



COLORADO
Department of Public
Health & Environment

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April 21, 2015

Ms. Alissa Schultz
Colorado Department of Public Health and Environment
Hazardous Materials and Waste Management Division
4300 Cherry Creek Drive South
Denver, CO 80246

RE: Colorado Department of Public Health and Environment Disease Control & Environmental Epidemiology Division (DCEED) Lead Surveillance Database

Dear Ms. Schultz,

This letter is intended to summarize our previous phone conversation in March 2015 regarding the DCEED Environmental Epidemiology Program blood lead surveillance database, in terms of blood lead data and Mr. Joe Kocman's request for blood lead data in June 2014.

Clinical laboratories (and providers who test for blood lead at the point of care) in Colorado are required to report all blood lead test results for children 18 years of age and younger, even if the result is 0 micrograms of lead per deciliter of blood ($\mu\text{g}/\text{dL}$) or non-detectable. For people older than 18, laboratories are required to report test results if the result is 10 $\mu\text{g}/\text{dL}$ or higher. These blood lead test results must be reported to the state health department as specified in the Colorado Board of Health Regulations (6 CCR 1009-7). In 2012, the Centers for Disease Control recommended adopting a new blood lead reference level of 5 $\mu\text{g}/\text{dL}$, and identifies this as the level at which steps should be taken to reduce lead exposure in children. Because Colorado Board of Health Regulations include reporting of all blood lead levels in children, the rules for reporting remain unchanged. While it is commonly acknowledged that no level of lead in the blood is safe, Colorado counties currently determine the 'elevated' level at which they initiate public health action; some have adopted the new recommendation of 5 $\mu\text{g}/\text{dL}$, and some continue to use a level of 10 $\mu\text{g}/\text{dL}$ and above.

The Environmental Epidemiology Program receives laboratory test results daily, and elevated results are reported to local health agencies on a weekly basis. Most local health agencies follow up on reports of elevated blood lead test results. This may include recommending actions for stopping the exposure and an investigation to determine the source of lead exposure. The Environmental Epidemiology Program analyzes, summarizes and reports the results of blood lead testing, including data on children less than 6 years of age which are available by county on the Colorado Environmental Public Health Tracking (COEPHT) website. These data should not be used to compare Colorado to other states because childhood blood lead testing practices vary between states. Some states recommend universal testing, while others, including Colorado, recommend targeted testing. Briefly, Colorado guidelines recommend testing for all low-income children in Colorado at 12 months and 24 months of age.

The COEPHT website currently includes lead data from 2007 to 2011. While the Division has continued to routinely receive data from clinical laboratories and providers, it has not had the resources until recently, to update the Tracking database and publish/report out current data. Therefore, data from



2012 to the present is not currently available on the public website. The Division recently received a cooperative agreement from the Centers for Disease Control and Prevention which will allow the Environmental Epidemiology Program to resume reporting and publication on the COEPHT website.

When the Environmental Epidemiology Program received Mr. Kocman’s request for lead data in Pueblo, Colorado in June 2014, we provided Mr. Kocman with unpublished 2012 lead data by zip code. This was at Mr. Kocman’s specific request, as the data is typically broken down only to the county level. In addition, Mr. Kocman requested the blood lead levels broken down into categories of less than 5 µg/dL, 5 µg/dL to less than 10 µg/dL, and 10 µg/dL and above. Data has typically been categorized into less than 10 µg/dL and 10 µg/dL and above, and on the COEPHT website is referred to as “confirmed elevated” if the level is confirmed at 10 µg/dL or above.

The data that we provided Mr. Kocman included blood lead test result data for individual children under age 6 by zip code for the years 2011 and 2012, and for 2008-2012 in aggregate at the county-level. For example, if you look at the 2012 data for zip code 81006 (*please see associated spreadsheet named “Pueblo Data Request 062014”*), there were 30 children under age 6 with blood lead results of below 5 µg/dL; 0 children under age 6 with blood lead results of 5 to less than 10 µg/dL; and 0 test results from children with blood lead results of 10 µg/dL or above.

Again, this data only includes test results that are reported to the state health department by clinical laboratories and does not include test results for every child residing within this zip code, as it is not mandatory for children to be tested for lead. In other words: in 2012, there happened to be test results reported for 30 children tested for lead in the 81006 zip code.

The table below shows the 2008-2012 data in aggregate (i.e., in total) at the county level that was given to Mr. Kocman. Again, this is data reported to the health department for individual children.

Number of children less than 6 years of age tested for elevated blood lead in Pueblo County, 2008-2012

Year	elevated blood lead results (µg/dL)		
	0 to less than 5	5 to less than 10	10 or greater
2008	129	4	<5
2009	232	12	0
2010	373	16	<5
2011	328	13	<5
2012	406	13	<5

Note: Some values have been suppressed to protect confidentiality.

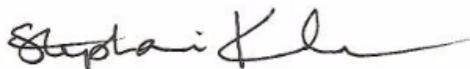
It is important to note a difference between the Agency for Toxic Substances and Disease Registry’s (ATSDR’s) September 2013 blood lead and arsenic level exposure investigation in the Eilers/Bessemer neighborhoods versus Environmental Epidemiology Program’s data.

- The blood lead surveillance data that the Program receives is only what is reported to them. The CDPHE does not recommend that doctors perform blood lead testing on everyone, nor do they enforce required reporting, thus the Program database does not represent all children in a given area.
- The goal of the Agency for Toxic Substances and Disease Registry’s study was to test children in a specific geographic area. Their assessment was conducted with the intent to sample a specific community - in this case a small sub-population in a given area sampled on a voluntary basis.



Please let me know if we can be of further help in clarifying the Environmental Epidemiology Program's lead database.

Sincerely,



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