

CHILD SAFETY BLOG

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Panel Says There Is No "Safe" Amount of Lead in Children's Bodies

January 9, 2012 by *Patrick A. Malone*

Even though the number of lead poisoning cases is declining, the toxic metal remains a problem, particularly for children, as we have written about numerous times, most recently [last week](#).

A federal panel, the Advisory Committee on Childhood Lead Poisoning Prevention, recently expressed its concern about blood levels in children by advocating for a [lower acceptable threshold](#).

If adopted, it would be the first time in 20 years the Centers for Disease Control and Prevention (CDC) lowers the standard. The CDC has never failed to accept a panel advisory.

Lower blood level standards, as reported on the [Huffington Post](#), would result in hundreds of thousands more children diagnosed with lead poisoning. The new blood level for children would be 5 micrograms of lead per deciliter versus the previous value of 10 micrograms.

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Lead used to be a common component of paint and gasoline, but the metal has long been banned in the manufacture of both.

Children's developing organs are particularly vulnerable to lead, especially the brain and kidneys. Depending on the blood level, lead can cause reduced intelligence, behavioral problems, impaired hearing, coma, convulsions and death.

Children often are exposed if they live in old, deteriorating homes or those undergoing renovation. The delivery systems include paint chips, lead-filled dust and soil contaminated by leaded gasoline.

As the panel's report made clear, all children are at risk: "New findings suggest that the adverse health effects of BLLs [blood lead levels] less than 10 µg/dL in children extend beyond cognitive function to include cardiovascular, immunological, and endocrine effects. Additionally, such effects do not appear to be confined to lower socioeconomic status populations.

"Primary prevention is a strategy that emphasizes the prevention of lead exposure, rather than a response to exposure after it has taken place. Primary prevention is necessary because the effects of lead appear to be irreversible."

Lowering the acceptable lead level in blood is a welcome adjustment for childrens' advocates, who say that medical evidence has been mounting that even lower levels of lead poisoning can erode a child's ability to learn and cause behavior problems.

"This is long overdue," Ruth Ann Norton told the Huffington Post. She's executive director of the Coalition to End Childhood Lead Poisoning in Baltimore.

The challenge in implementing the panel's recommendations lies in the languishing economy. Many city and county health departments are responsible for providing services for lead-poisoned kids, and according to the Huffington Post, those departments have lost more than 34,000 jobs in the last three years because of budget cuts. And Congress has slashed the CDC's lead program from more than \$30 million to \$2 million.

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Parents should be aware of the advisory panel's recommendations for monitoring lead blood levels in children. If your ob/gyn and pediatrician don't broach the subject, you should. The panel advises:

- Primary prevention must start with counseling, including prenatal if possible. This includes recommending environmental assessments for children before screening BLLs in children at risk for lead exposure.
- After confirmatory testing, children above the reference value of 5 µg/dL must continue to be monitored for BLLs and assessed for iron deficiency and general nutrition (for example, calcium and vitamin C levels) consistent with American Academy of Pediatrics (AAP) guidelines.

Iron-deficient children should be provided with iron supplements. All BLL test results should be communicated to families in a timely and appropriate manner.

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