New reports on lead poisoning in kids: More false alarm than fire?

By ACSH Staff — April 8, 2013

A report from the CDC last week that lead poisoning affects 1 in 38 children ages 1-5, generated alarming media headlines reporting that more than half a million young children in the US have lead poisoning. But were these headlines that created angst among parents about the health of their children more false alarm than fire?

Digging deeper we learn that these alarmingly high statistics were the result of a precautionary measure taken earlier by the CDC to further reduce lead level exposure in kids. As reported on the CDC website, a committee of experts recommended that the CDC reduce blood lead level of concern by 50 percent from the previous level of 10 micrograms per deciliter to the new CDC blood lead level of 5 micrograms per deciliter of lead in the blood. The new recommendation was enacted based on a growing number of scientific studies that showed that even low blood lead levels can cause lifelong health effects.

The new value means that more children were identified as having high lead exposure. It even led the CDC to proclaim that there were no safe level of exposure. While ACSH acknowledges that lead is a human toxin[1] to kids at high levels, we questioned such a precautionary approach that would lead the CDC to proclaim that there was no safe level when dealing with human exposure.

ACSH executive/medical director Dr. Gilbert Ross adds, Such reports calling for lead level below five micrograms per deciliter virtually suggest a zero tolerance for any level of lead exposure, something that may not be realistically attainable. And using terms like lead poisoning for levels that were previously considered safe causes parents needless fear and anxiety.

Indeed, in an earlier Dispatch[2] item on the lead level reduction, ACSH trustee Dr. Robert Brent, who is a professor of pediatrics, radiology, and pathology at Jefferson Medical College and a researcher at Alfred I. duPont Hospital for Children in Delaware, notes that any good toxicology scientist knows that even the effects of lead have a threshold.

ACSH’s Dr. Elizabeth Whelan points out that the benefits of this advisory are to highlight and focus on those areas where significantly elevated lead levels reflect real dangers to kids, most often due to dilapidated housing with flaking, old paint containing lead. While ACSH does not take lightly the deleterious health effects of high levels of childhood lead exposure, we suggest that perhaps, in this instance, the revised and precautionary measures created more false alarm than fire.