



Review

Sources, behaviour, and environmental and human health risks of high-technology rare earth elements as emerging contaminants



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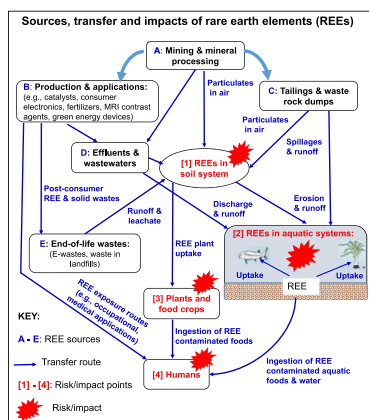
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HIGHLIGHTS

- Various routes transfer rare earth elements (REEs) from sources into the environment.
- Multiple intake routes and risk factors predispose human health to REEs.
- Several human and ecological health effects of REEs are well-documented.
- A conceptual framework and interventions to reduce the health risks are highlighted.
- Source partitioning, behaviour, ecotoxicology and epidemiology remain under-studied.

GRAPHICAL ABSTRACT



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ABSTRACT

Recent studies show that high-technology rare earth elements (REEs) of anthropogenic origin occur in the environment including in aquatic systems, suggesting REEs are contaminants of emerging concern. However, compared to organic contaminants, there is a lack of comprehensive reviews on the anthropogenic sources, environmental behaviour, and public and ecological health risks of REEs. The current review aims to: (1) identify anthropogenic sources, transfer mechanisms, and environmental behaviour of REEs; (2) highlight the human and ecological health risks of REEs and propose mitigation measures; and (3) identify knowledge gaps and future research directions. Out of the 17 REEs, La, Gd, Ce and Eu are the most studied. The main sources of anthropogenic REE include; medical facilities, petroleum refining, mining and technology industries, fertilizers, livestock feeds, and electronic wastes and recycling plants. REEs are mobilized and transported in the environment by hydrological and wind-driven processes. Ecotoxicological effects include reduced plant growth, function and nutritional quality, genotoxicity and neurotoxicity in animals, trophic bioaccumulation, chronic and acute toxicities in soil organisms. Human exposure to REEs occurs via ingestion of contaminated water and food, inhalation, and direct intake during medical administration. REEs have been detected in human hair, nails, and biofluids. In humans, REEs cause nephrogenic systemic fibrosis and severe damage to nephrological systems associated with Gd-

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based contrast agents, dysfunctional neurological disorder, fibrotic tissue injury, oxidative stress, pneumoconiosis, cytotoxicity, anti-testicular effects, and male sterility. Barring REEs in medical devices, epidemiological evidence directly linking REEs in the environment to human health conditions remains weak. To minimize health risks, a conceptual framework and possible mitigation measures are highlighted. Future research is needed to better understand sources, environmental behaviour, ecotoxicology, and human epidemiology. Moreover, research on REEs in developing regions, including Africa, is needed given prevailing conditions predisposing humans to health risks (e.g., untreated drinking water).

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1. Introduction

In recent years, emerging contaminants (ECs) attracted great public and research attention due to their potential human and ecological risks. However, ECs are currently unregulated partly, because their ecotoxicological effects are often poorly understood or sensitive and reliable quantitative analytical methods were unavailable until recently (Petrović et al., 2003). Existing research, including reviews, on ECs has been limited to biological agents such as antimicrobial resistant bacteria and their resistance genes, industrial chemicals such as solvents, food additives/colourants, fire retardants, pharmaceuticals, and personal care products (Jurado et al., 2012; Petrie et al., 2015). Although often overlooked, rare earth elements (REEs), also known as the lanthanide group elements, are an example of ECs. Like most ECs; (1) they are currently unregulated in humans and the environment (Kulaksız and Bau, 2013), (2) they are not routinely monitored in environmental and public health programs, (3) they are micropollutants detectable with analytical equipment with very low detection limits; and (4) their mechanisms of environmental and human toxicity are poorly understood.

Until recently, REEs have received limited attention from environmental and public health researchers probably due to their limited industrial use. High-technology REEs such as lanthanides lanthanum

(La) to lutetium (Lu) and scandium and yttrium, are used in the production of electronic devices and advanced engineered systems. For example, REEs are employed in the following: (1) in the production of electronic devices e.g., mobile phones, (2) in the development of advanced weapon systems, (3) as components of super-capacitors and conductors, and (4) as contrast agents in medical imaging such as magnetic resonance imaging (MRI) (e.g., Bau et al., 2006; Kulaksız and Bau, 2011a, 2011b; CR Li et al., 2013, X Li et al., 2013). Recent technological advances in medicine, mobile communication, energy, and armaments have resulted in an increase in the extraction and subsequent use of REEs. The increase in industrial applications could be accompanied by their increase in the environment, posing public and ecological health risks. In the context of contaminants of emerging concern, the current study is limited to the lanthanides (La-Lu), yttrium, and scandium.

Recently, there has been an increase in data on the environmental occurrence, behaviour, and health risks of anthropogenic REEs (e.g., Tepe et al., 2014; Hatje et al., 2016; Ayedun et al., 2017; Dan et al., 2017). Earlier reviews focused on the industrial applications, environmental behaviour and human toxicity of REEs, yet none considered them as ECs (e.g., Fraum et al., 2017; Rogowska et al., 2018). Fraum et al. (2017) presented a review on Gd risk assessments with emphasis on nephrogenic systemic fibrosis, including; immediate adverse

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