

1 Analysis of the synoptic winter mortality climatology in five regions of
2 England: Searching for evidence of weather signals

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10
11 **Abstract:** Although heat-related mortality has received considerable research attention, the
12 impact of cold weather on public health is less well-developed, probably due to the fact that
13 physiological responses to cold weather can vary substantially among individuals, age
14 groups, diseases etc, depending on a number of behavioral and physiological factors. In the
15 current work we use the classification techniques provided by the COST-733 software to link
16 synoptic circulation patterns with excess cold-related mortality in 5 regions of England. We
17 conclude that, regardless of the classification scheme used, the most oppressive conditions
18 for public health in England are associated with the prevalence of the Easterly type of
19 weather, favoring advection of cold air from continental Europe. It is noteworthy that there
20 has been observed little-to-no regional variation with regards to the classification results
21 among the 5 regions, suggestive of a spatially homogenous response of mortality to the
22 atmospheric patterns identified. In general, the 10 different groupings of days used reveal
23 that excess winter mortality is linked with the lowest daily minimum/maximum
24 temperatures in the area. However it is not uncommon to observe high mortality rates
25 during days with higher, in relative terms, temperatures, when rapidly changing weather
26 results in an increase of mortality. Such a finding confirms the complexity of cold-related
27 mortality and highlights the importance of synoptic climatology in understanding of the
28 phenomenon.

29
30 **Keywords:** Cold-related mortality, classification methods, atmospheric circulation, Easterly
31 weather

32
33 1. Introduction

34 Extreme weather, in the form of heat waves or cold spells, is associated with adverse health
35 effects in many regions of the world, where strong links between ambient temperature and
36 increased mortality have been reported (Ferreira Braga et al., 2001; Basu and Samet, 2002;
37 Donaldson et al., 2003; Basu et al., 2008; Basu, 2009; Guo et al., 2013; Urban et al., 2014;

38 Wang et al., 2014; Tsangari et al., 2016). However, the exact shape of the exposure-response
39 curve has been found to vary with location and latitude, depending on a number of
40 physiological and behavioral factors (Guo et al., 2014; Keatinge et al., 2000). Physiological
41 factors include acclimatization to extreme ambient temperatures, as well as the ability of
42 thermoregulation, while behavioral factors include the habits and lifestyle of population, the
43 use of air-conditioning, the quality of housing, the time spent outdoors etc (Donaldson and
44 Keatinge, 2003; Kovats and Kosatsky, 2009; Yu et al., 2012).

45 According to Carson et al. (2006) and Astrom et al. (2013) a progressive reduction in
46 temperature-related mortality has been reported in many regions of the world since the
47 beginning of the twentieth century. Nevertheless, extreme ambient temperatures still pose
48 a severe threat to public health (Morabito et al., 2012; Scarborough et al., 2012; Astrom et
49 al., 2013), especially for the most vulnerable groups of population, such as the children, the
50 pregnant women and the elderly (Hajat et al., 2007; Xu et al., 2013). Under the changing
51 climate, the frequency, intensity and duration of heat waves are expected to increase,
52 resulting in an increase of heat-related mortality (Huang et al., 2011; Hajat et al, 2014;
53 Heaviside et al., 2016), whereas winter mortality is expected to decrease. However, the
54 future of winter mortality is not completely understood (Wang et al., 2016).

55 Cold spells have been long-known for their adverse health effects and their impact on
56 mortality (Keatinge 2002). For instance, Curriero et al. (2002) have studied the sensitivity of
57 population to cold weather in 11 cities in the United States, whereas Analitis et al. (2008)
58 have studied the impact of cold spells on public health (in the form of cardiovascular,
59 respiratory and cerebrovascular diseases) in 15 cities in Europe. In China, a severe cold spell
60 in 2008 resulted in 148279 excess deaths, with the highest impact observed in southern and
61 central China, where mortality increased by 44% (Ma et al., 2013; Xie et al. 2013; Zhou et al.,
62 2014). Similarly, the adverse health effects of cold weather have been studied in many areas
63 of the Iberian Peninsula (Gomez-Acebo et al., 2010, Montero et al., 2010; Vasconcelos et al.,
64 2013) and Italy, where an unusual cold spell during 2012 resulted in a 25% increase in
65 mortality among the elderly (75+ years of age) across 14 cities (de' Donato et al., 2013). In
66 England, winter temperature seasonality and cold spells linked to a severe negative phase of
67 the North Atlantic Oscillation have been associated with increased risk of ischemic heart
68 disease and myocardial infarction (McGregor 2005; Bhaskaran et al., 2010).

69 The majority of studies described above use time series-based Poisson Regression and
70 Generalized Additive Models (GAMs) and/or case-only or crossover studies to analyze the
71 cold weather-related mortality. However, the climatology of winter mortality is less well-
72 developed, mainly due to the fact that winter mortality is very often confounded by social,
73 economic, behavioral and physiological factors (Anderson and Bell 2009; Allen and Lee,
74 2014). The objective of this paper is to shed light on the climatological associations between
75 winter mortality and cold weather in the United Kingdom, by using synoptic classifications,
76 and to explore the possible link between certain atmospheric patterns and winter mortality,
77 so that the most oppressive conditions for public health can be recognized.

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79

80 2. Data and Methods

81 2.1 Area Description and Data Sources

82 In the present study we focus on the United Kingdom, where cold spells are well-known to
83 play an important role in the yearly variability of excess cold-related mortality (McGregor
84 2005; Hajat and Kovats 2014). According to Healy (2003), the country presents the highest
85 levels of excess cold-related mortality across Europe, with the cold-related mortality burden
86 accounting for more than one order of magnitude more deaths than heat-related mortality
87 (approximately 61 and 3 deaths per 100,000 population per year, respectively) (Vardoulakis
88 et al., 2014).

89 For the needs of the study, November to February daily temperature (surface mean,
90 minimum and maximum, in °C) and mortality (all-cause deaths per day) data for the 26-yr
91 period 1974-1999 were used. The data covered the following 5 official Office of National
92 Statistics (ONS) regions in England: (a) Yorkshire and the Humber, (b) the West Midlands, (c)
93 Northeast, (d) Northwest and (e) Southeast regions (Figure 1), as these were the only
94 regions for which mortality data could be obtained. The above regions can be considered to
95 represent the whole of England, as they capture the range of winter temperatures across
96 England, and could therefore provide insights into any geographical variation of cold
97 weather and adverse health effects.

98 It is noted that the temperature data were obtained from one county-level meteorological
99 station, representative of each region (Figure 1), namely, West Yorkshire (Yorkshire and the
100 Humber), West Midlands (West Midlands), Tyne and Wear (Northeast), Greater Manchester
101 (Northwest), and Hampshire (Southeast). Inevitably small temperature differences probably
102 appeared among the different areas of each region. Nevertheless, the use of the county-
103 level meteorological stations for representing each region is probably the best option, under
104 the circumstances, as no additional information is available on a number of important
105 issues, such as whether the people travelled within the region (or even throughout the
106 country) before dying, in which part of the region they resided etc.

107 All data were obtained from the ONS and the mortality data were de-trended prior to the
108 analysis.

109 2.2 Methodology

110 In order to link winter mortality and prevailing weather systems, the COST-733 Action
111 (<http://www.cost733.eu>) classification tool (v. 2.0) was used. This software uses a number of
112 well-established classification methods to provide synoptic classification schemes for
113 Europe. For the purposes of the present study, Domain 4 of this software, including 432 cells
114 defined by the 47-62°N and 18-8°E coordinates, and covering the British Isles, Benelux and
115 N. France area was used. For the needs of the study the following 10 available grouping
116 techniques were used: (a) 2 schemes using the Leader Algorithm, namely the ERP (based on
117 the pressure gradient metric; Ericum et al., 2008) and the LND (based on the correlation
118 coefficient metric; Lund, 1963), (b) 4 Principal Component Analysis (PCA) schemes, namely
119 the KRZ (S-mode without rotation), the PCT (T-mode with oblique rotation), the PTT (T-mode
120 with VARIMAX rotation) and the PXE (S-mode with VARIMAX rotation) and (c) 4 Optimization

121 Algorithms, namely the CAP (principle components cluster analysis), the CKM which is a k-
122 means by dissimilar seeds, the PXX (K-means reassigned extreme scores) and the SAN
123 (simulated annealing and diversified randomization clustering).

124 The Leader Algorithm counts the number of elements with similarity to the key-
125 pattern exceeding a certain threshold, in order to find the so-called “leader”, i.e.
126 representative key-patterns for each group. A T-mode PCA recognizes typical
127 patterns and uses loadings to describe the degree of realization, while an S-mode
128 PCA locates temporal variability through typical modes. Finally, the Optimization
129 Algorithms are non-hierarchical methods, in the sense that the various groups can be
130 split up to minimize the within-group variance. A complete description of the
131 aforementioned classification schemes, together with their advantages and disadvantages
132 can be found in Philipp et al. (2010, 2014).

