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In vitro assessment of oral and respiratory bioaccessibility of trace elements of environmental concern in Greek fly ashes: assessing health risk via ingestion and inhalation

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1 **In vitro assessment of oral and respiratory bioaccessibility of trace elements of**
2 **environmental concern in Greek fly ashes: assessing health risk via ingestion and**
3 **inhalation**

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28
29 **ABSTRACT**

30 Fly ash engender significant environmental and human health problems due to enhanced contents of
31 potentially harmful trace elements (TrElements). This study aims to evaluate human exposure to TrElements
32 via a combined ingestion (i.e., oral bioaccessibility) and inhalation (i.e., respiratory bioaccessibility)
33 pathway. Five fly ash samples were collected from power plants operating in the main lignite basins of
34 Greece, while the ingestible (<250 μ m) and inhalable (<10 μ m) particle size fractions were utilized. The
35 Unified Bioaccessibility Method (UBM) was utilized to assess the oral bioaccessibility, while the
36 respiratory bioaccessible fractions were extracted using the Artificial Lysosomal Fluid (ALF). All
37 studied FAs exhibited significantly higher contents in Ba, Cr, Ni, V and Zn. Cadmium was presented
38 relative enriched in the finer size fraction (<10 μ m), while Ba, Co, Cr, Cu, Mn, Ni and V were depleted.
39 The UBM-extractable concentrations fluctuated greatly among the studied FAs, while notably lower
40 bioaccessible contents were recorded in the gastrointestinal phase. On the other hand, ALF-extractable
41 concentrations were surprisingly higher than the corresponding UBM-extractable ones in the gastric
42 phase. The oral bioaccessibility of the studied TrElements ranged from 12.5 to 100%, while respiratory
43 bioaccessibility presented high values exceeding 45% on average. A significant effect of fly ash type on
44 human bioaccessibility was revealed. Thus, high-Ca FAs exhibited significantly higher bioaccessibility
45 of the studied TrElements via ingestion, while a relatively higher bioaccessibility via inhalation was
46 observed for high-Si FAs. Regarding non-carcinogenic health risk via ingestion and inhalation, Cr and
47 Co exhibited the highest HQ_{ing} and HQ_{inh} values, however there were significantly lower than safe level
48 (HQ < 1). On the contrary, Cr was the dominant contributor to carcinogenic risk with CR values being
49 well above threshold or even tolerable risk levels.

50 **Keywords:** human bioaccessibility; fly ash; trace element; health risk; cancer risk

51 1. INTRODUCTION

52 Coal-fired power plants are still predominant energy suppliers worldwide trying to fulfill the
53 growing global energy demands (Izquierdo et al. 2013). Fly ash (FA) as the primary by-product
54 of coal-based energy supply, present increased production rates which reach 100 Mt in the
55 European Union every year (ECOBA, 2016). Fly ash suitability in a variety of engineering and
56 industrial applications has been proposed through continuous research efforts, however under
57 50% of world's fly ash production is presently utilized (ECOBA, 2016). Thus, large volumes
58 of fly ash are still stockpiled, dumped in landfills sites or lagooned around the world causing
59 potential environmental hazards.

60 Fly ash is considered by many researchers (Izquierdo and Querol 2012; Jankowski et al. 2006;
61 Ram et al. 2015; Singh et al. 2011) as extremely contaminating due to enhanced levels of
62 potentially harmful or health-hazardous trace elements (TrElems). The content/distribution of
63 TrElems in fly ash depends on several factors such as elements volatilization, the modes of
64 occurrence of TrElems in coal, the coal source(s), the combustion conditions i.e. operation
65 parameters of boilers, the particle size of the ash, and pollution control equipment (Gong et al.
66 2018; Mardon et al., 2008; Mokhtar et al., 2014; Vassilev and Vassileva, 2007). The
67 determination of TrElems in FAs is of great importance in consideration of their hazards and
68 thereby a substantial volume of bibliographic data report on the physicochemical properties of
69 fly ash (Dai et al., 2011; Georgakopoulos et al. 1994; Gong et al. 2018; Kostakis et al. 2009;
70 Kostova et al. 2016; Koukouzas et al. 2006; Medina et al. 2010; Meij and Winkel, 2009; Tian
71 et al. 2013; Vassilev and Vassileva 1996; Vassilev 1994; Zhao et al. 2018). On the other hand,
72 the total TrElems contents are not a reliable indicator of the potential environmental hazards
73 providing overestimated predictions of the risk levels. Thus, leaching characteristics of FAs
74 provide a more realistic estimation of TrElems availability and mobility and has attracted
75 substantial attention (Belviso et al. 2015; Flues et al. 2013; Georgakopoulos et al. 2002a, b;
76 Ibrahim 2015; Izquierdo et al. 2011; Jankowski et al. 2006; Nyale et al. 2014; Sandeep et al.
77 2016; Yilmaz 2015).

78 On the other hand, human exposure to fly ash particles is a health concern being linked with
79 pulmonary and cardiovascular diseases (Borm 1997; Huang et al. 2006; Sichletidis et al. 2005;
80 Smith et al. 2006). Although particulate matter emissions from coal-fired power plants are well
81 controlled through the operation of electrostatic precipitators, fly ash emissions stay, in a
82 regional-scale, an important proportion of the total particulate exposure for employees in power
83 plants and residents of significantly affected adjacent areas. Moreover, in the absence of
84 specific occupational limit for fly ash emissions, exposure to fly ash particles is not properly
85 regulated. Thereby, accurate calculations of exposure to potentially harmful or health-
86 hazardous TrElems via ingestion and inhalation of fly ash are required.

87 While the traditional approaches in exposure assessment is based on the determination of intake
88 dose (the amount of a chemical ingested or inhaled by an individual) based on total elemental
89 contents, the trend is currently shifting towards the adsorbed dose which results in more adverse
90 health effects. Thus, information regarding bioaccessible fractions i.e. the fractions soluble in
91 the conditions of the target compartment, i.e., the gastrointestinal tract for oral bioaccessibility
92 (Oomen et al. 2002; Ruby et al. 1996) and respiratory tract for respiratory bioaccessibility
93 (Kastury et al. 2017), after coming into contact with simulated biological fluids are crucial in
94 health risk assessment.

