# Lead Brought Home from Work in California— Identification and Prevention

Luz Kirsch, BA Karen Hipkins, RN NP, MPH

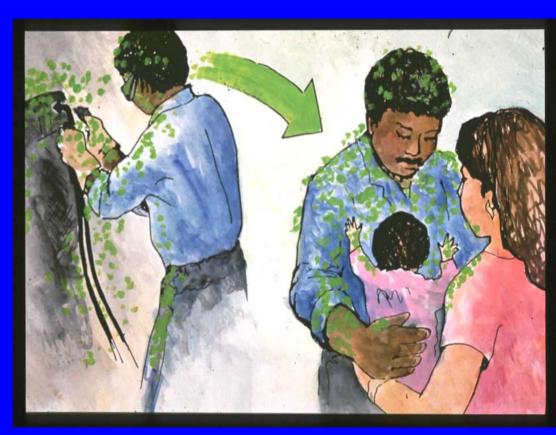
Occupational Lead Poisoning Prevention Program/PHI
Occupational Health Branch
California Department of Health Services

www.dhs.ca.gov/ohb/olppp

# "Take-Home" Exposure

- Toxic substance carried from work to home on worker's body, clothes, shoes
- Young children and fetus have added risk
- Procumented cases of family illness include work exposures to:

lead, beryllium, mercury, asbestos, pesticides, others



# Take-Home Lead Poisoning in California

- Since 1992, OLPPP investigates suspected take-home lead exposures in collaboration with local health departments (LHDs)
- Confirmed if household member and lead-exposed worker each have blood lead level ≥ 10 μg/dL; and workplace source identified
- Intervene with employer, worker and family to correct hazard and identify others at risk
- Employers may have legal liability if family member harmed due to workplace exposure

### Occupational Blood Lead Registry, California, 2005

Number of Individuals Age ≥ 16 years by Peak Blood Lead Level (BLL)

BLL (μg/dL)	No. individuals (%)*			
< 10	36,804 (93)			
	1,929 ( 5)			
20 - 39	748 ( 2)			
40 - 49	38 (<1)			
50 - 59				
60+	12 (<1)			
Total	39, 543			

<sup>\*</sup> Percentages do not equal 100% due to rounding

# Workplaces, workers, and household members with BLLs ≥ 10 µg/dL, California, 1992 through June 2006

Type of Workplace	Workplaces, n(%)	Workers, n(%)	HH members, n (%)
Radiator repair, mfr.	16 (30)	17 (25)	24 (25)
Battery mfr., recycling, repair	7 (13)	8 (12)	9 (9)
Painting	7 (13)	7 (10)	11 (12)
Metal casting	6 (11)	7 (10)	9 (9)
Ceramics mfr., tile painting	5 (9)	6 (9)	5 (5)
Scrap metal recycling	4 (7)	8 (12)	8 (8)
Antique furniture refinishing	2 (4)	3 (4)	7 (7)
Others	7 (13)	13 (19)	22 (23)
TOTAL	54 (100)	69 (101)	95 (98)

# Peak BLLs of workers linked to household members with BLLs > 10 μg/dL, California, 1992 - June 2006

Blood Lead Level (µg/dL)	Number of Workers (%)
10 to 24	21 (30)
25 to 39	20 (29)
40 to 59	18 (26)
60 to 99	8 (12)
<u>≥</u> 100	2 (3)
т	OTAL 69 (100)

Additional 87 co-workers newly identified with BLLs ranging from 10 to 164  $\mu$ g/dL, 35% > 40  $\mu$ g/dL

# Household members linked to workers with BLLs > 10 μg/dL, California, 1992 - June 2006

	Age of Household Members						
	< 1	1-5	6-13	18+	Total		
Death Did	year	years	years	years			
Peak BLL (µg/dL)		Numbe	Number (%)				
10-14	7	17	3	1	28 (29)		
15-19	3	5	4	1	13 (14)		
20-24	3	20	2	-	25 (26)		
25-39	3	17	2	1	23 (24)		
40-49	-	5	-	-	5 ( 5)		
50+	-	1	-	-	1 ( 1)		
Total Number(%)	16 (17)	65 (68)	11 (12)	3 (3)	95 (100)		

### Identification

- 47 of 54 incidents (87%) identified by testing child in primary care
- 6 incidents (12%) identified by testing worker in primary care; 1 by employer testing
- 48 incidents (89%) first identified to OLPPP by LHD-initiated reporting
- 25 of 58 counties (43%)—urban and rural

### **Limitations**

- True number of take-home lead poisoning incidents unknown
- Take-home lead exposure may not have been recognized or reported
- Several suspected take-home lead exposure cases not confirmed due to inability to obtain worker BLL or interview
- Laboratories not required to report BLLs < 26 μg/dL prior to 2003; important data gaps

### **OLPPP's Efforts to Address Take-Home Exposure**

- Integral part of tiered case management protocol
- Outreach and education projects/materials for workers, employers and health care providers
- State lab offers free one-time BLL testing for any adult in home if payment a financial hardship
- Ongoing education/collaboration with state CLPPB and LHD staff

# Take Home Lead Exposure Case Identification and Management

#### CDHS OLPPP

- Interview worker
- •Interview employer
- Advise and monitor
- Identify others at risk

#### CDHS

#### Blood Lead Registry

- Elevated BLL worker or child
- Suspected or confirmed takehome exposure

# **Local Health Department**

#### **Childhood Lead Program**

- Home evaluation and counseling
- •BLL testing of others in home
- Medical and home follow-up as indicated

# **Next Steps**

- Past voluntary efforts by LHDs to contact adults with BLLs 10 to 39 μg/dL varied by resources
- Newly expanded capacity of OLPPP's Registry provides direct notification statewide for all adults with BLLs ≥ 10 µg/dL
  - encourages BLL testing of their children
  - provides resource information
- Enhances support for all LHDs in identification of suspected take-home lead exposure cases

# **Next Steps (con't)**

- Beginning 2007, OLPPP sends letters monthly to all adults with BLLs ≥ 10 µg/dL on one-time basis— English/Spanish
- List of Common Jobs, Hobbies & Other Sources of Lead (bilingual)
  - http://www.dhs.ca.gov/ohb/OLPPP/new.htm#New
- "Don't take lead home from your job" brochure (bilingual)
  - http://www.dhs.ca.gov/ohb/OLPPP/pubsgeneral.htm

# **Next Steps (con't)**

- Family Lead Poisoning Associated with Occupational Exposure, Clinical Pediatrics, 2004
  - http://www.dhs.ca.gov/ohb/OLPPP/family\_lead\_poisoning.pdf
- Recommendations for Medical Management of Adult Lead Exposure, third of five-part minimonograph series, *Environmental Health Perspectives*, in-press, December 2006.

http://www.ehponline.org/members/2006/9784/9784.pdf

#### **Conclusions**

- Take-home exposures are a serious problem.
- True incidence is not known.
- Most take-home cases in California are initially identified by BLL testing in primary care.
- Collaboration with LHDs is essential.
- Take-home poisoning is preventable!