133



134

135 Figure 1. Office of National Statistics study regions.

136

137 The grouping techniques described above were used to associate synoptic circulations and
138 winter mortality and to investigate any evidence of weather signals. The groupings were
139 carried out with a 4 days sequence length (i.e. a 4-days averaging), using mean sea-level
140 pressure as the classification variable. The 4 days sequence length was used, as winter
141 mortality can manifest itself in a time distributed way, often referred to as the “lag effect”
142 (Gasparini et al., 2010; Allen and Sheridan, 2014; Zeka et al., 2014), as opposed to heat-
143 related mortality which has an acute response (Gosling et al., 2009). The various
144 classification schemes used resulted in a number of classes (9 or 10 depending on the
145 specific configuration used) with distinct synoptic circulation patterns. Then, mortality data
146 were summarized across the different synoptic circulations.

147 Next, we used the PI sign-test (Duckstein et al., 1993; Paschalidou and Kassomenos, 2016) to
148 check the frequency of excess mortality in the various classes:

$$149 \quad PI_i = 100 \times \left(\frac{\text{number of deaths in } C_i / \text{total number of deaths}}{\text{number of days in } C_i / \text{total number of days}} - 1 \right) \quad (1)$$

150 where C_i stands for the different classes. In Eq. 1, values of PI equal to 0 denote mortality is
151 equally spread among classes, whereas positive/negative PI values show that the occurrence
152 of deaths is more/less frequent under the conditions of the specific classes. PI values equal
153 to -100 indicate “mortality-free” classes.

154 Finally, centroid maps produced by the COST-733 software were discussed, in order to study
155 the synoptic winter mortality climatology.

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158 3. Results and Discussion

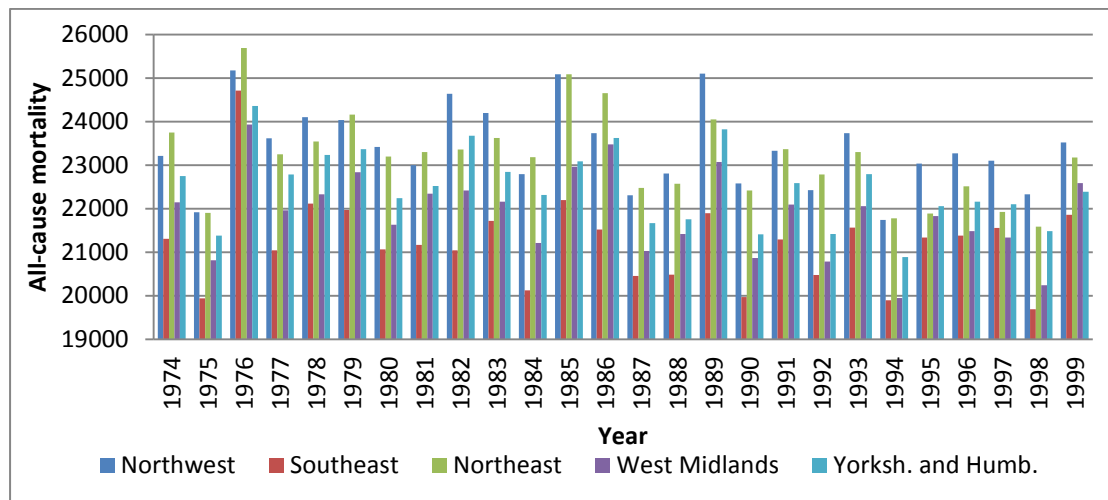
159 3.1 Presentation of the classes

160 During the 26-y period 1974-1999 a total of 2916300 all-cause casualties were recorded in
161 the 5 regions studied. The number of deaths per year for each of the five regions is
162 presented in Figure 2. Not surprisingly the biggest number of fatalities for most of the years
163 appears in the Northwest region (194.6 deaths per year), where, according to the Office of
164 National Statistics, this is the most populated region (approximately 498 inhabitants per
165 Km^2). A closer look reveals a progressive reduction in winter mortality for all five regions of
166 England. Although not all of the incidents can be attributed/related to cold weather, the
167 general decreasing trend is in agreement with Carson et al. (2006) and Astrom et al. (2013)
168 who reported descending trends in cold-related mortality for London and Stockholm,
169 respectively. Such a decreasing trend probably reflects the changing vulnerability of the
170 population due to improvements in infrastructure, lifestyle, technology, and general health.
171 According to Vardoulakis et al. (2014), the decreasing trend is projected to continue due to
172 climate change and to reach approximately 42 deaths per 100,000 population per year in the

173 UK, whereas the heat-related mortality burden is expected to increase to approximately 9
174 deaths per 100,000 population per year by the 2080s.

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176



177

178 Figure 2. The number of deaths per year for each of the five regions

179

180 Tables 1-5 present the results of all 10 classification techniques performed for each one of
181 the 5 regions studied, namely the number of days per class, the maximum/minimum/mean
182 surface temperature (in °C) and the total number of deaths. It appears that for each
183 classification scheme there are a number of classes that reflect the most oppressive
184 conditions, in terms of excess winter mortality. This finding is highlighted in Figure 3, where
185 the PI index for each classification scheme is shown for the Northwest region (figures for the
186 rest of the regions are omitted).

187 Specifically for the Northwest region ERP classes C6 and C8 reflect the most oppressive
188 conditions for public health, as they present the biggest PI values (Figure 3). It is noteworthy
189 that these classes feature the lowest maximum (4.7 °C and 4.5 °C, respectively), as well as
190 the lowest minimum temperatures (0.3 °C and -2.3 °C, respectively), confirming that winter
191 mortality is associated with low temperatures (Keatinge 2002). Similar is the pattern for the
192 Southeast (Table 2), the West Midlands (Table 3), the Yorkshire and Humber (Table 4) and
193 the Northeast region (Table 5), where classes C6 and C8 presenting the lowest
194 maximum/minimum temperatures are linked with the highest PI values (figures not shown).
195 This finding is in agreement with results provided by Dimitriou et al. (2016) who defined
196 atmospheric pathways linked with winter low temperature episodes (LTE) in the same 5
197 regions of England for the same time period and revealed associations with excess mortality
198 rates. According to them, a statistically significant increase in mortality was calculated for
199 LTE days across all 5 regions studied. LND class C3, with PI value equal to 9.04, appears to be
200 the most dangerous for public health in the Northwest region. This class comprises 10% of
201 the total winter days (November – February) for the period studied and is linked with the

202 lowest maximum and minimum temperatures in the region (4.6 °C and 0.4 °C, respectively).
203 The pattern of the highest mortality being linked to the lowest temperatures is repeated in
204 the Southeast (Table 2), the West Midlands (Table 3), the Yorkshire and Humber (Table 4)
205 and the Northeast region (Table 5).

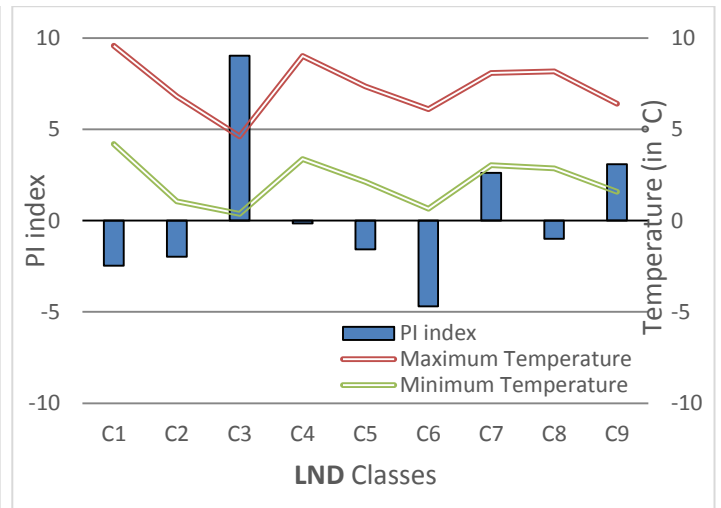
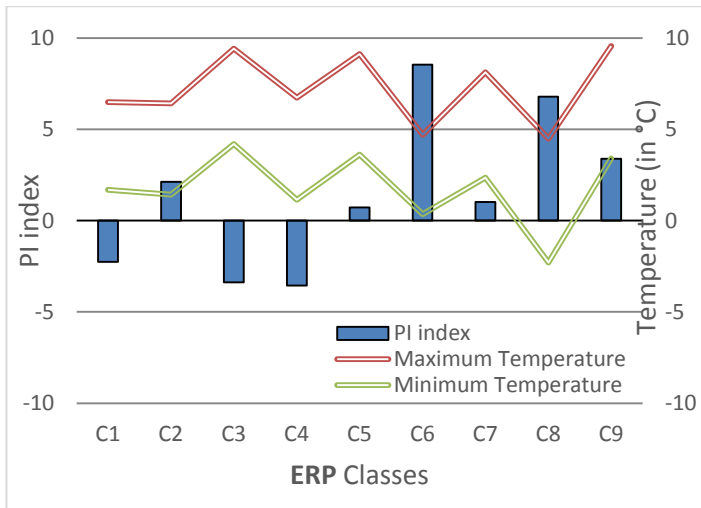
206 Among the 4 PCA classifications schemes in the Northwest region, namely KRZ, PCT, PTT and
207 PXE, KRZ class C7, PCT class C8, PTT class C3 and PXE class C9 (Figure 3) appear to be linked
208 with the most adverse effects on public health. These classes comprise 10%, 9%, 20% and
209 8%, respectively, of the total winter days studied. Although KRZ class C7 presents some of
210 the lowest maximum and minimum temperatures (5.5 °C and 1.0 °C, respectively), classes
211 PCT C8, PTT C3, PXE C9 are associated with slightly higher maximum (6.7 °C, 6.9 °C and 7.8
212 °C, respectively) and minimum temperatures (2.4 °C, 2.1 °C and 3.3 °C, respectively). Similar
213 is the situation in the Southeast (Table 2), the West Midlands (Table 3), the Yorkshire and
214 Humber (Table 4) and the Northeast region (Table 5), where the highest levels of winter
215 mortality are not always linked to the lowest temperatures. This finding does not come as a
216 surprise, as Hajat and Kovats (2014) state that a significant number of cold-related deaths
217 are linked to moderate temperatures. Additionally, Gasparrini and Leone (2014) conclude
218 that 70% of cold-related mortality in London is observed during days with temperature
219 higher than 5 °C and not necessarily during days with the absolute minimum temperatures.
220 Such a pattern could also mean there is a temperature range (zone), centered around the
221 lowest temperatures, that could cause the excess mortality. In the presence of various
222 confounding factors, it can be the slightly higher temperatures that are linked to excess
223 mortality. Furthermore, Dimitriou et al. (2016) concluded that in some cases mortality in the
224 5 regions studied is linked to rather increased winter temperatures associated with long-
225 distance west-to-east flows, resulting in rapidly changing weather, as opposed to stable
226 conditions linked with blocking to the east. Rapidly changing atmospheric pressure and/or
227 temperature have been longed blamed for adverse health effects. For instance Dawson et al.
228 (2008) showed that rapid falls in atmospheric pressure are associated with increased risk of
229 morbidity due to hemorrhagic stroke in Glasgow. Finally, the excess mortality during days
230 with relatively higher temperatures could be explained as lagged mortality after a period of
231 cumulative exposure to oppressive cold weather.