95 Several *in vitro* methods have been developed which mimic the solubilization process during
96 digestion and inhalation, however to the best of our knowledge the literature contains only
97 limited data related to TrElems released from various fly ash materials in simulated gastric and
98 lung fluids (Bourliva et al. 2017; Jin et al. 2013; Lokeshappa et al. 2014; Twining et al. 2005).
99 For example, Twining et al. (2005) reported that bioaccessibility of metals was ranging between
100 7 % for Pb to 100 % for Cu in fly ash from coal-fired power plants, as well as fly ash from tire
101 and coal co-combustion. Moreover, Lokeshappa et al. (2014) determined the oral bioaccessible
102 fractions of As, Cr, Pb, Se and Zn in Ca-rich and Si-rich fly ashes using a physiologically based
103 extraction test (PBET). As reported, more than 40 % of As was in bioaccessible form, while Se
104 was very bioaccessible in Ca-rich fly ashes. Meanwhile, Pb was found to be insignificantly
105 bioaccessible in the studied fly ashes. On the contrary, Jin et al. (2013) focused on As
106 bioaccessibility in simulated gastric and intestinal solutions and reported that 33-61% of the
107 total As was in bioaccessible form. Finally, our previous investigation (Bourliva et al. 2017)
108 investigated oral bioaccessibility of fly ash-derived magnetic components where TrElems
109 exhibited enhanced bioaccessibility varying between 11.3 (for Cr) and 83.6 % (for As) in the
110 fly ash magnetic fractions. Following on from our prior studies and taking into consideration
111 that little data is available on the bioaccessibility of TrElems in the particle size-associated
112 fractions of fly ash and on human exposure to TrElems through ingestion (i.e., oral
113 bioaccessibility) and inhalation (i.e., respiratory bioaccessibility) pathways, the specific
114 objectives of this study was to (i) investigate the TrElems distribution in ingestible and
115 inhalable size fractions of fly ashes, (ii) assess the bioaccessibility of selected TrElems via
116 ingestion and inhalation of fly ash, (iii) evaluate the influence of fly ash type on bioaccessibility,
117 and (iv) calculate the potential health risk for on-site workers and people living around fly ash
118 disposal sites.

119

120 2. MATERIALS AND METHODS

121 2.1. Materials and sample preparation

122 Sample selection was aiming to cover different FA chemical types. Thus, five fly ash (FA)
123 samples produced in coal-fired power plants operating in the main lignite basins of Greece,

124 were selected. In particular, three FA samples (AD, KD, AF) were from power plants installed
125 in the Ptolemais-Amynteo lignite basin, while the rest samples (MG1, MG2) originated from
126 power plants operating in the Megalopolis basin. All fly ash samples were composite samples
127 of three different subsamples from each power plant. Sample pretreatment included
128 homogenization, air-drying and grain/particle sizing by dry sieving. The particle sizes utilized
129 were representative of the fraction that could be ingested (size fraction $<250\mu\text{m}$) or inhaled
130 ($<10\mu\text{m}$). Fly ash samples were sealed in plastic zip locks bags, and stored at $4\text{ }^{\circ}\text{C}$ until
131 extraction and analysis. Details of the power plants and the main physicochemical
132 characteristics of the bulk FAs are presented elsewhere (Bourliva et al. 2017). In brief, FAs
133 originating from Kozani-Ptolemais power plants (samples AD and KD) exhibited a large
134 proportion of CaO ($>35\%$) and simultaneously relatively lower SiO_2 (around 20%) contents.
135 Inversely, FAs originating from Megalopolis power plants showed low CaO contents (11.79-
136 13.56%) in combination with enhanced SiO_2 ($>35\%$) and Fe_2O_3 (almost 10%) contents. In
137 contrast, Amynteo FA (AM) exhibited elevated CaO and SiO_2 contents. In any case, the studied
138 FAs did not meet exactly the Class C and Class F classification requirements and therefore they
139 are mentioned as *high-Ca* (AD, KD and AM) and *high-Si* (AM, MG1 and MG2) FAs, hereafter.

140 2.2. Analytical Methods

141 2.2.1. Mineralogical and morphological characterization

142 Mineralogical composition of bulk FAs was identified by X-ray powder diffraction (XRPD)
143 using a water-cooled Rigaku Ultima+ diffractometer with CuK α radiation, a step size of 0.05°
144 and a step time of 3 s, operating at 40 kV and 30 mA. The size and the morphology of the fly
145 ash particles were examined by scanning electron microscopy (SEM) on a JEOL JSM-840A
146 microscope operating at 20 kV connected with an X-ray energy dispersive spectrometer-EDX
147 (INCA 300). SEM observations (randomly selected fields of view) were made on carbon-coated
148 representative portions of each grain size fraction onto a double-sided aluminum tape mounted
149 on a SEM stub.

150 2.2.2. Elemental analysis

151 Near-total elemental contents of the examined FA samples were determined, after an *aqua regia*
152 digestion, using inductively coupled plasma mass spectrometry (ICP-MS) at ActLabs
153 Analytical Laboratories Ltd., Canada (for ingested size fraction $<250\mu\text{m}$) and GeoBioTec
154 Laboratory, University of Aveiro, Portugal (for inhaled size fraction $<10\mu\text{m}$). Quality assurance
155 and quality control (QA/QC) included reagent blanks, analytical replicates, sample duplicates
156 and analyses of in house reference materials. The results of the blanks were always below
157 detection limits. The recovery rates were estimated within $\pm 10\%$ of the certified value, and
158 analytical precision (expressed as RSD%) was $<10\%$ for all elements.

