

## Health Professionals Urge Maryland's Legislature to Strengthen Responses to Lead Exposures in Children

We, the undersigned public health professionals, healthcare providers, and researchers, ask for your support to amend Maryland legislation to lower Maryland's definition of "elevated blood lead level" (EBLL) to make it consistent with the policies and recommendations of the Centers for Disease Control and Prevention (CDC)<sup>1</sup> and the American Academy of Pediatrics (AAP).<sup>2</sup> This change would lower the level at which the state must conduct an environmental investigation into the causes of a child's lead poisoning from 10 mcg/dL to 5mcg/dL.

Because no lead level has been shown to be safe in children, CDC has changed its approach from having a lead "level of concern" to using a reference level of 5 mcg/dL to identify children with blood lead levels that are much higher than most children's levels and who require case management. The AAP also urges state governments to provide resources for environmental case evaluations and case management of children who have blood lead concentrations of greater than or equal to 5 mcg/dL.

However current Maryland legislation mandates that the state only take action when a child's blood lead level is 10mcg/dL.<sup>3</sup> This despite the fact that the science is now settled that blood lead levels between 5-10mcg/dl can result in decreased academic achievement, lower IQ scores, attention problems and antisocial behaviors. Even at lead level levels less than 5mcg/dL, children can suffer from decreased cognitive function. <sup>4</sup>

Based on the consensus in the medical community that more aggressive policies are needed to protect children from lead poisoning, we urge Maryland legislators to amend Maryland law to require action by the state when children have lead levels of 5 mcg/dL rather than the currently stipulated 10 mcg/dL. Despite the substantial reduction in lead levels in children over the past several decades, many Maryland children still suffer from lead poisoning. In 2016, Maryland implemented universal testing for lead levels in children at ages 12 and 24 months. A total of 118,619 children aged 0-72 months were tested, and 1,729 had blood lead levels between 5 µg/dL and 9 µg/dL. Almost half of these children were from Baltimore City. <sup>5</sup> In

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<sup>1</sup> <https://www.cdc.gov/nceh/lead/>

<sup>2</sup> AAP Council Environ Health Prevention, Pediatrics, 2016, volume 138, issue 1.

<sup>3</sup> Md. environment Code Ann. § 6-801 through §-852.

<sup>4</sup> Agency for Toxic Substances and Disease Registry, The Toxicological Profile for Lead, August 2007.

<sup>5</sup> MDE, Childhood Blood Lead Surveillance in Maryland, Annual Report, 2016, p. 7. [http://mde.maryland.gov/programs/Land/LeadPoisoningPrevention/Documents/Reports/AnnualReportFINAL10\\_17.pdf](http://mde.maryland.gov/programs/Land/LeadPoisoningPrevention/Documents/Reports/AnnualReportFINAL10_17.pdf)

certain Baltimore City neighborhoods, over 1 in 6 children have blood lead levels above 5 µg/dL.<sup>6</sup>

We appreciate your leadership on this necessary change to Maryland law to protect children from further lead poisoning. Lower lead levels in our children mean healthier children and adults, neighborhoods and communities. Each IQ point raises workers' productivity. The economic losses in the United States attributable to lead exposure amount to \$43.4 billion a year in each annual birth cohort. The World Health Organization estimates that every U.S. dollar spent to reduce exposure results in savings of \$17--\$220.<sup>7</sup>

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<sup>6</sup> See graphics and data here, <http://www.chesapeakepsr.org/maryland-testing-of-blood-lead-levels>

<sup>7</sup> WHO, Childhood and Lead Poisoning, 2010.