232 With regards to the 4 optimization algorithm classification schemes, CAP class C2, CKM class
233 C2, PCK class C10 and SAN class C4 are associated with the most dangerous conditions for
234 public health, in terms of winter mortality in the North west region. These classes comprise
235 8%, 10%, 6% and 9%, respectively, of the total winter days studied and present some of the
236 lowest maximum (6.1 °C, 5.1°C, 4.2°C and 5.9°C, respectively) and minimum temperatures
237 (1.3 °C, 0.3°C, 0.0°C and 1.2 °C, respectively) in the region (Table 1). Almost identical is the
238 pattern observed for the Southeast (Table 2), the West Midlands (Table 3), the Yorkshire and
239 Humber (Table 4) and the Northeast region (Table 5), where CKM C2 and PXE C10 are
240 associated with the lowest temperatures and the highest levels of excess mortality, while
241 classes CAP C2 and SAN C4 also present some of the lowest maximum/minimum
242 temperatures.

243 On the whole, the pattern of the “most dangerous” classes described above is repeated
244 almost identically (Tables 2-5), confirming the adverse impact of the specific classes’

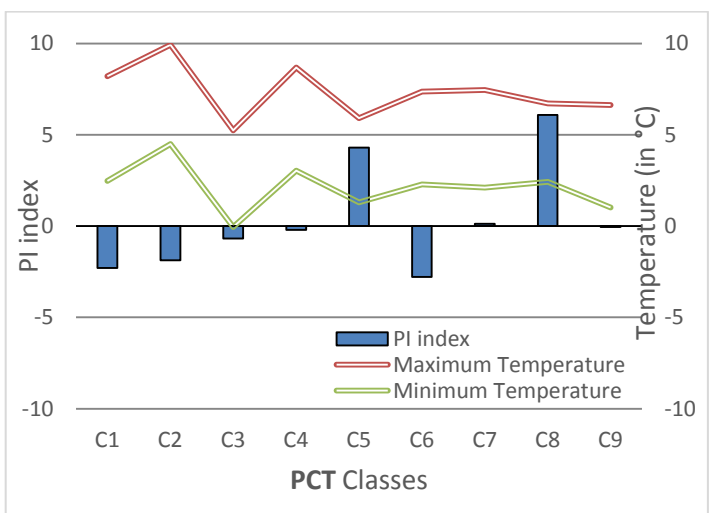
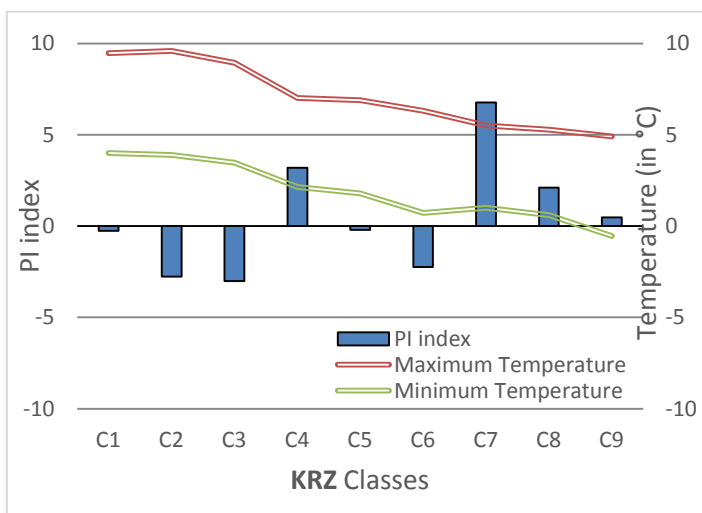
245 climatology on winter mortality. Specifically, there appears to be little-to-no regional
 246 variation with regards to the most oppressive classes among the 5 regions, suggesting a
 247 spatially homogeneous response of mortality in the 5 regions to atmospheric patterns.

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250 (a)

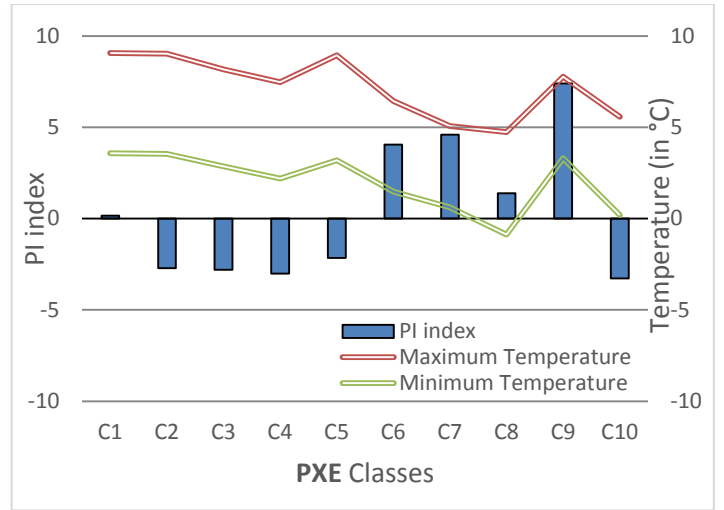
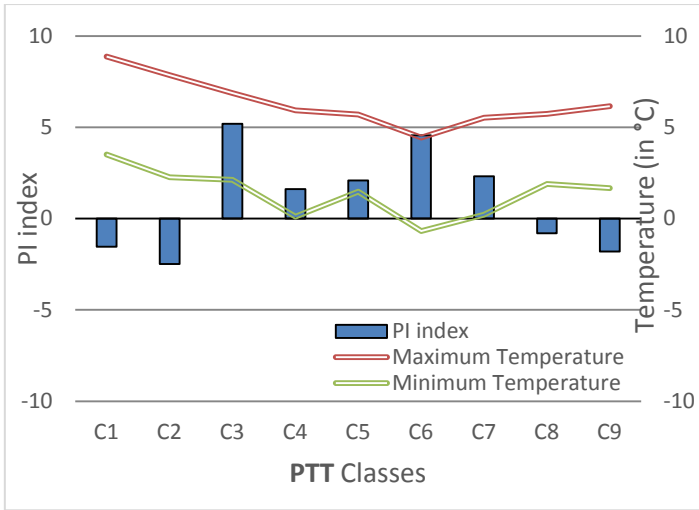
(b)



252 (c)

