

Colorado Department of Public Health and Environment

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Childhood Lead Poisoning in Colorado

A review of January 1996-December 2002 Lead Poisoning Prevention Program, 4300 Cherry Creek Dr. S., Denver CO 80246-1530 303-692-2700 Published June 2003

Blood Lead Screening Rates Increase

Since the year 2000, overall blood lead screening rates in Colorado have increased. The Lead Poisoning Prevention Program wishes to thank health care providers who understand the importance of testing Medicaid eligible children and other high risk children at ages 12 months AND 24 months, or between 3 and 6 years old, if they haven't been tested. You are important in the elimination of childhood lead poisoning, a preventable environmental condition affecting young children nationwide.

Overall, the prevalence rate in Colorado for children tested between 6 months to 6 years of age with lead levels at or above 10 ug/dL is 2.5% for 1996-2002.

Recent studies have shown that lower levels of lead poisoning can cause learning and developmental delays. In Colorado, 9.2% of children tested have lead levels between 6-9.9 ug/dL.



Special points of interest:

- Blood lead screening rates in Colorado have increased 42 % since 2001.
- Statewide cumulative (1996-2002) prevalence rate for children 6 months to 6 years old with lead levels ≥ 10 ug/dL is 2.5%.
- In October 2002, the Lead Poisoning Prevention Program's outreach activities during Lead Poisoning Prevention Week reached more than 30,000 children statewide.
- © Visit the Lead Program's Web Page for information and links at http://www.cdphe.state.co.us/dc////Lead/ leadhom.asp

Low Blood Lead Levels Impair Intelligence



Scientists from three institutions have found lead may be

harmful at

very low blood concentrations.

The study by researchers from Cornell University, Cincinnati Children's Hospital Medical Center, and the University of Rochester School of Medicine appeared in the New England

Scientists Journal of Medicine, April from three 17, 2003.

Richard Canfield of the Division of Nutritional Sciences at Cornell

University stated that in the sample of children studied, most damage to intellectual functioning occurs at blood lead concentrations below 10 ug/dL.

The current threshold defining an elevated blood lead level is 10ug/dL. Under this definition, it is believed more than one in 50 children in the US between one and five years old is adversely affected by lead.

This new study may imply that there is no threshold for adverse health effects to lead exposure, and , unfortunately, many more children are affected than previously thought.

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Lead Rescreening Guidelines suggested by CDC

Recommended Schedule for Obtaining a Confirmatory Venous Sample

Screening Test result (ug/dL)	Perform a confirmation test within:
10-19	3 months
20-44	1 week– 1 month
45-59	48 hours
60-69	24 hours
>70	Immediately

Schedule for Follow-up Blood Lead Testing

Venous blood lead level (ug/dL)	Early follow-up (first 2-4 tests after identi- fication)	Late follow-up (after BLL begins to de- cline)
10-14	3 months	6-9 months
15-19	1-3 months	3-6 months
20-24	1-3 months	1-3 months
25-44	2 weeks-1 month	1 months
>45	ASAP	Chelation with subsequent follow-up



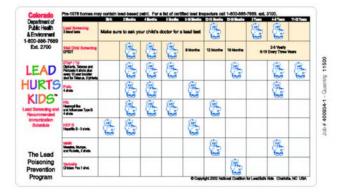
Magnets with Lead Screening Schedule Available

As you may know, Colorado's Blood Lead Screening Plan includes testing Medicaid-eligible children for lead poisoning at 12 AND 24 months of age or between 3 and 6 years of age, if not done previously. It also includes testing children in Child Health Plan Plus, Colorado Resident Discount Program, or those living in zip codes 80216, 80203, 80204, or 80205.

The State's Lead Based Paint Program has magnets available to remind parents and providers to test children at 12 and 24 months of age. These magnets also include the current immunization schedule. The magnets have

been distributed to nurses throughout the state via the nurse family partnership program and local health departments.

Call 303-692-3261 for more information about these magnets.



Testing Data By County 1996-2002

This data is analyzed by county of the physician who ordered the lead test. The Surveillance Program receives patient addresses only on those whose levels are elevated (> 10 μ g/dL). Labs are required to report on levels $\geq 10\mu$ g/dL. *Note counties with fewer than 10 tests are not listed, but their numbers are counted in the totals section. Yearly totals may vary from previous reports due to late reporting and elimination of multiple reports.

