

FOR IMMEDIATE RELEASE 5/9/2016TO: Grant County Healthcare Providers and
School Nurses**FOR INFORMATION CONTACT**Todd Phillips, R.S.
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Washington DOH Developed New Targeted Childhood Lead Screening Recommendations for Clinicians.

DOH updated their lead web page for Healthcare Providers

GRANT COUNTY, WA – Grant County Health Officer, Dr. Alexander Brzezny, has issued the following alert to the Grant County healthcare community: *Washington State Department of Health (DOH) convened an expert panel last year (2015) to develop targeted childhood lead screening recommendations for clinicians in Washington State.* The prevalence and severity of elevated blood lead levels in children have been reduced since the removal of lead from paint and gasoline in the 1970s. However, legacy lead paint and plumbing remains in some homes and communities which continue to serve as sources of lead exposure.

Additionally, there have been several news reports with concerns about lead in water supplies because of lead fixtures within the infrastructure of the water distribution system. Lead testing indicated elevated levels of lead in specific parts of the system. Even with Washington's robust surveillance and testing system in water there is still potential for lead to be leached into drinking water.

Because there are recent cases of elevated lead levels in the drinking water found in schools in Washington, DOH partnered with the Office of the Superintendent of Public Instruction (OSPI) to communicate with school districts and address water testing in schools. (See attached letter.) Water does not seem to be an efficient route of exposure, but it is still an unnecessary exposure and there is no known safe level of exposure. Leaching can occur within the plumbing of a building regardless of the age of the building if the incoming water is corrosive enough. DOH has information about lead in schools available on their www.doh.wa.gov/CommunityandEnvironment/DrinkingWater/Contaminants/LeadinSchools. In Grant County the Eastern Regional office of DOH is available for schools who would like to consult about water testing.

Currently, housing age, as an indication of potential residential lead hazards, is the most established risk factor for lead poisoning. Even relatively low levels of blood lead (<10 µg/dl) have been shown to have subtle effects on the developing central nervous system.

Targeted Screening

Healthcare providers should assess all children for risk of lead poisoning at 12 and 24 months of age. DOH recommends performing a blood lead test based on the guidance located on their website ([DOH Guidelines](#))

for all children. If the parent or caregiver does not know if the child has one of the following risk factors, a blood lead test should be performed.

Who to Test for Lead Poisoning

Healthcare providers should assess all children for risk of lead poisoning at 12 and 24 months of age. DOH recommends performing a blood lead test on children with the following risk factors:

- Lives in or regularly visits any house built before 1950.
- Lives in or regularly visits any house built before 1978 with recent or ongoing renovations or remodeling.
- From a low income family; income <130% of the poverty level (federal law mandates screening for all children covered by Medicaid).
- Known to have a sibling or frequent playmate with an elevated blood lead level.
- Is a recent immigrant, refugee, foreign adoptee, or child in foster care.
- Has a parent or caregiver who works professionally or recreationally with lead (examples: remodeling and demolition; painting; works in or visits gun ranges; mining; battery recycling; makes lead fishing weights or shotgun pellets; hobbies involving stained glass, pottery, soldering, or welding).
- Uses traditional, folk, or ethnic remedies or cosmetics (examples: Greta, Azarcon, Ghasard, Ba-baw-san, Sindoor and Kohl).

Healthcare providers should consider testing additional children per clinical judgment, including but not limited to:

- Children whose parents have concerns or request testing (including older children that have risk of exposure).
- Children living within a kilometer of an airport or lead emitting industry, or on former orchard land.
- Children with pica behavior.
- Children with neurodevelopmental disabilities or conditions such as autism, ADHD, and learning delays.

Educating Parents for Prevention

Healthcare providers should educate parents who have children that are 6 months to 6 years old on the risk factors associated with lead exposure during routine check-ups. Prevention requires reducing environmental exposures from paint, dust, soil, and water. Efforts to increase awareness of lead hazards and nutritional interventions to increase iron and calcium, which can reduce lead absorption, are other successful prevention strategy.

Other Common Sources of Lead

Other consumer products found to have lead risk are informally imported foods and spices. Some candies imported from Mexico have been found to contain lead. Certain ingredients used in the candies, such as chili powder and tamarindo, are found to be the most common source of exposure. Lead has also been found in the ink of some imported candy wrappers as well as in non-regulated imported spices such as turmeric.

Lead Exposure Risk Mapping Tool

Healthcare providers are encouraged to use the Department of Health Lead Exposure Risk Index www.fortress.wa.gov/doh/wtn/WTNIBL/ to better understand which areas in their community are at higher risk for lead exposure based on age of housing.

Additional Resources

www.doh.wa.gov/ForPublicHealthandHealthcareProviders/HealthcareProfessionsandFacilities/ProfessionalResources/BloodLeadTestingandReporting

www.doh.wa.gov/Portals/1/Documents/Pubs/334-383.pdf

Consultation

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