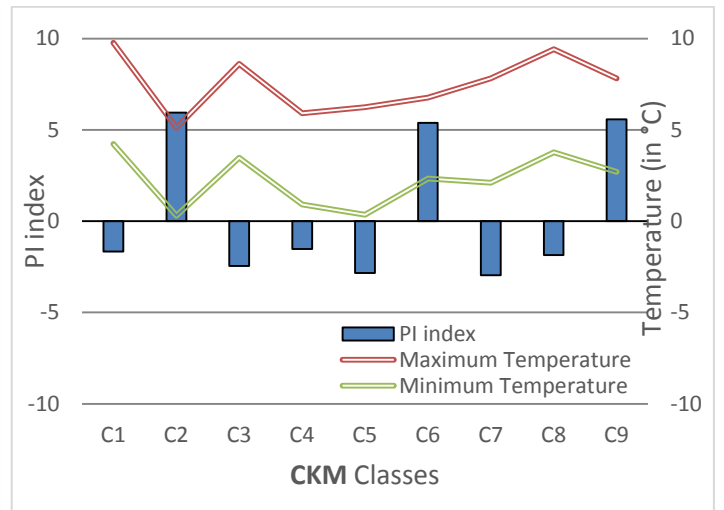
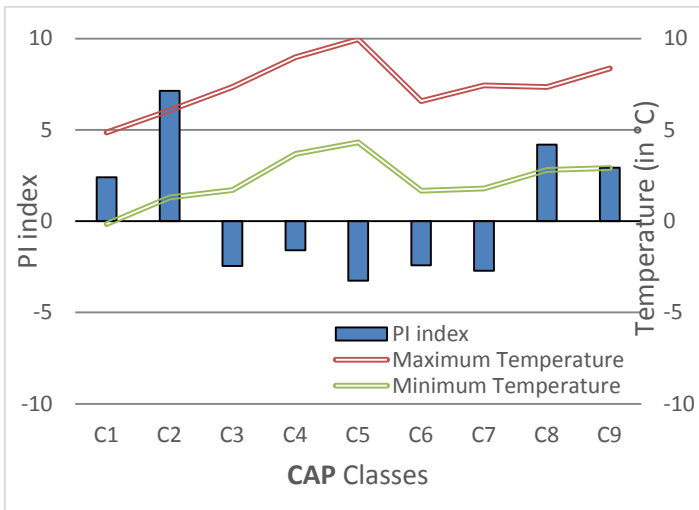
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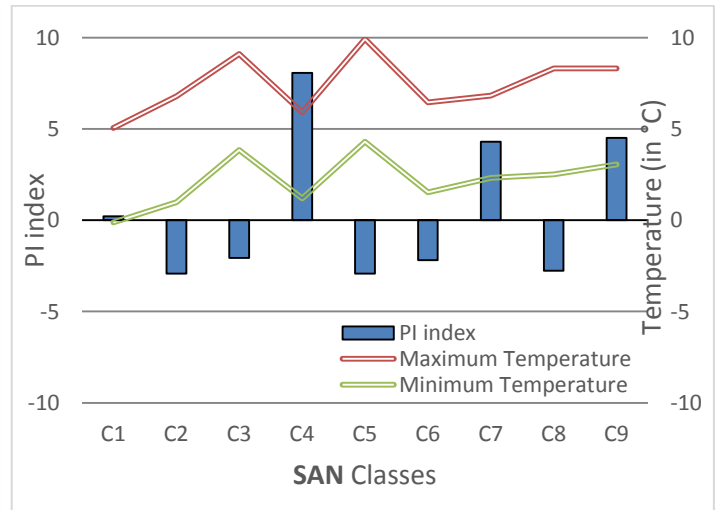
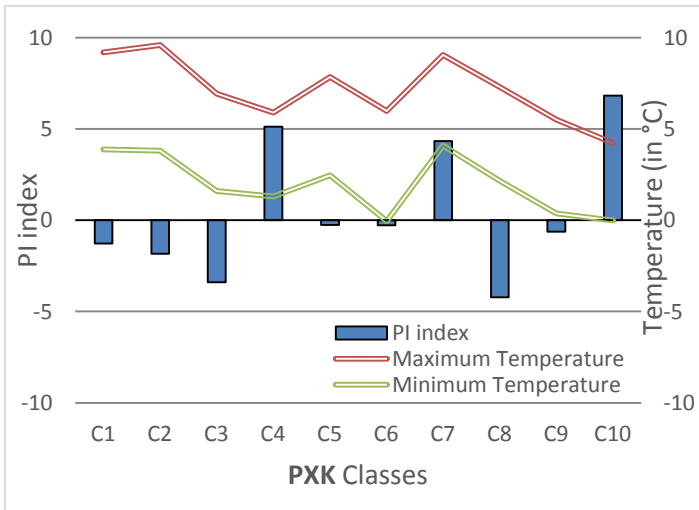
255 (e)

(f)



257 (g)

(h)



259 (i)

(j)

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261 Figure 3. The PI index together with the minimum and maximum temperature for the 10
 262 classification schemes, in the Northwest region

263

265 Table 1. The number of days for each class, together with the maximum/minimum/mean
 266 temperature (in °C) and the total mortality for each classification scheme in the Northwest
 267 region. The classes showing the most oppressive (in terms of excess mortality) conditions
 268 are given in bold

		CLASSES									
		1	2	3	4	5	6	7	8	9	10
ERP	Total days	168	628	595	499	765	223	219	21	8	-
	Max T	6.5	6.4	9.4	6.7	9.1	4.7	8.1	4.5	9.6	-
	Min T	1.7	1.4	4.2	1.1	3.6	0.3	2.3	-2.3	3.4	-
	Mean T	3.9	3.9	6.7	3.8	6.3	2.5	5.2	1.1	6.5	-
	Tot Mort	31947	124778	111856	93629	149910	47095	43041	4363	1609	-
LND	Total days	680	472	304	439	262	210	330	209	220	-
	Max T	9.6	6.8	4.6	9.0	7.3	6.1	8.1	8.2	6.4	-
	Min T	4.2	1.1	0.4	3.4	2.1	0.7	3.0	2.9	1.6	-
	Mean T	6.8	3.8	2.5	6.1	4.7	3.3	5.4	5.4	3.9	-
	Tot Mort	129048	90018	64493	85280	50174	38938	65891	40257	44129	-
KRZ	Total days	617	427	564	291	180	275	324	222	226	-
	Max T	9.5	9.6	8.9	7.0	6.9	6.3	5.5	5.3	4.9	-
	Min T	4.0	3.9	3.5	2.1	1.8	0.7	1.0	0.6	-0.5	-
	Mean T	6.6	6.7	6.1	4.5	4.3	3.5	3.2	2.9	2.1	-
	Tot Mort	119727	80782	106438	58426	34948	52308	67312	44105	44183	-
PCT	Total days	503	554	237	433	343	298	207	294	257	-
	Max T	8.2	9.9	5.2	8.7	5.9	7.4	7.4	6.7	6.6	-
	Min T	2.5	4.5	-0.0	3.0	1.3	2.3	2.1	2.4	1.0	-
	Mean T	5.3	7.1	2.5	5.8	3.5	4.7	4.7	4.5	3.8	-
	Tot Mort	95618	105781	45797	84069	69608	56364	40329	60680	49983	-
PTT	Total days	1129	916	612	195	87	65	59	19	44	-
	Max T	8.9	7.9	6.9	5.9	5.7	4.4	5.5	5.7	6.2	-
	Min T	3.5	2.3	2.1	0.1	1.5	-0.7	0.2	1.9	1.7	-
	Mean T	6.1	5.0	4.4	3.0	3.5	1.8	2.9	3.7	3.9	-
	Tot Mort	216301	173800	125246	38556	17281	13224	11746	3667	8406	-
PXE	Total days	551	525	346	238	301	329	217	185	235	199
	Max T	9.1	9.0	8.2	7.5	8.9	6.4	5.1	4.7	7.8	5.6
	Min T	3.6	3.6	2.7	2.2	3.2	1.5	0.6	-0.9	3.3	0.2
	Mean T	6.2	6.2	5.4	4.8	6.0	3.9	2.8	1.9	5.5	2.8
	Tot Mort	107381	99379	65435	44911	57300	66602	44163	36497	49106	37453
CAP	Total days	304	236	297	388	504	391	306	245	455	-
	Max T	4.9	6.1	7.4	8.9	9.9	6.6	7.4	7.4	8.4	-
	Min T	-0.2	1.3	1.7	3.7	4.3	1.7	1.8	2.8	2.9	-
	Mean T	2.3	3.6	4.4	6.2	7.0	4.1	4.5	5.0	5.6	-
	Tot Mort	60566	49194	56365	74291	94865	74240	57921	49670	91117	-
CKM	Total days	480	303	392	437	228	244	338	398	306	-
	Max T	9.8	5.1	8.6	5.9	6.2	6.8	7.8	9.4	7.8	-
	Min T	4.2	0.3	3.5	0.9	0.4	2.3	2.1	3.8	2.7	-
	Mean T	6.9	2.6	5.9	3.4	3.3	4.5	4.9	6.5	5.2	-
	Tot Mort	91837	62454	74400	83732	43103	50026	63817	75999	62861	-
PXK	Total days	524	576	361	315	294	240	279	216	134	187

	Max T	9.2	9.6	6.9	5.9	7.8	5.9	9.1	7.3	5.5	4.2
	Min T	3.9	3.8	1.6	1.3	2.5	-0.1	4.1	2.2	0.4	0.0
	Mean T	6.5	6.6	4.2	3.5	5.1	2.9	6.5	4.6	2.9	2.1
	Tot Mort	100649	110011	67851	64430	57054	46569	56638	40252	25910	38866
	Total days	267	278	435	269	481	397	241	369	389	-
SAN	Max T	5.0	6.8	9.1	5.9	9.9	6.5	6.8	8.3	8.3	-
	Min T	-0.1	0.9	3.8	1.2	4.3	1.5	2.3	2.5	3.1	-
	Mean T	2.4	3.9	6.3	3.5	7.0	4.0	4.5	5.3	5.6	-
	Tot Mort	52056	52509	82886	56561	90857	75553	48906	69807	79093	-