159 2.2.3. In vitro oral and respiratory bioaccessibility

160 The oral and respiratory bioaccessibility determinations of trace elements of environmental
161 concern were carried out in GeoBioTec, University of Aveiro, Portugal. Oral bioaccessibility
162 was determined in the $< 250\mu\text{m}$ fraction, using the Unified Bioaccessibility Method (UBM)
163 validated against an in vivo model (Denys et al. 2012). The UBM protocol, fully described by
164 Wragg et al. (2011), is a two stage in vitro procedure which simulates the leaching of a solid
165 matrix in both the Gastric (G phase) and the GastroIntestinal tract (GI phase) by using synthetic
166 digestive solutions according to physiological transit times. Respiratory bioaccessibility
167 determinations were performed in the inhalable size fraction ($<10\mu\text{m}$) using an artificial
168 lysosomal fluid (ALF) solution (pH 4.5) which simulates the intracellular conditions in the
169 lungs and extracts higher concentrations of metals than other commonly used simulated lung
170 fluids (Pelfrêne et al. 2017). ALF solution is a complex medium with high concentration of
171 organic complexing agents and low pH, which may have contributed to the dissolution of these
172 elements. 0.05g (± 0.0001) of the inhaled size fraction $<10\mu\text{m}$ was weighed into 85 mL
173 polycarbonate centrifuge tubes and 50 mL of the simulated fluid (ratio - 1:1000) added. The
174 samples were shaken at $37\text{ }^\circ\text{C}$ on an end-over-end shaker for 24 h and the particles were
175 separated from the solution by centrifugation at 4500g for 15 min. All simulated biological
176 fluids (SBFs), both digestive and lung, were freshly prepared prior extraction. Analyses of oral
177 and pulmonary bioaccessible concentrations (mg kg^{-1}) in the extracts were performed by ICP-
178 MS. Blanks, duplicate samples and bioaccessibility guidance materials have been obtained with
179 each batch of bioaccessibility extractions for quality control. The blanks always returned
180 outcomes below detection limits, while mean repeatability (expressed as RSD%) for the gastric
181 phase was $<5\%$ for all studied TrElements except of Pb with an uncertainty of $<10\%$. In the
182 absence of certified reference materials for bioaccessibility determinations, materials providing
183 bioaccessibility guidance values were used for quality control in combination with analytical
184 duplicates and blanks. In particular, the UBM-specific certified reference soil BGS102 (an
185 ironstone soil from Lincolnshire, UK), which provides UBM guidance values (Wragg et al.
186 2009, 2011; Hamilton et al. 2015) along with the standard reference material BCR-723 which
187 respiratory bioaccessibility values are reported (Pelfrêne et al. 2017), were used in order to
188 validate the uncertainty of the extraction protocols. For BGS102 recovery rates were ranging
189 between 100.8% (Cd) and 118.6% (Cu) for gastric phase, while a range of 72.2% (Cd) – 117.5%
190 (Ni) was found for gastrointestinal phase. For BCR723 the recovery rates were ranging between
191 70.9% (Cd) and 184.3% (Ni).

192 2.3. Statistical analysis

193 Relationships between bioaccessible TrElements and FA type were investigated via statistical
194 analysis including principal component analysis (PCA) and Pearson's correlation. PCA with a
195 VARIMAX rotation was applied for interpretation of the principal components (PCs) and
196 factors with eigenvalues greater than unity were retained in the analysis. Moreover, Pearson's

197 correlation was additionally adapted to evaluate relationships between the two characteristics
 198 (chemical composition and bioaccessibility) in order to support the interpretation of PCA
 199 results. Moreover, analysis of variance (ANOVA) was used to identify significant differences
 200 among different variables. All statistical determinations were conducted by means of SPSS v.25
 201 software (IBM Corporation, Armonk, NY).

202

203 2.4. Health risk assessment

204 2.4.1. Exposure assessment

205 In order to evaluate the potential health risk, mainly for onsite workers, through the exposure
 206 to fly ash particles the models developed by the United States Environmental Protection
 207 Agency (U.S.E.P.A., 2002) were employed. Specifically, the non-carcinogenic and
 208 carcinogenic health risk via ingestion and inhalation was estimated for several TrElems of
 209 environmental concern i.e. Cd, Co, Cr, Cu, Ni, Pb and Zn. For the exposure assessment model,
 210 Chronic Daily Intake via incidental ingestion (CDI_{ing} , $\text{mg kg}^{-1} \text{d}^{-1}$) and direct inhalation (CDI_{inh} ,
 211 $\text{mg kg}^{-1} \text{d}^{-1}$) of fly ash particles were calculated according to the following formulas:

212

$$213 \quad CDI_{ing} = \frac{C_{(Gastric)} \times IngR \times ED \times EF}{BW \times AT} \times 10^{-6} \quad (1)$$

214

$$215 \quad CDI_{inh} = \frac{C_{(Pulmonary)} \times InhR \times ET \times ED \times EF}{PEF \times BW \times AT \times 24} \quad (2)$$

216

217 where $C_{(Gastric)}$ and $C_{(Pulmonary)}$ are the bioaccessible concentrations (mg kg^{-1}) in simulated
 218 gastric (G phase) and lung fluids, respectively; $IngR$ is the ingestion rate (mg day^{-1}); $InhR$ is
 219 the inhalation rate ($\text{m}^3 \text{day}^{-1}$); ET is the exposure time (h day^{-1}); EF is the exposure
 220 frequency (days year^{-1}); ED is the exposure duration (years); BW is the average body weight
 221 (kg); AT is the averaging time (days); PEF is the particle emission factor ($\text{m}^3 \text{kg}^{-1}$). Exposure
 222 data were adapted from US Environmental Protection Agency guidelines (U.S.E.P.A. 2014),
 223 however regional or individual differences may introduce some uncertainties in the procedure.
 224 The adopted parameter values are given in Table S1 (Supplementary Material).

225 2.4.2. Risk characterization

226 The Hazard Quotient (HQ) and the Cancer Risk (CR) were quantified for non-carcinogenic and
 227 carcinogenic health risks, respectively. Non-carcinogenic health risk via ingestion (HQ_{ing}) and
 228 inhalation (HQ_{inh}) were calculated by the following formulas (U.S.E.P.A., 2007)

$$229 \quad HQ_{ing} = \frac{CDI_{ing}}{RfD_o}$$

$$230 \quad HQ_{inh} = \frac{CDI_{inh}}{RfC_i}$$

231 where RfD_o is the oral and inhalation reference dose ($\text{mg kg}^{-1} \text{d}^{-1}$) and RfC_i is the inhalation
 232 reference concentrations (earlier terminology was "inhalation reference dose-RfD", converted
 233 to $\text{mg kg}^{-1} \text{d}^{-1}$), which correspond to the maximum allowable daily oral and inhalation dose that
 234 is not likely to cause any deleterious effects on human health. $HQ < 1$ indicates no adverse
 235 health effects, while $HQ > 1$ indicates likely adverse health effects (Man et al., 2010; Bourliva
 236 et al. 2017b).

237 On the other hand, the CR posed by the elements was obtained for both ingestion (CR_{ing}) and
 238 inhalation (CR_{inh}) using the following formulas:

$$239 \quad CR_{ing} = CDI_{ing} \times SF_o$$

$$240 \quad CR_{inh} = CDI_{inh} \times IUR$$

241 where SF_o is the oral slope factor ($\text{mg kg}^{-1} \text{day}^{-1}$) and IUR is the inhalation unit risk ($\mu\text{g m}^{-3}$)
 242 respectively. For the regulatory purposes, a CR value below 1×10^{-6} was considered acceptable
 243 (Li et al., 2017; Megido et al., 2017). The RfD_o , RfC_i , SF_o , and IUR values for each element
 244 were found in the screening level (RSL) tables provided by USEPA (USEPA, 2016).

