

## LEAD SCREENING

### 1. List some of the environmental sources/exposures of lead.

Lead used to be contained in gasoline and paint but was removed from paint in the 1970's. Current exposure comes from older homes painted prior to 1970, some pigment paints, cooking vessels, pottery such as Fiesta ware, lead fishing weights and some medications or home remedies. Exposure to lead can occur via ingestion or inhalation.

### 2. What is currently considered to be a toxic lead level?

A blood lead level greater than 10 micrograms/dL. In 1985 it was >25 micrograms/dL.

### 3. What are the symptoms and physical exam findings associated with lead toxicity?

Most children with mild lead poisoning are asymptomatic. Lead poisoning over time can lead to neurocognitive problems such as language delay, behavior issues, colicky abdominal pain, hearing loss, peripheral neuropathy. Acute encephalopathy can be seen with blood lead levels greater than 100 mcg/dL and presents with intractable vomiting, altered LOC, seizures, ataxia and can progress to coma.

With lead induced encephalopathy you may also see basophilic stippling on peripheral smear, lead flecks on abdominal radiograph, lead lines on a long bone radiograph (only seen with levels >45 mcg/dL).

### 4. At what ages do we recommend screening for lead poisoning?

Current guidelines recommend screening between 9-12 months of age.