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270

271 Table 2. The number of days for each class, together with the maximum/minimum/mean
 272 temperature (in °C) and the total mortality for each classification scheme in the Southeast
 273 region. The classes showing the most oppressive (in terms of excess mortality) conditions
 274 are given in bold

		CLASSES									
		1	2	3	4	5	6	7	8	9	10
ERP	Total days	168	628	595	499	765	223	219	21	8	-
	Max T	6.7	7.3	9.7	7.8	9.9	5.8	9.3	5.2	9.9	-
	Min T	1.3	1.6	4.1	1.2	4.4	0.6	3.2	-1.7	4.8	-
	Mean T	4.0	4.5	6.9	4.5	7.1	3.2	6.2	1.8	7.4	-
	Tot Mort	29083	113117	101300	85760	135453	42677	39016	4041	1351	-
LND	Total days	680	472	304	439	262	210	330	209	220	-
	Max T	10.5	7.7	5.1	9.6	8.2	7.5	8.7	8.4	6.9	-
	Min T	4.9	1.1	0.1	3.8	2.3	1.2	3.5	2.3	1.7	-
	Mean T	7.7	4.4	2.6	6.7	5.2	4.4	6.1	5.4	4.4	-
	Tot Mort	116564	81544	59361	76712	45858	35848	59039	37060	39810	-
KRZ	Total days	617	427	564	291	180	275	324	222	226	-
	Max T	10.1	10.3	9.9	7.9	7.7	7.3	6.2	5.7	5.7	-
	Min T	4.7	4.6	3.7	2.4	1.7	0.7	1.1	0.2	-0.2	-
	Mean T	7.4	7.4	6.8	5.2	4.7	4.0	3.6	3.0	2.7	-
	Tot Mort	108337	73092	96225	52793	31596	47971	61142	40668	39975	-
PCT	Total days	503	554	237	433	343	298	207	294	257	-
	Max T	9.2	10.5	5.8	9.1	6.5	9.4	7.6	7.7	7.1	-
	Min T	2.7	5.0	0.0	3.6	1.3	3.4	1.5	2.8	0.6	-
	Mean T	5.9	7.8	2.9	6.3	3.9	6.4	4.6	5.3	3.8	-
	Tot Mort	85756	95384	41881	76030	63905	51719	36807	54511	45804	-
PTT	Total days	1129	916	612	195	87	65	59	19	44	-
	Max T	9.7	8.9	7.5	6.3	5.3	4.2	5.7	7.2	7.8	-
	Min T	4.1	2.6	2.5	-0.5	0.4	-1.2	-0.7	2.2	2.4	-
	Mean T	6.9	5.8	5.0	2.9	2.9	1.5	2.5	4.7	5.1	-
	Tot Mort	195843	157534	113137	35195	15898	12060	10967	3408	7756	-
PXE	Total days	551	525	346	238	301	329	217	185	235	199
	Max T	9.2	10.3	8.8	8.6	10.0	6.9	5.3	5.0	8.9	7.1
	Min T	3.6	4.5	2.8	2.5	3.8	1.4	0.2	-1.2	4.2	0.9
	Mean T	6.4	7.4	5.8	5.6	6.9	4.1	2.7	1.9	6.5	4.0
	Tot Mort	97191	90147	59714	41312	51378	59669	41000	33167	43995	34224

CAP	Total days	304	236	297	388	504	391	306	245	455	-
	Max T	5.1	6.6	8.1	9.3	10.7	6.6	8.8	8.7	9.9	-
	Min T	-0.7	1.5	1.6	3.6	5.1	0.9	2.4	3.7	4.2	-
	Mean T	2.2	4.1	4.9	6.5	7.9	3.7	5.6	6.2	7.1	-
	Tot Mort	55807	44633	50976	67652	86231	68440	52366	44297	81397	-
CKM	Total days	480	303	392	437	228	244	338	398	306	-
	Max T	10.2	5.6	8.9	5.9	7.1	8.1	9.1	10.5	9.5	-
	Min T	4.3	0.2	2.8	0.2	0.6	2.9	2.7	5.0	3.9	-
	Mean T	7.5	2.9	5.9	3.0	3.8	5.5	5.9	7.8	6.7	-
	Tot Mort	83487	57170	67766	77098	39309	44952	57822	68459	55735	-
PXK	Total days	524	576	361	315	294	240	279	216	134	187
	Max T	10.1	10.1	8.9	6.6	7.8	6.6	10.1	7.9	5.7	4.7
	Min T	4.6	4.4	2.5	1.5	1.6	-0.2	4.9	2.1	-0.1	-0.2
	Mean T	7.3	7.2	5.7	4.1	4.7	3.2	7.6	5.0	2.8	2.2
	Tot Mort	91464	98332	61997	58484	52393	42294	50316	36931	23794	35792
SAN	Total days	267	278	435	269	481	397	241	369	389	-
	Max T	5.2	7.9	9.4	6.4	10.6	6.4	8.2	9.6	9.9	-
	Min T	-0.8	1.4	3.5	1.3	5.1	0.8	3.0	3.2	4.5	-
	Mean T	2.2	4.6	6.5	3.8	7.8	3.6	5.6	6.4	7.2	-
	Tot Mort	47851	47860	75383	51313	82461	69667	43936	62842	70485	-

275

276

277 Table 3. The number of days for each class, together with the maximum/minimum/mean
278 temperature (in °C) and the total mortality for each classification scheme in the West
279 Midlands region. The classes showing the most oppressive (in terms of excess mortality)
280 conditions are given in bold

		CLASSES									
		1	2	3	4	5	6	7	8	9	10
ERP	Total days	168	628	595	499	765	223	219	21	8	-
	Max T	6.0	5.9	9.2	6.7	9.0	4.1	8.4	3.7	9.5	-
	Min T	1.3	0.7	3.7	0.7	3.3	-0.7	2.4	-3.2	3.9	-
	Mean T	3.7	3.3	6.4	3.7	6.1	1.7	5.4	0.3	6.7	-
	Tot Mort	29845	116735	104550	88387	139961	44267	39737	4064	1445	-
LND	Total days	680	472	304	439	262	210	330	209	220	-
	Max T	9.8	6.7	3.7	8.8	7.3	6.2	7.5	7.6	5.6	-
	Min T	4.1	0.5	-0.8	2.9	1.8	0.6	2.3	1.8	0.8	-
	Mean T	7.0	3.6	1.4	5.9	4.6	3.4	4.9	4.7	3.2	-
	Tot Mort	119301	84370	61017	80150	47426	36725	60577	38265	41161	-
KRZ	Total days	617	427	564	291	180	275	324	222	226	-
	Max T	9.4	9.7	9.1	6.5	6.6	6.2	4.7	4.5	4.6	-
	Min T	3.7	3.7	3.2	1.4	1.0	0.1	0.1	-0.4	-1.1	-
	Mean T	6.6	6.7	6.1	4.0	3.8	3.2	2.4	2.1	1.7	-
	Tot Mort	111239	75406	99424	54524	32449	49479	63008	41766	41697	-
PCT	Total days	503	554	237	433	343	298	207	294	257	-
	Max T	8.2	9.9	4.8	8.5	5.0	8.1	7.0	6.1	6.2	-
	Min T	2.1	4.3	-0.5	2.5	0.3	2.3	1.3	1.7	0.0	-
	Mean T	5.2	7.1	2.1	5.5	2.7	5.2	4.2	3.9	3.1	-

	Tot Mort	88913	97377	43577	78502	65671	53097	37997	56526	47331	-
	Total days	1129	916	612	195	87	65	59	19	44	-
	Max T	8.9	7.9	6.1	5.4	4.8	3.5	4.9	5.6	6.4	-
PTT	Min T	3.3	1.9	1.3	-1.2	0.6	-1.5	-0.7	1.2	1.3	-
	Mean T	6.1	4.9	3.7	2.1	2.7	1.0	2.1	3.4	3.8	-
	Tot Mort	201008	163368	116871	36531	15871	12596	11175	3625	7946	-
	Total days	551	525	346	238	301	329	217	185	235	199
	Max T	8.5	9.4	8.2	7.7	9.1	5.7	4.0	4.3	7.4	5.6
PXE	Min T	2.8	3.5	2.3	1.9	2.9	0.5	-0.3	-1.6	2.8	0.1
	Mean T	5.7	6.4	5.2	4.9	6.0	3.1	1.8	1.3	5.1	2.8
	Tot Mort	100058	92345	60778	42617	53952	62290	41721	34375	45394	35461
	Total days	304	236	297	388	504	391	306	245	455	-
	Max T	4.1	5.3	7.3	8.8	10.1	5.9	7.6	6.9	8.6	-
CAP	Min T	-1.3	0.4	1.1	3.1	4.2	0.8	1.6	2.2	2.8	-
	Mean T	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4	-
	Tot Mort	57387	45961	52057	69065	88769	70506	54470	46064	84713	-
	Total days	480	303	392	437	228	244	338	398	306	-
	Max T	9.8	4.2	8.4	5.2	6.1	6.2	7.9	9.6	8.0	-
CKM	Min T	3.9	-0.8	2.8	0.0	0.0	1.6	1.9	3.7	2.5	-
	Mean T	6.8	1.7	5.6	2.6	3.0	3.9	4.9	6.7	5.3	-
	Tot Mort	85158	58853	69340	79306	40510	46487	60019	71098	58219	-
	Total days	524	576	361	315	294	240	279	216	134	187
	Max T	9.5	9.4	7.3	5.0	7.2	5.7	9.0	7.1	4.9	3.3
PXK	Min T	3.8	3.5	1.5	0.4	1.3	-0.6	3.8	1.4	-0.2	-1.2
	Mean T	6.6	6.5	4.5	2.7	4.2	2.6	6.4	4.2	2.4	1.0
	Tot Mort	93500	102361	63739	60352	54026	43780	51847	37852	24621	36913
	Total days	267	278	435	269	481	397	241	369	389	-
	Max T	4.5	6.7	8.9	4.9	9.9	5.8	6.4	8.5	8.6	-
SAN	Min T	-1.2	0.7	3.2	0.2	4.1	0.7	1.6	2.3	3.0	-
	Mean T	1.7	3.7	6.1	2.6	7.1	3.3	4.0	5.4	5.8	-
	Tot Mort	49316	49347	76534	52617	85053	71745	45588	65541	73249	-