245 3. RESULTS AND DISCUSSION

246 3.1. Mineralogy and microstructural characteristics of FAs

247 The mineralogical composition of the studied FAs is given in Table S2 (Supplementary
 248 Material), while the XRD patterns are illustrated in Fig.1. As shown, the sampled FAs included
 249 both amorphous and crystalline mineral phases. The broad humps observed in the baseline
 250 between 10 and 40° in the XRD patterns of the FAs (Fig.1) verify the presence of an amorphous
 251 glassy phase. The amorphous matrix was not calculated however the broader humps shaped in
 252 the high-Si Megalopolis FAs indicated higher amorphous contents compared to the high-Ca
 253 FAs. A range of 20-50% for the amorphous phases in the Greek FAs was reported from previous
 254 researchers (Koukouzas et al. 2006). The crystalline fraction consists mainly of quartz and a
 255 variety of Ca-bearing mineral phases, while minor amounts of hematite, maghemite, K-
 256 feldspars, plagioclase and clays were detected. Notable differences were observed among the
 257 studied FAs. Specifically, the high-Ca FAs were dominated by lime (CaO, range of 24-32%),
 258 while the high-Si Megalopolis FAs (samples MG1 and MG2) were mainly consisted of quartz
 259 (33-34%) but with substantially lower contents of Ca-bearing species (i.e. lime and calcite) and
 260 the abundance of hematite and maghemite due to higher Fe contents in the FAs. Insignificant
 261 differences were found among the studied FAs regarding the presence of secondary Ca-bearing
 262 phases i.e. Ca-sulphates (i.e. anhydrite) and Ca-hydrated silicates such as gehlenite with both
 263 being detected in high amounts in all FAs.

264 Figure 1

265 SEM observations on both separated size fractions ($<250\mu\text{m}$ and $<10\mu\text{m}$) of the studied FAs
266 were performed and different types of fly ash particles were revealed to dominate the sampled
267 FAs as shown in Figure 2. The same magnification (x500) was used in all images for
268 comparison reasons. Regarding the ingestible fraction ($<250\mu\text{m}$) notable differences in the
269 morphological properties among different FA samples were observed. Sample KD is composed
270 mainly of irregular shaped Si-rich particles and angular Ca-rich agglomerates in a wide range
271 of sizes (Fig.2). Moreover, traces of spherical shaped particles with high Si contents and low
272 Ca, Mg, K and Fe contents were detected by the EDS (Fig.2). Furthermore, irregular shaped
273 agglomerates with high Ca and S contents were detected being probably anhydrite determined
274 by XRD. On the other hand, the structural characteristics of AM and MG1 samples were notably
275 different from KD sample exhibiting multiplicity of spherical particles. Specifically, sample
276 AM presented Si-rich and Ca-rich spherules, while amorphous aluminosilicate glass spheres
277 and Ca-Al-silicate spherical shaped particles were also detected by EDS. Conversely, although
278 the morphological characteristics of sample MG1 look alike with those of sample AM, more
279 well structured, individual spherules and of higher particles sizes were observed (Fig.2). In
280 particular, Si-rich spherules with lower contents of Ca, Al, Mg and Fe were detected. Moreover,
281 a large amount of Fe-rich spherules were revealed verifying the high Fe-contents in the FAs
282 originating from Megalopolis power plants. As regards the inhalable fraction ($<10\mu\text{m}$), sample
283 KD was dominated by formless Ca-rich agglomerates (Fig.2). Unlike, sample AM presented
284 spherical shaped agglomerates with elevated Ca contents and amorphous Ca-rich spheres.
285 Moreover, needle anhydrite crystals were detected on the surface of Ca-rich agglomerates and
286 spheres. On the contrary, sample MG1 was dominated by well structured, distinct spherules
287 (Fig.2). Specifically, aluminosilicate glass spheres and ferrospheres were detected, while needle
288 anhydrite crystals were also present.

289 Figure 2**290 3.2. Concentration of TrElems in FAs**

291 The near total concentration of TrElems in the different particle sizes ($<250\mu\text{m}$ and $<10\mu\text{m}$) of
292 the studied FAs are given in Table 1. As shown, TrElems presented mean concentration values
293 following a decreasing order as: Ba > Ni > V > Cr > Zn > Cu > Mo > Pb > Co > Sn > Be > Sb
294 > Cd in the $<250\mu\text{m}$ size fraction, while in the finer fraction ($<10\mu\text{m}$) the order was modified
295 as Zn > Ba > Ni > V > Cr > Cu > Pb > Co > Cd > Be. Generally, in both studied size fractions,
296 all samples presented significantly higher concentrations in a number of trace elements, most
297 notably Ba, Cr, Ni, V and Zn. Specifically, the aforementioned elements exhibited mean
298 concentrations of 368.4 mg kg^{-1} , 182.6 mg kg^{-1} , 206.2 mg kg^{-1} , 192.2 mg kg^{-1} , 116.6 mg kg^{-1} ,
299 respectively in the $<250\mu\text{m}$ size fraction and 232.1 mg kg^{-1} , 136.6 mg kg^{-1} , 173.1 mg kg^{-1} , 167.9

300 mg kg⁻¹, and 245.1 mg kg⁻¹, respectively in the finer fraction (<10µm). In contrast, the contents
 301 of Be, Cd and Sb were the lowest presenting mean concentrations <3 mg kg⁻¹.

