receptor	Arylamin N-actyltransferase 2 は MCS のもっとも深刻なグループで有意 OR3.1	MCS における遺伝子の役割は過去の報告よりも小さいのではないかと
De Luca	2010	Italy	Case-control	MCS とコントロール	CYP、UGT1A1、GSTP1、GSTM1、GSTT1、SOD、GST、Gpx 酵素の多型	CYPs、UGT、GSTM、GSTT、and GST の多型頻度は MCS とコントロールで差なし。MCS では赤血球カタラーゼと GST は低く、Gpx 活性は高い。酸化グルタチオンは低下。MCS では飽和脂肪酸組成、IFN $\gamma$ 、IL-8、IL-10、MCP-1、PDGFbb、VEGE は多かった。	MCS では、代謝や抗酸化酵素の発現が抑制されている。脂質酸化、硝酸塩の生成、グルタチオンの枯渇炎症性サイトカインの増加は MCS の診断における生化学的定義として考慮すべき
Wiesmuller	2008	Germany	Case-control	ケースコントロール研究 (MCS=59、コントロール=40)	ケースの定義：自己申告 MCS 遺伝子多型：NAT2、5HTT、PON1、PON2、SOD2	生体異物代謝酵素に関わる遺伝子多型の頻度は self-reported MCS とコントロールに差はみられなかった。	
Schnakenberg	2007	Hamburg, Germany	Cross-sectional	開業医で、患者から無作為抽出した 800 人のボランティア中同意が得られた 521 人 (CRS>20=273 人、 $\leq$ 20=428 人)	ケースの定義：EESI の chemical reactive sensitivity (CRS) 得点 20 点以上 遺伝子多型：NAT2、GSTM1、GSTT1、GSTP1	CRS 得点 20 点以上の群で、両アレルとも酵素活性を欠損する GSTM1、GSTT1 変異型の保有が多かった (それぞれ、OR:95%CI は 2.08:1.46-2.96、2.80:1.65-4.75)。	

表 9. 化学物質過敏症と遺伝子多型に関する研究（つづき）

著者	年	国	デザイン	対象	遺伝子多型	結果	考察
McKeown-Eyssen	2004	Canada	Case-control	MCS 203 人、control 162 人	CYP2D6、NAT1、NAT2、PON1、PON2 および MTHFR の遺伝子多型	CYP2D6 と NAT2 の相互作用が、リスク上昇に関与 (OR=18.7、P=0.002) ケースでは、CYP2D6 と NAT2 とともに、代謝のスピードが速い多型の保有がケースで多かった（それぞれ OR:95%CI は 3.36 : 1.33-8.50、4.14(1.36-12.64)。	しかし、CYP2D6 は 8 力所、NAT2 では 9 力所の変異の組み合わせの分布についての結果で、（多重比較では必須な）P 値の補正はされていない。
Binkley KK.	2001	Canada	Case-control	IEI 症状を呈する患者 11 人と、性・年齢・人種でマッチングした健康者	IEI 患者の血液から cholecystinin B(CCK-B)受容体と dopamine D4 受容体 (DRD4) 遺伝子多型を調べた。	化学物質過敏症患者は対照群と比較して、パニック症候群と関与する CCK-B 受容体アレル 7 を有するものが有意に多い (40.9%vs9.1%、p=0.037)	IEI はパニック障害と同じ神経遺伝学的特性があり、遺伝学的特性が IEI 患者が不安を生じる原因を示しているのではないか。