Number (and %) of Children Tested 6-72 Months Old 1996-2002				
Physician County	<10 µg/dL	10-14.9µg/dL (%)	≥ 15 µg/dL (%)	1996-2002 Total
Adams	591	14 (2.3)	6(1.0)	611
Alamosa	335	3 (0.9)	1 (0.3)	339
Arapahoe	2,689	41 (1.5)	21 (0.8)	2,751
Boulder	686	20 (2.8)	6 (0.8)	712
Broomfield	112	0	0	112
Chaffee	55	0	0	55
Cheyenne	18	1 (7.7)	0	19
Conejos	13	0	0	13
Delta	63	2 (3.1)	0	65
Denver	22,586	400 (1.7)	218 (0.9)	23,204
Douglas	84	1 (1.2)	1 (1.2)	85
Eagle	32	0	0	32
El Paso	2,531	14 (0.5)	16 (0.6)	2,561
Fremont	452	6 (1.3)	2 (0.4)	460
Garfield	658	7 (1.0)	3 (0.4)	668
Jefferson	1257	18 (1.4)	6 (0.5)	1,281
Kit Carson	27	2 (6.9)	0	29
Lake	1,060	47 (4.1)	37 (3.2)	1,144
La Plata	242	3 (1.2)	2 (0.8)	247
Larimer	2,172	16 (0.7)	9 (0.4)	2,197
Las Animas	180	2 (1.1)	2 (1.1)	184
Lincoln	32	1 (2.9)	1 (2.9)	34
Logan	124	2 (1.6)	1 (0.8)	127
Mesa	820	15 (1.8)	3 (0.4)	838
Moffat	30	2 (6.2)	0	32
Montezuma	290	3 (1.0)	1 (0.3)	294
Montrose	242	0	1 (0.4)	243
Morgan	280	5 (1.7)	3 (1.0)	288
Otero	225	0	0	225
Pitkin	15	0	0	15
Pueblo	1,174	25 (2.0)	18 (1.5)	1,217
Rio Blanco	15	0	0	15
Rio Grande	71	1 (1.4)	1 (1.4)	73
Routt	35	0	0	35
Saguache	142	1 (0.7)	0	143
Summit	49	0	1 (2.0)	50
Weld	2,926	57 (1.9)	26 (0.9)	3,009
Totals	42,392	715 (1.6)	387 (0.9)	43,494

Analysis Methods for County Data

If more than one lead test is reported for a single child, only one blood test is counted using the following criteria:

1) the highest venous test in a timeframe; or

2) if no venous tests are available, the 2nd of two capillary tests within 12 weeks; or

3) if none of the tests in the specified date range follow within 12 weeks of a prior test, then the first capillary within the timeframe, if only capillary tests were performed.

For the period 1996-2002, a total of 43,494 children had lead tests in the state. 1,102 of these children (2.5%) had lead levels $\geq 10\mu g/dL$. 3,985 of these children (9.2%) had lower lead levels, 6-9.9ug/dL.

The statewide estimate of Medicaid one and two year olds eligible for lead testing each year is 37,000. In 2002 8,611 children 1-2 years old (12-35 months) had lead tests.

Number of Children (6-72 months old) Screened by Provider **County in the Most Populous Counties**

County	Est. 2001 Pop. 1-6 years based on 2000 estimates	No. children screened 2002	No. children screened 2001	No. children screened 2000	No. children screened 1999	*No. housing units with high risk of lead hazards
Adams	37,141	82	113	44	40	640
Arapahoe	41,783	970	487	197	148	420
Boulder	21,643	218	77	97	45	1,200
Denver	45,596	5,848	4,363	3,935	2091	12,000
El Paso	47,853	761	523	341	131	1,700
Jefferson	40,265	530	255	162	92	720
Larimer	19,080	819	614	93	123	1,200
Mesa	9,079	378	235	55	11	990
Pueblo	11,762	232	216	191	159	3,000
Weld	18,032	508	410	415	280	1,800

*Number of housing units built before 1950 occupied by a low income family in an area. Source: www.scorecard.org.

Did you know?

Finger sticks are an acceptable method of blood collection for blood lead screening.

Lead Poisoning Prevalence by Year For Children 6-72 Months Old				
Year	State preva- lence (%) of elevated blood lead lev- els (*Prevalence denominator includes only children tested)	No. tested (% change from previous year)		
1996	3.9	5,579		
1997	3.1	4,583 (-18%)		
1998	3.0	3,720 (-19%)		
1999	2.5	3,469 (-7%)		
2000	1.9	6,094 (+75%)		
2001	2.0	8,252 (+35%)		
2002	2.2	11,797(+42%)		

Toys Recently Identified by the Lead Poisoning Prevention Program Found to Contain Low Lead Levels



These toys were found to contain low levels of lead identified by X-ray Florescence and laboratory analysis using atomic absorption. While the risk of a young child getting lead poisoning from playing with one of these toys is presumed to be small, the Lead Poisoning Prevention Program was concerned that toys contain any lead. Unfortunately, no standard for lead in toys currently exists, and toys are not recalled unless the surface is painted and has a lead level over 5000 ppm, the standard used for lead in paint.

Important Phone Numbers Lead Poisoning Prevention Program 800-886-7689 Mishelle Macias 303-692-2622 Patricia Ennis 303-692-2789 Drew Hodgson 303-692-2768 Eydie Bell 303-692-2755 Lead Certification and Training 303-692-3164 Rocky Mountain Poison and Drug Center 303-739-1123 or 800-332-3073 State Medicaid Program 303-866-5532 or 303-866-3861 Pediatric Environmental Health Specialty Unit 1-877-800-5554

Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South DCEED LP3A3 Denver CO 80246-1530 303-692-2700 or 800-886-7689

DCEED LP3 3642