302 **Table 1**

303 In order to evaluate the effect of particle size on elemental contents and to define the
 304 enrichment/depletion in the finer size fraction of the studied FAs, the Relative Enrichment
 305 Factor (REF) was used (Gong et al. 2018; Zhou et al. 2015). REF, defined as the content of
 306 trace elements in finer fractions (< 10 µm) compared to that in coarser fractions < 250 µm was
 307 calculated as follows:

$$308 \quad REF = \frac{C_{i,<10\mu m}}{C_{i,<250\mu m}}$$

309 where, C_i is the concentration of element i in the fine (<10µm) and the coarse (<250µm) size
 310 fraction and the results are illustrated in Figure S1 (Supplementary Material). As shown, Cd
 311 exhibited the highest REFs with ranges of 0.92-4.40, respectively, indicating a relative
 312 enrichment in the finer fraction as previously reported by several researchers (Gong et al. 2018;
 313 Tang et al. 2013; Zhou et al. 2015). On the other hand, REFs for elements such as Ba, Co, Cr,
 314 Cu, Mn, Ni and V were lower or approximate to 1, suggesting a relative depletion in the finer
 315 fraction. Furthermore, noteworthy were the differences of REFs among studied FAs with low-
 316 Ca FAs (samples MG1 and MG2) samples presenting higher values, most notably for Cd, Pb
 317 and Zn. Specifically, REFs for Pb and Zn were approximate to or exceeding 1.5 for low-Ca
 318 FAs from Megalopolis power plants (samples MG1 and MG2), in contrast with the
 319 corresponding values of high-Ca FAs from Ptolemais-Amynteo power plants (AD, KD and AF)
 320 ranging between 0.42 and 0.69 for Pb and between 0.52 and 0.82 for Zn. As the content of Fe
 321 was significantly higher in the Megalopolis samples (range of 7.2-7.8%) in the finer fraction
 322 (<10µm), it could be supposed that the statistically significant REFs values in Megalopolis FAs
 323 are probably relative to Fe in the fine particles. Besides, trace elements are easily bonded to Fe
 324 oxides in fly ash (Zhou et al. 2015).

325 By comparing the obtained values with the reported average values for European fly ashes
 326 (Moreno et al. 2005) and also with values reported for different FAs worldwide (Silva et al.
 327 2012; Vassilev et al. 2003; Yang et al. 2014), the studied FA samples were presented relatively
 328 enriched in Cr and Ni, while noteworthy enrichment in V and Zn was observed in Megalopolis
 329 FAs (Table 1). On the other hand, Mo in Megalopolis FAs was observed with levels more than
 330 10 times greater than the respective average values recorded for the European FAs. In
 331 particular, elevated Mo concentrations of 201 mg kg⁻¹ and 123 mg kg⁻¹ were recorded for
 332 samples MG1 and MG2, respectively, in contrast to a range of 5-22 mg kg⁻¹ reported by Moreno
 333 et al. (2005). On the contrary, the studied FAs were depleted in a number of elements of
 334 environmental concern such as Pb and Sb. In particular, Pb exhibited a diminished range of

335 concentrations of 22.1-51.4 mg kg⁻¹ compared to the corresponding ones reported for European
336 FAs (80 mg kg⁻¹, Moreno et al. 2005) and Chinese FAs (69.7 mg kg⁻¹, Yang et al. 2014).

337

338 3.3. Oral and respiratory bioaccessibility

339 The bioaccessible concentrations (mg kg⁻¹) of the studied TrElems in the studied FAs are
340 presented in Table S3 (Supplementary material), while bioaccessible fractions (BAF %) are
341 illustrated in Figure 3.

342 **Figure 3**

343 3.3.1. Bioaccessibility in gastrointestinal tract

344 The average UBM-extractable contents of the studied TrElems in the gastric phase (G-phase)
345 exhibited a decreasing order as follows: Cr (61.07±38.86 mg kg⁻¹) > Ni (51±24.64) > Zn
346 (39.51±11.62) > Cu (26.04±6.34) > Pb (9.91±2.12) > Co (6.47±1.51) > Cd. (0.61±0.26).
347 Notably lower bioaccessible contents were recorded in the gastrointestinal phase (GI-phase)
348 probably due to lower solubility under higher pH conditions (pH=6.3) with those of Cr, Cu, Pb
349 and Zn being statistically significant ($p < 0.01$, ANOVA). Besides, the pH dependency of
350 bioaccessibility has been previously reported (Reis et al. 2013). Specifically, the mean
351 bioaccessible contents in the GI-phase were 0.38±0.19 for Cd, 5.47±1.45 for Co, 6.33±7.80 for
352 Cr, 12.26±7.35 for Cu, 51.17±27.27 for Ni, 0.21±0.14 for Pb and 8.47±3.04 for Zn showing a
353 decreasing order of Ni > Zn > Cu > Cr > Co > Cd > Pb. The observed pattern of constantly
354 lower bioaccessibility contents (mg kg⁻¹) in the GI phase has been previously reported in a
355 number of studies ([Zia et al., 2011](#); [Reis et al., 2013](#); [Patinha et al. 2015](#); [Bourliva et al. 2017](#);
356 [Pelfrêne and Douay 2018](#)).

357 When expressing UBM-extractable contents as a percentage with respect to the total elemental
358 contents in FAs (Fig.3), a particularly different trend is presented indicating that the highest
359 determined bioaccessible fractions do not match to the highest bioaccessible contents. The
360 bioaccessible fractions (BAF%) of the studied TrElems ranged from 12.5 to 100% indicating
361 that some elements are highly bioaccessible, while others not. Specifically, the mean BAF%
362 exhibited a decreasing order of Cd > Zn > Cu > Cr > Pb > Co > Ni in the gastric phase, while
363 it was formulated as follows: Cd > Ni > Co > Cu > Zn > Cr > Pb in the GI-phase. In any case,
364 the BAF% of all studied elements, fluctuated greatly among the studied samples. Specifically,
365 BAF% exhibited ranges of 48.3-100% for Cd, 14.9-36.3% for Co, 13.7-80.3% for Cr, 21.6-
366 46.1% for Cu, 12.5-37.5% for Ni, 25.4-41.5% for Pb and 24.7-50% for Zn in the G phase and
367 31.5-55.7% for Cd, 11.7-32% for Co, 0.8-8% for Cr, 3.6-30.2 % for Cu, 10.3-39.4% for Ni,
368 0.3-0.9% for Pb, and 5.8-11.3% for Zn in the GI-phase.

369 Moreover, correlations among bioaccessible concentrations (mg kg⁻¹) / fractions (%) and total
370 concentrations were searched in the studied FA samples. There were no important correlations

371 between total and bioaccessible concentrations (G phase) of the studied TrElems (data not
372 shown) except for Zn ($R^2= 0.975$, $p < 0.01$), suggesting that total concentrations of TrElems
373 could not be a good indicator of oral bioaccessibility. On the contrary, significant correlations
374 appeared in GI phase for Cr ($R^2= 0.908$, $p < 0.05$), Pb ($R^2= 0.942$, $p < 0.05$) and Zn ($R^2= 0.961$,
375 $p < 0.01$). Similarly, no significant correlations were recorded (data not shown) among total
376 contents and bioaccessible fractions (%), except for Co which exhibited a negative strong
377 correlation in both G ($R^2= -0.892$, $p < 0.05$) and GI ($R^2= -0.951$, $p < 0.05$) phase.

