Officials Differ on Best Way to Halt Lead Poisoning

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Congress passed a $7.5-million appropriation for lead poisoning prevention last week, but the basic question — what constitutes prevention? — remains unsolved among public health practitioners.

The few lead poisoning programs currently in operation around the country all look for children with high levels of lead in their blood and then clean up the environment that poisoned them. The new appropriation measure takes this approach.

But many doctors feel that it would be more useful and less costly to have a systematic cleanup of housing known to contain lead before children can ingest the paint.

400,000 Affected

Lead poisoning affects an estimated 400,000 American children annually. Almost all of these cases result from the nibbling of peeling paint in dilapidated buildings by young children, usually between 1 and 6 years of age. Almost all housing built before World War II has lead-based paint. And studies of paint currently marketed as "nonlead" found that some brands did contain lead.

New York City health department officials said that 93 per cent of 2,600 reported cases last year could be traced to housing.

Chicago, Baltimore, as well as New York, inspect the houses of children with high blood-lead levels, remove all the old paint and see to it that repainting is done. The process is often slow.

But repair is only authorized in the dwelling unit in which the child has been poisoned, even though other apartments in the same building may be equally hazardous.

Six persons filed a petition with the Food and Drug Administration in Washington this week that requested the F.D.A. to ban all future sale and use of lead-based paint.

They said they thought it was the first time that a group has acted under the provisions of the Hazardous Substances Act to have the F.D.A. ban a household product.

Those filing the petition are: Joseph A. Page, an associate professor at Georgetown University Law Center; Representative William F. Ryan, Democrat of Manhattan; Anthony L. Young and Mary Win O'Brien, students at Georgetown University Law Center; Jack Newfield, a New York freelance writer; and Dr. Edmund O. Rothschild, a physician at Memorial Hospital in New York. A spokesman for Representative Ryan's office said they hoped for a response in next few weeks.

Housing Checks Backed

Proponents of the housing approach would begin by looking at all housing that is high risk and spend the $650 that it costs on the average to remove the lead from each dwelling unit. They say this approach is cheaper.

Each child who must be hospitalized for treatment spends about a week in the hospital. They daily cost of such care in large metropolitan areas, where lead poisoning is mainly found, exceeds $100 a day.

A week's stay, therefore, costs more than the average price of repairing each unit, which still must be done. Since most patients are poor, their hospital bills are probably paid through Medicaid, which means with tax monies.

Besides the 200 children who die each year from lead poisoning Federal health officials estimate 800 are poisoned badly enough to sustain permanent brain damage. Most of these patients receive almost lifelong institutionalized care. Dr. J. Julian Chisolm of Baltimore estimates that more than $200,000 is spent on each of these children, more than the cost of renovating 300 dwelling units.

New York has the most extensive lead poisoning program in the country. It requires landlords to repair the apartments of affected children within five days after the report of a positive blood test.

If the landlord fails to do the job, as happens in five out of six cases, the Housing Development Administration will do it and bill the landlord. A spokesman for the agency said it had removed the lead from 2,100 apartments since January, 1970, and had been paid by the landlord in fewer than 400 cases.

Such costs are separate from those of the city's $2.2-million program for screening children. That effort is headed by Dr. Vincent F. Guinee of the Department of Health.

Dr. Guinee, as do many of the doctors, believes that the present approach does offer a measure of prevention. Some children with elevated blood-lead levels are found before the symptoms of poisoning show and before any damage is done. The apartment is then cleared of lead so that the child's brothers and sisters or the next family to rent the apartment will not be in danger of being poisoned.

Funds Different to Obtain

This approach is more politically realistic, too, they say. They point to the difficulty that was involved in winning passage of the $7.5-million appropriation Congress approved last week even though a steady stream of medical workers pleaded for "the minds and lives of children."

A national effort to "eradicate lead poisoning" began early last year and peaked by the summer. By the end of the year, Congress had approved a compromise of two bills — a House version sponsored by Representative Ryan and a Senate version, sponsored by Edward M. Kennedy, Democrat of Massachusetts.

It authorized spending $30-million over two years and said the Federal Government would pick up the cost of 75 per cent of all screening of high-risk children.

The President signed the bill into law. Fifty-two cities, including New York, applied for a total of $45-million under the provisions of the bill. They waited, but the Administration did not ask for funds and none were appropriated. The cities themselves did not come up with local funds.

Dr. Dudley Anderson, the head of Washington's lead poisoning program, explained the situation in his city as the Federal appropriation was pending. Initial screening found a 10 per cent incidence among the few thousand children tested, he said, and continued:

"When we started our program, the only funds we had were those diverted from other sources, and the Model Cities funds we have received are available only through this December.

Fund Request Raised

"If Federal funds do not become available, the lead paint poisoning screening program in the District of Columbia, for all practical purposes, will cease to exist. There is no local money here. We are on a zero budget —no money at all for any new projects."

Most efforts to offer the same data presented last year to lawmakers in a new form were unsuccessful. Then the politics of embarrassment began — many groups and politicians began questioning the sincerity of the Administration's new health reform proposal, when no appropriation was requested for lead poisoning prevention.

The Administration asked for $2-million, which was raised to $5-million in the House and $15-million in the Senate, before the $7.5-million was agreed on in conference.

One institution that has continued to push the housing cleanup approach is Kings County Hospital — Downstate Medical Center in Brooklyn, which handles more cases than any other hospital in the city.

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Lead Pollution Is a Hazard Only in Cities, Study Says

Washington — (UPI) — The National Research Council yesterday reported that air polluted by lead is a potential health hazard to children and some workers in the inner city, but not to the general population.

The average American, according to the report, consumes more lead in food and drinks than he inhales from the atmosphere polluted by leaded automobile exhaust.

The report was prepared for the Environmental Protection Agency (EPA) by the council's committee on biologic effects of atmospheric pollutants. Findings included:

— Young children in inner cities have more lead in their blood than adults do, possibly from swallowing contaminated dust or nibbling paint as well as breathing the air. The blood lead concentrations are not great enough to cause symptoms of lead poisoning but are sufficient to cause "biochemical changes," the effect of which is not well understood.

— The same potential hazard exists for some traffic policemen, garage workers, and others whose jobs expose them continuously to high air levels of lead. But to become sick with diagnosable lead poisoning they would have to get five times more lead than they do now from all sources.

A City Problem

The report said that atmospheric lead is almost entirely a city problem, as are its largest U.S. users. It has 20 times more lead than country air. Such pollution results largely from combustion of lead additives in gasoline.

The average city dweller's blood, however, acquires from all sources only one forth the lead concentration at which symptoms of lead poisoning begin to occur.

The committee also reported that despite increased use of leaded gasoline, the lead content of air in most major cities has not changed markedly in the past 15 years.

As far as the total environment — not just the air — is concerned, lead-using industries contribute two or three times as much lead pollution as does leaded gasoline.

Sources of Lead

"Currently," the research council said, "the most serious and crippling form of lead poisoning is found in inner city youngsters who eat lead-based paint.

"Another major source of serious poisoning is moonshine whisky manufactured in stills in which automobile radiators are used as condensers and the other components are connected by lead soldering.

"Additional sources of lead poisoning include improperly fired lead-glazed earthenware, old battery casings used as fuel, and an assortment of manufactured items such as lead-containing toys."

The committee recommended further research to determine precisely what effects lead has short of acute poisoning. It also called for improved monitoring of lead in food, water, beverages, and city street air.