Childhood Lead Poisoning

Over the past six months there have been numerous safety recalls due to excessive lead in toys, candy, and lunch boxes. While the most common cause of childhood lead poisoning remains deteriorating lead-based paint chips and dust, the renewed interest in this issue emphasizes the importance of assessment for risk of lead poisoning during pediatric exams.

These are the requirements for health care providers doing assessments on children between the ages of 6 months and 6 years:

- · Provide oral or written guidance on lead poisoning at each assessment at 6 months to 6 years.
- · Screen (order blood-lead tests for) children in publicly supported programs at both 12 months and 24 months. Publicly supported plans include Medi-Cal, CHDP, WIC, and Healthy Families.
- Assess whether children in publicly supported programs are at risk of lead poisoning by asking, "Does your child live in, or spend a lot of time in, a place built before 1978 that has chipped or peeling paint or that has been recently renovated?"
- Order a blood-lead test if the answer is "yes" or "I don't know".

Any child may receive a blood-lead test at the discretion of the practitioner or at parental request. The standard also recommends a blood test if it appears a change in circumstances has put a child at risk, such as exposure to a lead-tainted toy.

No blood lead level is recognized as safe. In children, low levels of lead exposure have been associated with developmental delays as well as decrements in intelligence, short term memory, perception integration, visual motor functioning and behavior. Prompt identification of children at risk is essential.

Public Health offers nursing support and an environmental investigation to families of a lead-poisoned child. For further information, contact the Childhood Lead Poisoning Prevention Program at 707/268-2132.

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