378 3.3.2. Bioaccessibility in respiratory tract

379 In the present study, respiratory bioaccessibility of TrElems was measured in the sampled FAs
380 using ALF as a simulated lung fluid. The respiratory bioaccessible concentrations exhibited
381 ranges of 0.31-2.20 mg kg⁻¹ for Cd, 42.67-83.36 mg kg⁻¹ for Cr, 4.40-9.13 mg kg⁻¹ for Co, 20-
382 60.86 mg kg⁻¹ for Cu, 41.31-85.65 mg kg⁻¹ for Ni, 8.50-34.06 mg kg⁻¹ for Pb and 29.37-127.09
383 mg kg⁻¹ for Zn. The average ALF-extractable contents presented a descending order of Zn
384 (86.46 mg kg⁻¹) > Ni (71.90 mg kg⁻¹) > Cr (63.64 mg kg⁻¹) > Cu (38.43 mg kg⁻¹) > Pb (19.47
385 mg kg⁻¹) > Co (6.86 mg kg⁻¹) > Cd (1.23 mg kg⁻¹). The ALF-extractable concentrations were
386 surprisingly higher than the corresponding UBM-extractable ones in the gastric phase for most
387 TrElems (except Cr and Co) indicating the aggressiveness of the selected simulated lung fluid
388 (Wiseman and Zereini 2014; Pelfrène et al. 2017; Potgieter-Vermaak et al. 2012).

389 The values of the respiratory bioaccessible fractions (%) of TrElems were also expressed as a
390 percentage of the total contents (Fig.3). All elements exhibited a resembling trend where their
391 solubility in the ALF lung fluid was significantly high recording values >45% on average. In
392 particular, the average respiratory bioaccessibility presented a decreasing order as follows: Cu
393 (76.8±21.9 %) > Pb (68.5±23.8 %) > Cd (63.5±16.6%) > Zn (60.4±29.6%) > Cr (56.9±24.6%)
394 > Co (46.8±15.9%) > Ni (45.9±14.5%). Moreover, the ratio of bioaccessible to total contents
395 ranged from 44.4 to 79.8% for Cd; 28.9 to 77.3% for Cr; 27.9 to 62.4 for Co; 47.5 to 96.1% for
396 Cu; 28.6 to 61.3% for Ni; 42.2 to 91.5% for Pb and; 28.1 to 90.8% for Zn exhibiting a
397 substantial variability among FA samples suggesting that the solubility in the applied lung fluid
398 (ALF) was influenced by the heterogenic composition of the fly ash particles and also on the
399 chemical status of the elements.

400 Finally, in contrast to oral bioaccessibility, a significant ($p < 0.01$) correlation among total and
401 ALF-extractable concentrations (data not shown) was noticed for all TrElems (except Cr and
402 Ni) indicating the strong control of the total contents on the extractable contents in the lung. On
403 the other hand, no correlation was observed among total contents and respiratory bioaccessible
404 fractions.

405 3.3.3. Effect of fly ash type on bioaccessibility

406 As aforementioned, the bioaccessibility fluctuated greatly among the studied FAs. In order to
407 elucidate possible relations between bioaccessibility and fly ash type, principal component

408 analysis (PCA) was performed and the results are given in Figure 4 and Table S4
409 (Supplementary Material). The datasheet used to PCA included the oral (G phase) and
410 respiratory BAF% values of all TrElements under study in all sampled FAs along with the major
411 oxides i.e. SiO_2 , Al_2O_3 , CaO , Fe_2O_3 , which proportions and sums could classify FAs into
412 different chemical types.

413 **Figure 4**

414 The PCA results revealed two principal components (PCs) explaining almost 95% of the total
415 variance (Fig.4 and Table S4, Supplementary Material). The results revealed that the oral
416 bioaccessibility cluster composed of Cr, Co, Cu, Ni, Pb, Zn and to a lesser extent Cd UBM-
417 extractable fractions (BAF%, G phase) were associated with total Ca contents. In that case, as
418 illustrated in Figure 5, the gastric extractable fractions of all TrElements in the high-Ca FAs i.e.
419 samples presenting CaO contents above 30% (samples AD, KD and AM), were notably higher
420 (with those of Cu, Ni, Pb and Zn being statistically significant, $p < 0.01$) compared to the
421 corresponding ones in FAs with low CaO contents (below 15%, samples MG1 and MG2). Thus,
422 the studied TrElements were presented relatively more bioaccessible in the high-Ca FAs, while
423 the low-Ca FAs presented notably lower BAF values (detailed data in Table S3, Supplementary
424 material). Specifically, Cr was highly to moderately bioaccessible (30.2-80.3) in the high-Ca
425 FAs (samples AD, KD, AM), while it was almost not available to humans (13.7-15.5%) in the
426 FAs with low Ca contents from Megalopolis (samples MG1 and MG2). Likewise, Ni was
427 moderately bioaccessible (32.5-37.5 %) in the high-Ca FAs, while it was almost not available
428 (12.5%) in the Megalopolis FAs. Exception was the case of Cd, where besides the notable
429 differences among the different studied FAs types, it was presented highly bioaccessible (48-
430 100%) in all FAs. Lokeshappa et al. (2014) also reported significant differences in oral
431 bioaccessibility among fly ash types. In particular, Pb was reported as highly bioaccessible in
432 the Ca-rich FAs, while in the case of Si-rich FAs it was almost unavailable (5-6% in
433 bioaccessible form) in the humans. On the contrary, for the Ca-rich ashes, the bioaccessible
434 fractions of Cr were much lower (10-20 %) than the Si-rich ashes (43-59 %), but the different
435 analytical protocol should be noted.