281

282

283 Table 4. The number of days for each class, together with the maximum/minimum/mean
 284 temperature (in °C) and the total mortality for each classification scheme in the Yorkshire
 285 and Humber region. The classes showing the most oppressive (in terms of excess mortality)
 286 conditions are given in bold

		CLASSES									
		1	2	3	4	5	6	7	8	9	10
	Total days	168	628	595	499	765	223	219	21	8	-
	Max T	5.8	5.1	8.9	6.0	8.3	3.3	7.2	3.7	8.8	-
ERP	Min T	1.3	0.5	3.7	0.5	2.8	-1.0	1.4	-2.5	2.9	-
	Mean T	3.5	2.8	6.3	3.3	5.6	1.1	4.3	0.6	5.9	-
	Tot Mort	30140	119958	106700	90792	144469	45468	41495	4138	1568	-
	Total days	680	472	304	439	262	210	330	209	220	-
LND	Max T	3.7	0.5	-0.6	2.5	1.5	0.3	1.8	1.7	0.4	-
	Min T	6.4	3.3	1.3	5.3	4.1	2.8	4.4	4.5	2.6	-

	Mean T	6.4	3.3	1.3	5.3	4.1	2.8	4.3	4.5	2.6	-
	Tot Mort	124020	87017	61840	81906	48071	37413	63035	39129	42296	-
	Total days	617	427	564	291	180	275	324	222	226	-
KRZ	Max T	8.8	8.9	8.2	5.8	5.9	5.6	3.9	4.1	3.9	-
	Min T	3.3	3.3	2.8	0.9	0.7	0.1	0.0	-0.2	-1.0	-
	Mean T	6.1	6.1	5.5	3.3	3.3	2.8	2.0	2.0	1.5	-
	Tot Mort	115461	77954	102629	55713	33247	49994	64012	43063	42654	-
	Total days	503	554	237	433	343	298	207	294	257	-
PCT	Max T	7.4	9.3	4.2	8.0	4.5	6.9	6.6	5.2	5.7	-
	Min T	1.9	3.8	-0.5	2.4	0.2	1.6	1.4	1.2	0.1	-
	Mean T	4.7	6.5	1.9	5.2	2.3	4.3	4.0	3.2	2.8	-
	Tot Mort	91360	101983	44293	80378	66391	54625	38984	58080	48634	-
	Total days	1129	916	612	195	87	65	59	19	44	-
PTT	Max T	8.2	7.1	5.4	4.9	4.6	3.3	4.7	4.3	4.9	-
	Min T	2.8	1.7	0.9	-0.9	0.9	-1.2	-0.4	0.3	0.4	-
	Mean T	5.5	4.4	3.1	2.0	2.8	1.1	2.2	2.3	2.7	-
	Tot Mort	207230	167469	119964	37516	16464	12831	11287	3686	8281	-
	Total days	551	525	346	238	301	329	217	185	235	199
PXE	Max T	8.2	8.5	7.5	6.8	8.0	5.1	3.8	3.9	6.3	4.8
	Min T	2.6	3.0	2.2	1.2	2.6	0.2	-0.2	-1.3	2.1	-0.2
	Mean T	5.4	5.8	4.9	4.0	5.3	2.7	1.8	1.3	4.2	2.3
	Tot Mort	103835	95659	63495	43292	54536	63661	42432	35274	46401	36142
	Total days	304	236	297	388	504	391	306	245	455	-
CAP	Max T	3.7	4.5	6.6	8.4	9.3	5.8	6.5	5.8	7.5	-
	Min T	-0.8	0.0	1.1	2.9	3.7	1.2	1.1	1.3	2.1	-
	Mean T	1.5	2.3	3.9	5.6	6.5	3.5	3.8	3.6	4.8	-
	Tot Mort	58646	46856	54418	71220	92768	71004	55650	47255	87078	-
	Total days	480	303	392	437	228	244	338	398	306	-
CKM	Max T	9.1	3.7	8.1	5.1	5.6	5.2	6.9	8.6	6.9	-
	Min T	3.5	-0.8	2.8	0.5	-0.1	0.8	1.4	2.9	1.8	-
	Mean T	6.3	1.4	5.5	2.8	2.7	3.0	4.1	5.8	4.3	-
	Tot Mort	88769	60331	71328	80227	41823	47427	61493	73613	59716	-
	Total days	524	576	361	315	294	240	279	216	134	187
PKX	Max T	8.6	8.8	6.2	4.2	6.9	5.2	8.1	6.7	4.5	2.9
	Min T	3.2	3.2	1.0	0.0	1.3	-0.6	3.2	1.6	-0.2	-1.0
	Mean T	5.9	6.0	3.6	2.1	4.1	2.3	5.6	4.1	2.1	0.9
	Tot Mort	96474	105760	65761	61338	55939	44816	53528	38712	24843	37557
	Total days	267	278	435	269	481	397	241	369	389	-
SAN	Max T	4.2	6.1	8.6	4.3	9.3	5.6	5.2	7.3	7.5	-
	Min T	-0.6	0.4	3.2	-0.2	3.6	1.0	0.8	1.7	2.2	-
	Mean T	1.8	3.3	5.9	2.1	6.4	3.3	3.0	4.5	4.9	-
	Tot Mort	50373	50491	79640	53780	88491	72329	46762	67780	75083	-

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288

289 Table 5. The number of days for each class, together with the maximum/minimum/mean
290 temperature (in °C) and the total mortality for each classification scheme in the Northeast
291 region. The classes showing the most oppressive (in terms of excess mortality) conditions
292 are given in bold

		CLASSES									
		1	2	3	4	5	6	7	8	9	10
ERP	Total days	168	628	595	499	765	223	219	21	8	-
	Max T	7.1	6.3	9.9	6.9	9.0	4.9	7.8	5.1	9.7	-
	Min T	2.7	2.0	4.6	1.7	3.8	0.9	2.2	-0.9	4.1	-
	Mean T	4.9	4.2	7.2	4.3	6.4	2.9	5.0	2.1	6.9	-
	Tot Mort	31723	121646	110930	93821	148527	46415	43598	4411	1486	-
LND	Total days	680	472	304	439	262	210	330	209	220	-
	Max T	9.7	7.0	5.1	8.9	7.6	6.2	7.8	8.4	6.2	-
	Min T	4.3	1.8	1.4	3.6	2.5	1.4	2.9	2.9	2.3	-
	Mean T	7.0	4.4	3.3	6.2	5.0	3.8	5.3	5.7	4.2	-
	Tot Mort	128481	90218	62648	84060	50113	38281	64093	40887	43774	-
KRZ	Total days	617	427	564	291	180	275	324	222	226	-
	Max T	9.5	9.6	8.9	6.7	6.8	6.6	5.6	5.7	5.3	-
	Min T	4.0	4.2	3.7	2.2	2.2	1.5	1.8	1.6	0.8	-
	Mean T	6.7	6.9	6.3	4.5	4.5	4.0	3.7	3.6	3.0	-
	Tot Mort	118771	80666	106411	57162	34675	52260	64751	44071	43788	-
PCT	Total days	503	554	237	433	343	298	207	294	257	-
	Max T	8.2	10.0	5.7	8.9	5.9	7.3	7.7	6.5	6.7	-
	Min T	2.9	4.5	1.3	3.6	1.8	2.4	2.7	2.9	1.3	-
	Mean T	5.6	7.2	3.4	6.3	3.9	4.8	5.2	4.7	4.0	-
	Tot Mort	94384	105703	45399	82492	68026	56254	39882	59317	51099	-
PTT	Total days	1129	916	612	195	87	65	59	19	44	-
	Max T	8.9	8.0	6.7	6.1	6.5	5.1	6.1	5.8	6.1	-
	Min T	3.7	2.8	2.6	0.7	2.8	0.9	1.3	2.3	1.3	-
	Mean T	6.3	5.4	4.6	3.4	4.7	3.0	3.7	4.1	3.7	-
	Tot Mort	214404	173334	121906	39016	16864	13065	11724	3781	8463	-
PXE	Total days	551	525	346	238	301	329	217	185	235	199
	Max T	9.2	9.0	8.5	7.5	8.8	6.4	5.6	5.3	7.3	5.8
	Min T	3.7	3.8	3.3	2.0	3.5	2.1	1.8	0.5	3.2	1.1
	Mean T	6.5	6.4	5.9	4.7	6.2	4.2	3.7	2.9	5.3	3.4
	Tot Mort	106007	99439	65893	44744	57061	65197	43109	36551	47607	36946
CAP	Total days	304	236	297	388	504	391	306	245	455	-
	Max T	5.3	5.8	7.7	9.3	9.9	7.5	7.3	6.8	7.9	-
	Min T	1.1	1.5	2.4	3.9	4.3	2.8	2.2	2.7	2.9	-
	Mean T	3.2	3.7	5.0	6.6	7.1	5.1	4.8	4.8	5.5	-
	Tot Mort	60164	47475	56192	73555	94323	73811	57479	48893	90664	-
CKM	Total days	480	303	392	437	228	244	338	398	306	-
	Max T	9.9	5.2	9.1	6.8	6.5	6.3	7.6	8.9	7.5	-
	Min T	4.3	1.0	3.9	2.3	1.3	2.4	2.4	3.6	2.8	-
	Mean T	7.1	3.1	6.5	4.5	3.9	4.4	5.0	6.3	5.2	-
	Tot Mort	90601	61076	73705	83262	43222	48212	63799	76486	62193	-
PXK	Total days	524	576	361	315	294	240	279	216	134	187
	Max T	9.4	9.6	6.8	5.8	8.0	6.2	8.7	7.7	5.7	4.8
	Min T	3.8	4.2	1.9	1.8	2.7	0.9	4.1	2.9	1.3	1.1
	Mean T	6.6	6.9	4.4	3.8	5.4	3.6	6.4	5.4	3.5	2.9
	Tot Mort	100529	108783	67380	62707	57836	46159	54956	40145	25587	38473
SAN	Total days	267	278	435	269	481	397	241	369	389	-
	Max T	5.7	6.9	9.5	5.6	9.9	7.3	6.4	8.0	7.9	-

