



**STATE OF HAWAII
DEPARTMENT OF HEALTH**

P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

**Testimony COMMENTING on HB 1241, HD1
RELATING TO HEALTH**

REPRESENTATIVE SYLVIA LUKE, CHAIR
HOUSE COMMITTEE ON FINANCE

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Room Number: 308

Fiscal Implications: HB1241, HD1 provides an unspecified appropriation in general funds to the Department of Health (DOH) for lead poisoning prevention activities. The DOH will need one full-time coordinator position and funding for outreach and education, updating Hawaii guidelines, and facilitating data collection and analysis.. The DOH is not able to conduct lead poisoning prevention activities within existing resources.

Department Testimony: The Department appreciates the intent of the bill, but defers to the Governor's Executive Budget request and the Department of Health's appropriations and personnel priorities. Childhood lead poisoning and its negative impact on the developing brain and other organs are preventable. To conduct lead poisoning prevention activities, the DOH will need additional resources.

Currently, requests for childhood lead poisoning information and management are received by three programs within the DOH – Children with Special Health Needs Branch, Hazard Evaluation and Emergency Response Office, or Lead and Asbestos Program in the Indoor and Radiological Health Branch. There has not been a formal effort for lead poisoning prevention since the ending of the Centers for Disease Control and Prevention (CDC) Childhood Lead Poisoning Prevention Program grant in 2003.

Data from the Hazard Evaluation and Emergency Response Office shows that 60,301 children were screened from 2007-2014. Of these, 1,027 (1.7%) children were found to have elevated blood lead levels greater than or equal to 5 micrograms/deciliter of blood. Based on the 2013 population estimate of 90,770 Hawaii children under age 5 years, potentially there may be over 1,500 children with elevated blood lead levels each year.

1 The “reference level” for elevated blood lead levels at 5 micrograms/deciliter was
2 established by the CDC in 2012, based on scientific studies showing that even low blood lead
3 levels can cause lifelong health effects. Blood lead levels less than 10 micrograms/deciliter have
4 associated cognitive (IQ deficits, attention-related behaviors, impact on in academic
5 achievement), cardiovascular, immunological, and endocrine effects. The early identification of
6 lead exposure allows parents, doctors, public health officials, and communities to take action
7 earlier to reduce a child’s future exposure to lead, through lead education, environmental
8 investigations, and additional medical monitoring.

9 Adverse health effects of lead exposure in children include intellectual and behavioral
10 challenges. No safe blood lead level in children has been identified. Prevention requires
11 reducing environmental exposures from soil, dust, paint, water, and other sources of lead, before
12 children are exposed to these hazards. Ongoing outreach is necessary to educate primary care
13 providers, parents, and community on the prevention of lead exposure and its health effects.

14 Thank you for the opportunity to testify.