436 On the other hand, respiratory bioaccessibility cluster i.e. all TrElements ALF-extractable fractions
437 (%), was associated with total Si contents and to a lesser extent with Fe and Al. Thus, high-Si
438 FAs ($\text{SiO}_2 > 30\%$, samples AM, MG1 and MG2) presented significantly ($p < 0.01$, ANOVA)
439 higher ALF-extractable fractions in all studied TrElements compared to low-Si FAs (samples AD
440 and KD) (Fig.5). Therefore, the average ALF-extractable fractions of the studied TrElements
441 exhibited a decreasing order of Cu (92.2%) > Pb (85.2%) > Zn (80.4%) > Cd (75.4%) > Cr
442 (74.8) > Co (58.1%) > Ni (55.8%) in the high-Si FAs and modulated as Cu (53.7%) > Cd
443 (45.7%) > Pb (43.5%) > Ni (31.1%) > Zn (30.3%) > Cr (30.1%) > Co (29.7%) in the low-Si
444 FAs. In that case, for example Cu, is presented highly bioaccessible (85.4-96.1%) in the high-

445 Si FAs, while is moderately bioaccessible (47.5-59.9%) in the low-Si FAs. On the contrary, Cr
446 is highly bioaccessible (72.3-77.3%) in the high-Si FAs compared to the substantially lower
447 BAF values (28.9-31.2%) in the low-Si FAs.

448 The PCA results were further supported with Pearson's correlation coefficients as shown in
449 Table 2. The total Ca contents were significantly correlated with the UBM-extractable fractions
450 of Co ($r=0.901$, $p<0.05$), Cu ($r=0.933$, $p<0.05$), Ni ($r=0.901$, $p<0.05$), Pb ($r=0.988$, $p<0.01$) and
451 Zn ($r=0.887$, $p<0.05$). On the contrary, significant correlations were revealed between ALF-
452 extractable fractions of Cd ($r=0.896$, $p<0.05$), Cr ($r=0.942$, $p<0.05$), Co ($r=0.905$, $p<0.05$), and
453 Cu ($r=0.889$, $p<0.05$) and total Si contents. In addition, significant negative correlations were
454 observed between the UBM-extractable fractions of the studied TrElems and the total Al and
455 Fe contents.

456 **Table 2**

457 The obtained results indicated that the mineralogy of FAs along with differences in simulated
458 biological fluids formulation and pH values could control the bioaccessibility of the studied
459 TrElems. Specifically, the acidic solutions used in the gastric phase of the UBM protocol would
460 partially to completely dissolve the soluble and reactive carbonates resulting in higher
461 bioaccessibilities of the studied TrElems in the high-Ca FAs. On the contrary, the more
462 resistant, acid stable and relatively insoluble aluminosilicates presented in the low-Ca FAs
463 resulted in a large proportion of the studied TrElems being in a non bioaccessible form. Besides,
464 as observed by several authors ([Desboeuvs et al. 2005](#); [Schaidler et al. 2007](#); [Kastury et al. 2017](#);
465 [Keshavarzifard et al. 2019](#)), an aluminosilicate matrix could lead to low metal dissolution,
466 compared to a carbonaceous matrix which result in high dissolution. On the other hand, the
467 complexity of ALF solution (among other simulate lung fluids) have probably resulted in higher
468 bioaccessibilities. Moreover, in acidic conditions, the presence of chlorides in its formula could
469 lead in the formation of metal-chloride complexes which are readily solubilized ([Colombo et](#)
470 [al. 2008](#)). Furthermore, the complex formula of ALF containing components that may act as
471 complexing agents could promote the metal release/dissolution. Specifically, the formation of
472 weak organic complexes (in the presence of ligands i.e. citrate) with silanol groups at the
473 surface could be the most plausible explanation for enhanced respiratory bioaccessibilities in
474 high-Si FAs ([Herting et al. 2014](#)). On the contrary, the elevated contents of carbonates in the
475 low-Si FAs could favor the formation of insoluble complexes.

476

477 3.4. Health risk assessment of TrElems in fly ashes

478 The non-carcinogenic and carcinogenic risk of multiple TrElems of environmental concern in
479 the studied FAs was evaluated for onsite workers and the obtained HQs and CRs values via
480 ingestion and inhalation are presented in Table 3. With reference to ingestion exposure
481 pathway, Cr and Co presented the highest HQ_{ing} values among the studied TrElems, ranging

482 from 8.3×10^{-3} to 4.0×10^{-2} (mean 2.0×10^{-2}) and from 1.7×10^{-2} to 2.9×10^{-2} (mean
 483 2.1×10^{-2}), respectively. On the contrary, Zn exhibited the lowest HQ_{ing} values varying
 484 between 9.7×10^{-5} and 1.9×10^{-4} (mean 1.3×10^{-4}). The contribution of elements to the
 485 cumulative health risk decreased in the following order $Cr > Co > Ni > Pb > Cd > Cu > Zn$ for
 486 sample AD, $Cr > Co > Ni > Pb > Cd > Cu > Zn$ for sample KD, $Co > Cr > Pb > Ni > Cu > Cd$
 487 $> Zn$ for sample AM, $Co > Cr > Pb > Ni > Cd > Cu > Zn$ for sample MG1 and $Co > Cr > Pb >$
 488 $Ni > Cu > Cu > Cd > Zn$ for sample MG2. The cumulative health risk via ingestion indicated
 489 no significant differences among the studied FAs (range of 2.98×10^{-2} (MG2)- 6.73×10^{-2}
 490 (AD)), however slight lower values were observed for Megalopolis FAs.

491 **Table 3**

492 Regarding inhalation route, the obtained HQ_{inh} values of all evaluated TrElems were
 493 significantly lower ($p < 0.01$, one-way ANOVA) than the corresponding ones via ingestion
 494 (HQ_{ing}). Among the evaluated TrElems, Co, Cr, and Ni exhibited notably higher HQ_{inh} values
 495 exhibiting ranges of 2.8×10^{-4} - 4.9×10^{-4} (mean 3.5×10^{-4}), 1.4×10^{-4} - 2.7×10^{-4} (mean
 496 2.1×10^{-4}), and 1.5×10^{-4} - 3.1×10^{-4} (mean 2.6×10^{-4}), respectively. The observed
 497 contribution of the evaluated TrElems to the cumulative health risk presented a descending
 498 order of $Co > Ni > Cr > Pb > Cd > Cu > Zn$ for all FA samples except sample AM for which
 499 the order is modulated as follows: $Co > Ni > Cr > Pb > Cu > Cd > Zn$. The cumulative health
 500 risk via inhalation was significantly lower than the corresponding one via ingestion presenting
 501 a range of 7.71×10^{-4} (MG1)- 9.15×10^{-4} (AD) among the studied FA samples. In any case, in
 502 both exposure pathways the obtained HQs of all TEs were significantly lower than safe level
 503 ($HQ < 1$) indicating a negative non-carcinogenic health effect by the studied TrElems via both
 504 ingestion and inhalation.

