

Congress of the United States
Washington, DC 20515

October 8, 2020

The Honorable Robert R. Redfield, M.D.
Director
U.S. Centers for Disease Control and Prevention
1600 Clifton Road
Atlanta, GA 30329

Dr. Redfield,

We are writing regarding alarming reports that blood lead testing for young children has substantially dropped in many parts of the country.¹ We urge your agency to take immediate and strong action to respond to this troubling trend and to work with state and local health departments to ensure that at-risk children are being screened for this neurotoxin which can have lifelong impacts.

We are concerned that the drop in critical lead-exposure testing, coupled with the consequences of school closures and stay-at-home orders, could result in increased lead exposure among children and delayed intervention.

According to U.S. Centers for Disease Control and Prevention (CDC), there is no safe level of lead. Lead poisoning has severe and long-lasting implications for childhood development. Lead exposure can lead to behavioral, endocrine and cardiovascular conditions, as well as learning difficulties and neurodevelopmental deficits. Research has shown that childhood lead exposure can impact healthy growth and development in addition to limiting lifelong socioeconomic advancement.^{2,3}

According to the Michigan Department of Health and Human Services, the number of children under the age of six tested for lead dropped 76% in April 2020 as compared to April 2019. That drop continued into the next month with the number of children tested 61% lower in May 2020 than May 2019. News report suggest other states are also experiencing a similar drop in lead detection testing.⁴

¹ Zeltner, B. (2020, September 11). Kids Are Missing Critical Windows for Lead Testing Due to Pandemic. Kaiser Health News. <https://khn.org/news/kids-are-missing-critical-windows-for-lead-testing-due-to-pandemic/>

² Centers for Disease Control and Prevention. (2020, January 7). Health Effects of Lead Exposure. <https://www.cdc.gov/nceh/lead/prevention/health-effects.htm>

³ Reuben, A., Capsi, A., & Belsky, D. (2017). Association of Childhood Blood Lead Levels With Cognitive Function and Socioeconomic Status at Age 38 Years and With IQ Change and Socioeconomic Mobility Between Childhood and Adulthood. *JAMA*, 317(12), 1244–1251. <https://jamanetwork.com/journals/jama/fullarticle/2613157>

⁴ Zeltner, B. (2020, September 11). Kids Are Missing Critical Windows for Lead Testing Due to Pandemic. Kaiser Health News. <https://khn.org/news/kids-are-missing-critical-windows-for-lead-testing-due-to-pandemic/>

We understand that the coronavirus pandemic has forced many families to skip or delay pediatric appointments for their children in which lead poisoning testing occurs. However, the lead exposure test is key to jump starting any lead exposure treatment and prevention plan, including the remediation of hazards in the home. Any delay in lead testing could mean heightened lead exposure and irreversible health impacts. Timely linkage of care for children with elevated blood lead levels is critically important to limit the impact of lead toxicity on a child's health.

The lowered testing rate is even more concerning given that it is occurring when exposure to lead paint chips, dust, soil or water in homes is increasing due to stay-at-home orders during the pandemic. Further, coronavirus-related school and childcare closures mean that children are likely spending more time at home, the place where lead exposure often happens. Delays in detection and care coupled with the potential for increasing lead exposure is deeply concerning and the CDC must take action to help states address this troubling trend.

We recognize the ongoing coronavirus public health emergency has stretched federal, state and local public health official thin. However, we cannot allow for public health officials to use that as an excuse for ignoring other major health issues, including childhood lead poisoning, which still remain a dire threat to our children's health and well-being. Congress has appropriated \$40 million in Fiscal Year 2021 to combat childhood lead poisoning and we expect it to be used effectively. Additionally, we hope that any funds available to your agency through the CARES Act and other packages in response to the COVID-19 pandemic will also be prioritized to address this troubling trend. The seriousness of failing to act requires that your agency consider all avenues for helping reverse this trend, including not only technical assistance but also financial resources.

As reported by Kaiser Health News, the CDC, "plans to help state and local health departments track down children who missed lead tests." We ask that the CDC honor this commitment and provide additional information, either verbally or in writing, about CDC's specific plans to assist states and local municipalities which historically have high levels of lead poisoned children, in helping ensure children receive timely lead exposure testing.

Lead toxicity impacts children in a number of harmful ways and must be addressed. We look forward to hearing from you on your plans to combat childhood lead poisoning during this pandemic.

Sincerely,



Daniel T. Kildee
Member of Congress



Gwen Moore
Member of Congress

John Katko
Member of Congress

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Member of Congress

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