

North Carolina
Department of Health and Human Services
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James B. Hunt Jr., Governor

September 21, 1999

H. David Bruton, M.D., Secretary

MEMORANDUM

To: Local Health Directors
Family Physicians
Pediatricians
Community & Migrant Health Centers

From: A. Dennis McBride, M.D., M.P.H.
State Health Director

Re: Enhanced Recommendations for Lead Poisoning Prevention

Last October I issued recommendations for lead poisoning prevention in North Carolina based upon guidelines that had been issued by CDC. Recommendations included a more targeted approach to screening, but also required blood lead screening at ages 12 months and again at 24 months for all children participating in Health Check (Medicaid), Health Choice, or WIC. The recommendations also required an environmental investigation by the local health department when a child's blood lead level persists at ≥ 15 ug/dL or is confirmed to be ≥ 20 ug/dL.

Lead remains the top environmental health threat for our young children, and I am particularly concerned about children in lower socio-economic groups who are at higher risk for elevated blood lead levels and their deleterious effects. I am, therefore, issuing "enhanced" recommendations, which include two significant changes from the prior document:

1. Because screening rates of high-risk children remain low, I am requesting that local health directors take leadership in the development of county-based plans to dramatically increase blood lead screening rates. The goal should at least be the universal blood lead screening of 12 and 24 month-old children participating in Health Check, Health Choice, or WIC. I am also requesting that WIC Programs make screening available for 18-and 30 month-old children when they appear for WIC recertification and there is no evidence that screening was performed by the "medical home." By bringing together the resources of Carolina Access, Health Check Coordinators, and WIC and other local health programs, the challenge is to create the most effective and efficient way of achieving universal screening of these children in each community. We have had great success in increasing

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immunization rates: this success needs to be replicated with regard to blood lead screening.

2. Because there is growing evidence that even low blood lead levels are harmful to young children, and because simple and inexpensive environmental interventions (such as careful and frequent dusting and mopping) can significantly reduce exposure, environmental investigations shall now be offered for all children less than six years-of-age with confirmed blood lead levels ≥ 10 ug/dL. The Division of Environmental Health will conduct investigations for children with confirmed elevations between 10 and 19 ug/dL, unless the local health department chooses to offer this expanded coverage. Local health departments are still responsible for mandated environmental investigations for children with blood lead levels ≥ 20 ug/dL.

We are grateful for the cooperation of all providers as we seek to make North Carolina's children "lead free." We hope these "enhanced" recommendations will help us achieve that goal. If you should have any questions regarding these recommendations, please contact Ed Norman in the Division of Environmental Health at 919-715-3293.

ADM:tv