505 On the other hand, the carcinogenic risk for Cr via ingestion and Cd, Co, Cr and Ni via
 506 inhalation was estimated (Tab.3) and all obtained CRs were greater than the threshold value
 507 (10^{-6}). However, CR values for Cd, with a range of 2.26×10^{-6} - 1.60×10^{-5} , were of an
 508 acceptable or tolerable risk (10^{-6} - 10^{-4}), while CRs for Ni were slight above the tolerable value
 509 (range 1.37×10^{-4} - 2.85×10^{-4}). On the contrary, Cr was the dominant contributor to
 510 cumulative carcinogenic risk with CR values ranging between 4.17×10^{-3} and 1.98×10^{-2} via
 511 ingestion and between 4.13×10^{-2} and 8.06×10^{-2} via inhalation, well above threshold or even
 512 tolerable risk values suggesting a carcinogenic risk for onsite workers.

513

514 **4. CONCLUSIONS**

515 Fly ash is the main by-product of coal-combustion with large volumes being stockpiled,
 516 disposed of or lagooned. The enhanced contents of potentially hazardous trace elements in fly

517 ash still attract the global scientific concern and arise significant environmental and human
518 health problems. The aim of the present study was to evaluate human exposure to TrElems in
519 fly ash through ingestion (i.e., oral bioaccessibility) and inhalation (i.e., respiratory
520 bioaccessibility) pathway. Different fly ash chemical types were collected from power plants
521 operating in the main lignite basins of Greece, while the ingestible ($<250\mu\text{m}$) and inhalable
522 ($<10\mu\text{m}$) particle size fractions were utilized for further analysis. The Unified Bioaccessibility
523 Method (UBM) was utilized to assess the oral bioaccessibility, while the respiratory
524 bioaccessible fractions were extracted using the Artificial Lysosomal Fluid (ALF). The average
525 TrElems contents exhibited a decreasing order of $\text{Ba} > \text{Ni} > \text{V} > \text{Cr} > \text{Zn} > \text{Cu} > \text{Mo} > \text{Pb} > \text{Co}$
526 $> \text{Sn} > \text{Be} > \text{Sb} > \text{Cd}$ in the $<250\mu\text{m}$ size fraction and $\text{Zn} > \text{Ba} > \text{Ni} > \text{V} > \text{Cr} > \text{Cu} > \text{Pb} > \text{Co}$
527 $> \text{Cd} > \text{Be}$ in the finer fraction ($<10\mu\text{m}$). A relative enrichment of Cd was observed in the
528 inhalable size fraction ($<10\mu\text{m}$) compared to the ingestible one, while Ba, Co, Cr, Cu, Mn, Ni
529 and V were relatively depleted. No significant correlations were detected among total and
530 UBM-extractable contents with the later exhibiting a decreasing order of $\text{Cr} > \text{Ni} > \text{Zn} > \text{Cu} >$
531 $\text{Pb} > \text{Co} > \text{Cd}$ in the G-phase and $\text{Ni} > \text{Zn} > \text{Cu} > \text{Cr} > \text{Co} > \text{Cd} > \text{Pb}$ in the GI-phase. On the
532 contrary, a strong control of total TrElems contents on the ALF-extractable concentrations was
533 revealed with the respiratory bioaccessible concentrations being notably higher than the oral
534 bioaccessible concentrations. Regarding the bioaccessible fractions, oral bioaccessibility of the
535 studied TrElems ranged from 12.5 to 100%, while respiratory bioaccessibility presented high
536 values exceeding 45% on average. In detail, average values of oral bioaccessibility decreased
537 as: $\text{Cd} > \text{Zn} > \text{Cu} > \text{Cr} > \text{Pb} > \text{Co} > \text{Ni}$ in the G-phase and as: $\text{Cd} > \text{Ni} > \text{Co} > \text{Cu} > \text{Zn} > \text{Cr} >$
538 Pb in the GI-phase, while it was formulated as $\text{Cu} > \text{Pb} > \text{Cd} > \text{Zn} > \text{Cr} > \text{Co} > \text{Ni}$ for respiratory
539 bioaccessibility. A significant effect of fly ash type on human bioaccessibility was revealed.
540 Specifically, UBM-extractable fractions exhibited a significant correlation with total Ca
541 contents, while ALF extractable fractions were highly associated with total Si contents. Thus,
542 high-Ca FAs exhibited significantly higher bioaccessibility of the studied TrElems via
543 ingestion, while a relatively higher bioaccessibility via inhalation was observed for high-Si
544 FAs. Regarding non-carcinogenic health risk via ingestion and inhalation, Cr and Co exhibited
545 the highest HQ_{ing} and HQ_{inh} values, however there were significantly lower than safe level (HQ
546 < 1). On the contrary, Cr was the primary contributor to carcinogenic risk with CR values being
547 up to 800 times above the threshold risk levels (1×10^{-4}). Despite the fact that in our study the
548 associated cancer risk was evaluated based on the bioaccessible concentrations (in contrast to
549 traditional approaches) reducing the probabilities of underestimating the health risk,
550 epidemiological and toxicological studies remain necessary in order to draw clear and accurate
551 conclusions.

552

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559

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- 763 Figure Captions
- 764 Figure 1. XRD patterns of the studied fly ash (bulk fraction). The most intense
765 reflections of respective minerals are labeled. A: Anhydrite, L: Lime, C: Calcite, Q:

766 Quartz, G: Gehlenite, Mg: Maghemite, Ht: hematite, Kf: K-Feldspars, Pl: Plagioclase,
767 Cl: Clays

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769 Figure 2. SEM secondary electron images of ingestible (up) and inhalable (down) of
770 the Greek fly ash samples.

771

772 Figure 3. Oral (gastric-G and gastrointestinal-GI phases) and respiratory
773 bioaccessibility (BAF %) of selected trace elements (TrElems) in the Greek fly ashes.

774

775 Figure 4. Loading plot of PCA analysis carried out for oral (G phase) and respiratory
776 (L) BAF% values of all TrElems along with major oxides of the Greek fly ashes.

777

778 Figure 5. Effect of CaO and SiO₂ content in Greek FAs on the obtained oral and
779 respiratory bioaccessibility of the studied TrElems.

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782 **Highlights**

- 783 1. A relative enrichment of Cd on finer fraction was observed.
- 784 2. Oral bioaccessibility ranged from 12.5 to 100%.
- 785 3. Respiratory bioaccessibility was >45% on average.
- 786 4. An effect of fly ash chemical type on human bioaccessibility was revealed.
- 787 5. Cr was the dominant contributor to cumulative carcinogenic risk.

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