Min T	1.2	1.8	4.1	1.5	4.3	2.7	2.3	2.7	3.1	-
Mean T	3.4	4.3	6.8	3.6	7.0	5.0	4.3	5.4	5.5	-
Tot Mort	52010	52670	81556	54696	90012	75071	47937	70319	78283	-

293

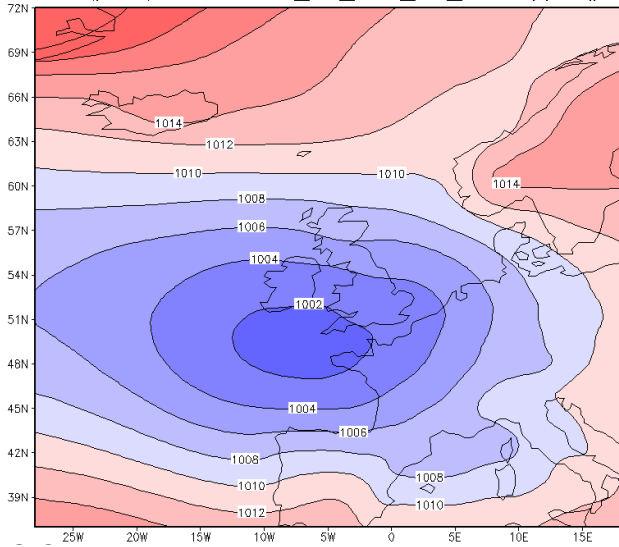
294 3.2 Analysis of the atmospheric patterns

295 In order to study the climatology of the most oppressive, as defined above, classes for the
296 five regions studied, centroid maps of the surface atmospheric pressure regimes are given in
297 Figure 4. It appears that all Figure 4 maps more-or-less depict the same circulation patterns,
298 i.e. the most dangerous class, in terms of excess winter mortality for each classification
299 scheme is characterized by weak (rather shallow) low atmospheric pressure systems located
300 west (and sometimes southwest, for example see ERP class 6 and LND class 3) of the British
301 Isles, whereas anti-cyclonic conditions prevail over Scandinavia and west continental Europe
302 for almost all cases. It is also noteworthy that the semi-permanent Icelandic Low seems to
303 be absent in all 10 classification schemes.

304 This type of weather is known as the Easterly type and is generally characterized by
305 anticyclones over Scandinavia (sometimes extending towards Iceland) and depressions
306 circulating over the western North Atlantic, as well as the Bay of Biscay, where the Azores
307 Anticyclone is generally absent (Lamb, 1950). The aforementioned Easterly type of weather
308 is associated with low temperatures in autumn, winter and spring and sometimes extremely
309 low temperatures with occasional snow in southern districts, snow or sleet showers in
310 eastern and northeastern districts, and dry conditions in western regions (Lamb, 1950). In
311 terms of air masses' movement, the Easterly type of weather is associated with advection of
312 air originating from continental Europe. These flows are characterized by subsidence of
313 several hundred hPa before they land (Walsh et al., 2001) and they are responsible for the
314 low temperatures observed in England, as opposed to relatively warm and humid air
315 originating from the Atlantic. Walsh et al. (2001) and Cattiaux et al. (2013) state that this
316 atmospheric pattern is related to a negative phase of the North Atlantic Oscillation, as well
317 as to positive pressure anomalies over the Arctic.

318

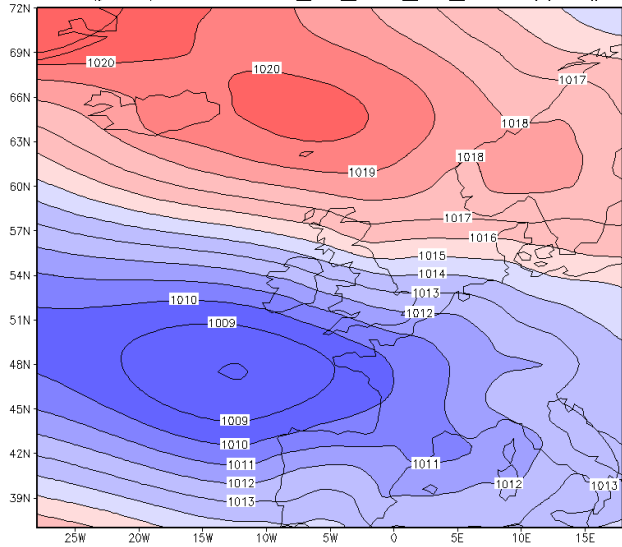
MSLP(year) for ERP09_YR_S04_SP_D04 type #06



320

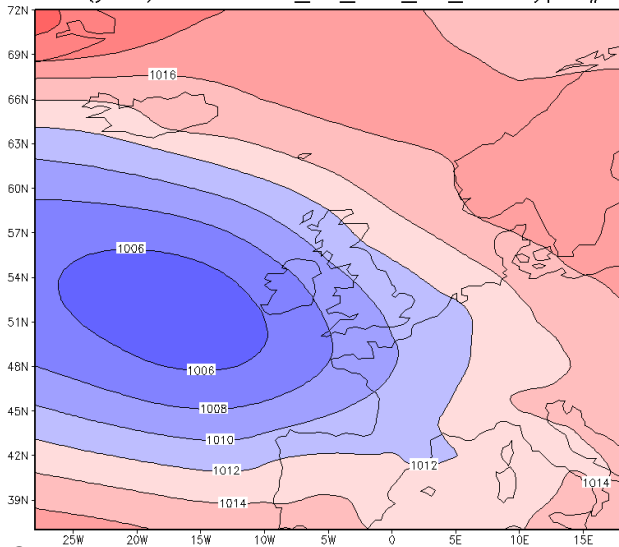
(a)

MSLP(year) for LND09_YR_S04_SP_D04 type #03



(b)

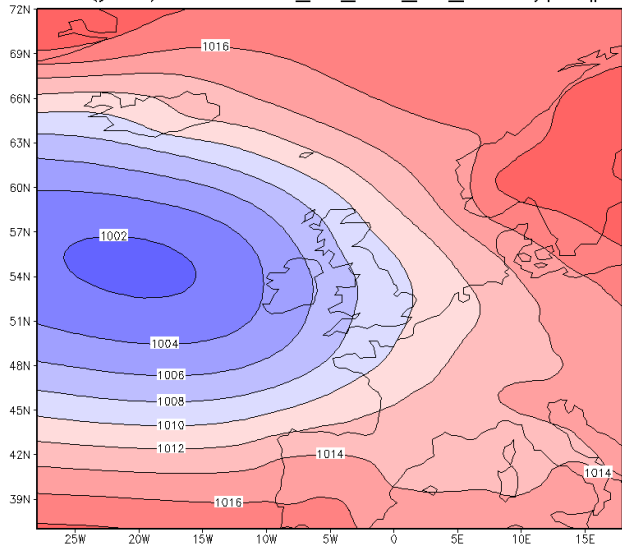
MSLP(year) for KRZ09_YR_S04_SP_D04 type #07



