

NYC Scientists Criticize Mark Green's Alarmist Lead-Poisoning Report

By ACSH Staff — February 1, 1998

New York, NY February 1998. In a new report, New York City Public Advocate Mark Green has called lead poisoning a "dire problem" for the city's children. The New York City Advisory Council on Health Priorities, an affiliate of the American Council on Science and Health (ACSH), has concluded, however, that for the majority of New York's children lead poisoning is a thing of the past. Mr. Green's proposal that the city enact legislation requiring landlords to conduct annual inspections of all apartments housing children under six regardless of the existence of lead paint (and therefore lead exposure) in the dwelling is thus a call for an unnecessary and wasteful piece of legislation that is not grounded in either science or common sense.

According to a recently released ACSH report called *Lead and Human Health*, symptomatic childhood lead "poisoning," seen often until the 1970s, has ceased to exist as a widespread public health threat in the United States. Findings from the Centers for Disease Control and Prevention (CDC) confirm that only 0.4 percent of all children aged 1 to 5 in the U.S. may be at greater risk for health complications due to lead exposure. Mr. Green's alarmist contention that 30,000 New York City children are contaminated is absolutely false. Localized problems do exist, especially in certain neighborhoods, but the city does not face a widespread health emergency despite what perennial candidate Green would have us believe.

Mr. Green's report, "Lead and Kids: Why Are 30,000 NYC Children Contaminated?" serves only to confuse New Yorkers about their risk of lead exposure and poisoning. Federal law already requires that every new owner of a residence in New York City built before 1978 be given a booklet on lead poisoning. And even this regulation is more cautious than necessary, because there is no real threat of lead exposure in the overwhelming majority of New York City's apartments.

In addition to the legislation, Mr. Green proposes lowering New York City's "medical action level" for blood lead levels (BLL), which is currently set at 20 micrograms of lead per deciliter of blood ($\hat{\text{A}}\mu\text{g}/\text{dL}$). But that level is already set too low, even if it is somewhat higher than the CDC's guideline of 10 $\hat{\text{A}}\mu\text{g}/\text{dL}$. In making his recommendation to lower the action level, Green has misinterpreted the CDC's guideline. Symptoms of lead poisoning do not occur at BLLs of 10 $\hat{\text{A}}\mu\text{g}/\text{dL}$. Classical lead poisoning is associated with blood lead levels greater than 70 $\hat{\text{A}}\mu\text{g}/\text{dL}$ and in any case, the CDC does not recommend intervention at levels of 10 $\hat{\text{A}}\mu\text{g}/\text{dL}$. If Mr. Green's calculations were correct, 90 percent of young Americans today would be suffering from damaged kidneys and brains and have impaired IQ levels.

According to ACSH President Dr. Elizabeth Whelan, "Contrary to Mr. Green's alarmist study, for the majority of New Yorkers lead poisoning is not a concern. Elevated lead levels continue to exist,

however, in localized areas such as parts of the Bronx. For children in these areas, an intervention approach based on education, lead exposure reduction, and exposure prevention is recommended."

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