Leaded Indoor Paint, Off Market 30 Years, Still Kills in Slums

Children Eat the Peeling Paint In Old, Decaying Tenements; The Tragic Story of Gregory

By EVERETT GROSKLOSS
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NEW YORK — For the William Franklin family, the experience was terrifying and tragic. When Mrs. Franklin awakened last Sept. 28, her two-year-old son, Gregory, was lying unconscious in bed beside her.

The Franklins rushed Gregory to a hospital. His case was diagnosed as acute lead poisoning—the result of his having eaten paint that flaked off the ceiling or chipped off the wall in the family's slum apartment in Harlem.

For a while, it looked as if Gregory would die, but he didn't. After almost two months of treatment, he left the hospital, but he was hardly a picture of health. He was blind, deaf and could no longer talk and he suffered severe mental retardation. Today Gregory's sight has returned and he is regaining a few sounds, but he is still deaf and badly retarded. Medical authorities say he probably will never be normal.

In one sense, however, Gregory is all too normal. In many ways he is typical of thousands of slum children who have been poisoned by old paint in decaying tenements. There is no way to know exactly how many children have been gravely injured because only the worst cases—those near death—show up at the hospitals. We have to believe that a much larger number are never detected," says Dr. James S. Du Pre, an authority on lead poisoning and a consultant to the Department of Health, Education and Welfare.

Reliable figures on the scope of lead poisoning are hard to come by. Some experts say that 35,000 to 100,000 children in the U.S. may have dangerous cases of lead poisoning at any given time, but others say the figure is probably much lower. In any event, a large number of children are involved. In New York alone, city health officials estimate that as many as 4,500 children are dangerously poisoned. Two deaths in New York were attributed to lead poisoning last year, and five occurred in 1963; national figures aren't available.

The victims of lead poisoning are almost always children between one and six years old. Usually, these children have pica—a craving for unusual substances that may lead them to eat chips of paint and plaster that they find on the floor or peel off the walls.

Almost invariably, lead poisoning victimizes in poor neighborhoods. Paint manufacturers stopped making leaded paint for interior use about 30 years ago; thus, most buildings that have gone up since the beginning of World War II have never been painted with leaded paint. But in older structures in cities such as New York, Chicago, Philadelphia and Minneapolis, leaded paint—often cracked, peeling and covered by several layers of nonleaded paint—is still on the walls.

The tragedy of it all is that lead poisoning could have been stopped many years ago by either removing the old paint or by covering it with wallboard so that kids couldn't get to it—yet it goes on year after year," says Dr. Paul B. Cornely, president of the American Public Health Association and a community health expert at Howard University in Washington.

A major factor is that many parents aren't aware that paint chips can harm children. Slum buildings are also more likely not to have elevator carmen. To avoid carrying toddlers up and down stairs, parents sometimes leave children unattended while they run errands.

Diagnosis Is Difficult

The economics of slum property is also a big consideration. Landlords are often reluctant to pump money into older buildings for routine maintenance, allowing interiors to deteriorate. Municipal housing authorities, usually understaffed and preoccupied with other problems, are frequently lax about enforcing housing maintenance codes because they fear landlords might abandon old buildings, thereby causing even more problems.

Moreover, critics say that because symptoms of lead poisoning—headaches, dizziness, constipation and general "crankiness"—are so similar to symptoms of the common cold and flu that medical authorities sometimes mistake lead poisoning for other ailments. Extended ingestion of lead-laden paint can cause convulsions, coma and brain damage.

Even when lead poisoning is suspected, diagnosis often is hard. Urine analysis can be helpful, but most doctors agree that a blood test—until far from foolproof—is the most reliable diagnostic method. But in many cities, laboratory facilities are swamped with work and it can be several days before test results are known. Treatment for severe cases usually calls for agents that induce vomiting and diarrhea.

While lead poisoning is nothing new, it is attracting new concern. Neighborhood groups formed to fight the problem have been gaining influence in recent months. Largely as a result of pressure from such groups, New York Mayor John V. Lindsay is expected to announce a major city-sponsored drive against lead poisoning within a few weeks. It's understood that Mr. Lindsay will urge public health officials in neighborhood clinics to be partic-

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early alert for lead poisoning symptoms and to supply literature to parents who visit the clinics.

"One of the most important things we can do is to get the message across to parents in the slums that paint can be dangerous—and then we want to find new ways to force the city health and housing agencies to do the job they are supposed to be doing," says Paul A. Da Brot, a city planner who is chairman of a New York group called the Citizens' Committee to End Lead Poisoning.

Major progress is being made. For example, New York last month enacted a law—said to be the toughest in the country—that requires landlords to make repairs within five days on buildings in which children are poisoned. If landlords refuse, city workers will do the job and then bill the landlord.

Despite such signs of progress, some groups are still disenchanted with public health efforts to combat lead poisoning and are acting on their own. Last month, a radical Puerto Rican group called the Young Lords, along with volunteer interns and medical students, tested 104 slum children in a door-to-door program in Harlem. According to Juan Gonzalez, a Young Lord, urine tests disclosed positive signs of poisoning in 80% of the children.

Concern is also mounting at the Federal level. Sen. Edward Kennedy of Massachusetts and Rep. William F. Ryan of New York have introduced bills to make Federal funds available to local governments for detection and treatment programs. The bills would also provide for the correction and eventual elimination of so-called high risk housing units.

Critics contend that a shortcoming in the handing of lead poisoning cases is that children often are returned to the same housing conditions where they were poisoned. Glenn Paulson, co-chairman of a New York group called the Scientists' Committee for Public Information, says, "One of our first priorities has got to be keeping these children from being re-exposed to a poisonous environment as well as protecting other children in the household until a permanent solution can be found."

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