322

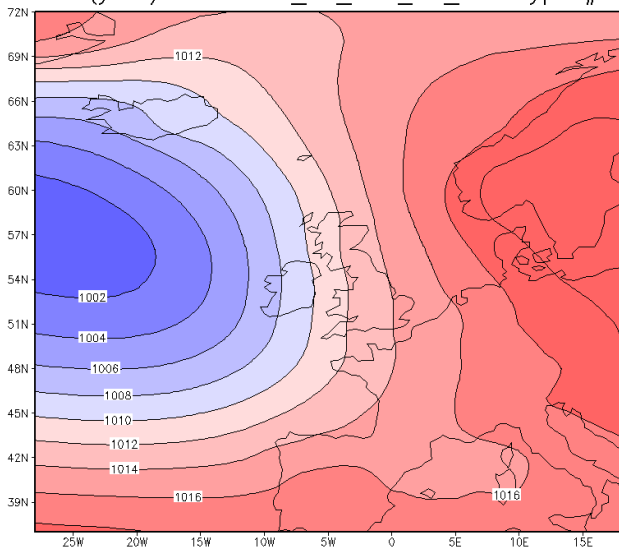
(c)

MSLP(year) for PCT09_YR_S04_SP_D04 type #08



(d)

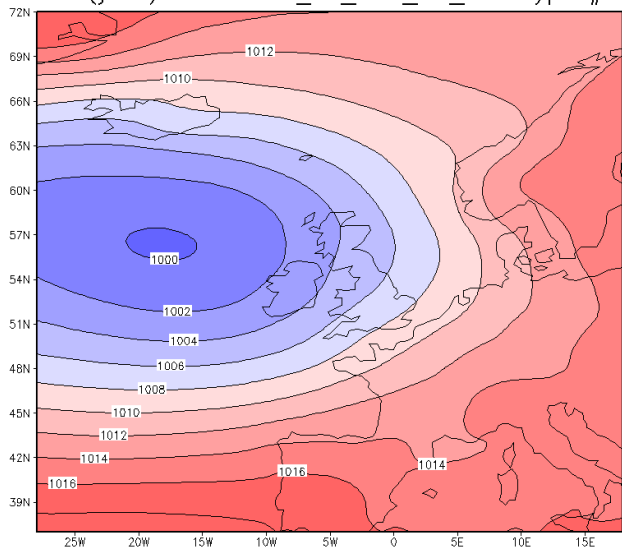
MSLP(year) for PTT09_YR_S04_SP_D04 type #03



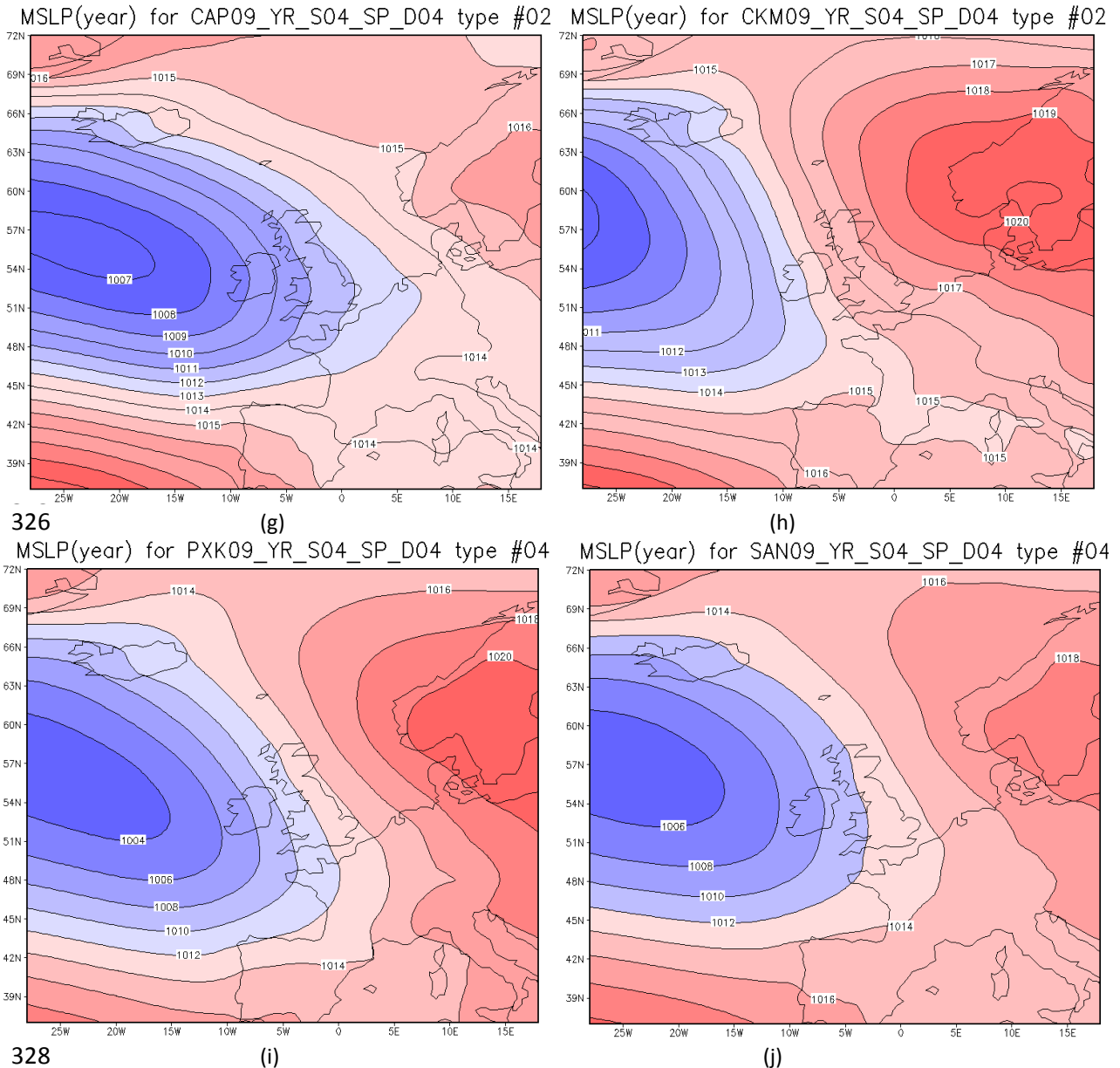
324

(e)

MSLP(year) for PXE09_YR_S04_SP_D04 type #09



(f)



326 (g) MSLP(year) for CAP09_YR_S04_SP_D04 type #02 MSLP(year) for CKM09_YR_S04_SP_D04 type #02
 328 (i) MSLP(year) for P XK09_YR_S04_SP_D04 type #04 MSLP(year) for SAN09_YR_S04_SP_D04 type #04
 329 Figure 4. Centroid maps of surface atmospheric pressure for the most oppressive conditions,
 330 as described by ERP class 6 (a), LND class 3 (b), KRZ class 7 (c), PCT class 8 (d), PTT class 3 (e),
 331 PXE class 9 (f), CAP class 2 (g), CKM class 2 (h), P XK class 4 (i), SAN class 4 (j).

332
 333 According to Dimitriou et al. (2016), easterly flows in England are very often associated with
 334 unfavorable conditions for public health, as the advection of very cold continental air from
 335 northern/eastern Europe that continues for several days, results in low temperatures and
 336 excess mortality. This type of weather is very often associated with a blocking pattern over
 337 Western Europe or increased pressure over Eastern/Northern Europe. Specifically for the
 338 northwest region, Dimitriou et al. (2016) found that easterly short-range flows were linked
 339 to a 5.3% increase in winter mortality.

340

341

342 4. Conclusions

343 The objective of the present work has been to study the link between atmospheric patterns
344 and cold-related mortality at the daily time-scale in England, in order to shed light on the
345 climatology of health outcomes. In doing so, 10 different classification methods provided by
346 the COST-733 tool were used. The use of the specific classification techniques brought a new
347 perspective to the understanding of the climatological associations between mortality and
348 winter weather, and appears to be a valuable addition to the suite of tools available for
349 climate/health data analysis.

350 Our results showed that the most unfavorable conditions for public health in the 5 regions of
351 England were associated with Easterly weather, which is known to favor advection of cold
352 air originating from continental Europe. The fact that little-to-no variation among the 5
353 regions was observed, when grouping the days to form the most oppressive classes for
354 public health, suggested a spatially homogeneous response of the population to the specific
355 atmospheric patterns identified.

356 Not surprisingly, in most of the cases examined through the different classification schemes,
357 excess mortality was linked to the lowest daily minimum/maximum temperatures in the 5
358 regions, in agreement with previous researchers. Nevertheless in a number of cases high
359 mortality rates were associated with relatively higher temperatures, probably due to rapidly
360 changing weather. This finding is indicative of the complexity of cold-related health
361 outcomes and highlights the role of synoptic climatology on confounding the relationship
362 between temperature and mortality.

363 On the whole, the results provided here show that although cold-related health outcomes
364 can be fatal, they can also be predictable and preventable (Ghosh et al., 2014), as policy-
365 makers can be informed appropriately and design intervention strategies towards allocating
366 resources and reducing the adverse health effects of cold weather. In any case further
367 analysis is needed to clarify how the various climatic elements can increase population
368 vulnerability. Additionally, further analysis with more recent data is needed, where due
369 consideration should be given to how to control for regional variation due to socioeconomic
370 differences.

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