



**NATIONAL MEDICAL ASSOCIATION
INTERIM MEETING OF THE HOUSE OF DELEGATES**

Number: 16-101X

**RESOLUTION
ADOPTED MARCH 6, 2016**

SUBJECT: Lead Contamination in Flint Water: Negligence

WHEREAS, the dangers of lead exposure have been recognized for millennia, and it is now established that there is no safe level of lead, particularly for children⁷. The reference blood lead concentration for children, set by the Centers for Disease Control and Prevention, is 5 µg per deciliter for risk stratification purposes only⁴. The reason the blood lead reference value wasn't set lower was because of limited resources⁷, and

WHEREAS, with the increasing recognition that no identifiable BLL is safe and without deleterious and irreversible health outcomes, Healthy People 2020 identified the elimination of elevated blood lead levels (EBLL) and underlying disparities in lead exposure as a goal⁶, and

WHEREAS, pregnant women, lactating women and children are at risk from lead exposure.⁵ Children are more vulnerable to lead than adults because of their greater fractional absorption of ingested lead and greater intake on a body-weight basis. Lead is a potent neurotoxin, and childhood lead poisoning has an impact on many developmental and biological processes, most notably low birth weight, intelligence, behavior, and overall life achievement.^{2,8} When lead concentrations in water are high, infants consuming reconstituted formula are at special risk^{2,3}, and

WHEREAS, African Americans adults are four times more likely to develop renal failure than their white counterparts. Low level lead exposure has been shown to decrease renal function and increase blood pressure in teenagers and adults.⁸ The toxic stress associated with this crisis is likely to be further elevating blood pressures and over 40% of African Americans are already hypertensive, and

WHEREAS, Michigan officials were aware of the lead elevation in the waters of Flint and delayed taking any corrective actions until forced to due to the protests of its residents⁴,

THEREFORE BE IT

RESOLVED, that the children of Flint exposed to lead contaminated water with resulting elevated blood lead levels (EBLL) have hematological and neurodevelopmental monitoring at established intervals so that they do not suffer delay in diagnosis of adverse consequences of their lead exposure.

RESOLVED, that Federal/State funded programs already established to evaluate at risk children be expanded to provide automatic entry into early intervention screening programs to help assist in the neurodevelopmental monitoring of exposed children with EBLL

RESOLVED that appropriate nutritional support be assured for all residents, but especially exposed pregnant women, lactating mothers and exposed children. That support should include Vitamin C, green leafy vegetables and other calcium sources so that their bodies will not be forced to substitute lead for missing calcium as the children grow.

RESOLVED, that the Flint community should be made aware that chronic low-level lead exposure is a potent vasoconstrictor and nephrotoxin in teenagers and adults. There should be intensive monitoring of blood pressure and renal status of Flint residents. Residents should be informed as to what constitutes an abnormal blood pressure level and where to go for treatment when abnormal results are found in order to prevent the severe consequences resulting from a lack of treatment.

RESOLVED, that there should be diagnosis and treatment of iron deficiency anemia in all residents, especially women and children.

RESOLVED, that the appropriate agencies that are aware of cities with elevated water lead levels take immediate action to alert and treat affected citizens appropriately. In addition, they must help those cities develop plans for systematic reduction of lead-contaminated water and replacement of lead pipes in an appropriate and proactive manner.

RESOLVED, that the NMA is interested in working with the local physicians to provide in-service education as well as public education messages around these issues if this is yet to be done

RESOLVED, that the NMA publish this resolution, once adapted, on its web site, in its journal, send it out in press releases and to all of its local associations.

FISCAL IMPACT: None

References:

1. National primary drinking water regulations for lead and copper: short-term regulatory revisions and clarifications. Federal Register. October 10, 2007 ([https:// www .federalregister .gov/ articles/ 2007/ 10/ 10/ E7 -19432/ national-primary-drinking-waterregulations-for-lead-and-copper-short-term -regulatory-revisions-and-clarifications](https://www.federalregister.gov/articles/2007/10/10/E7-19432/national-primary-drinking-waterregulations-for-lead-and-copper-short-term-regulatory-revisions-and-clarifications)).
2. Hanna-Attisha M, LaChance J, Sadler RC, Champney Schnepf A. Elevated blood lead levels in children associated with the Flint drinking water crisis: a spatial analysis of risk and public health response. Am J Public Health 2016; 106: 283-90.

3. European Food Safety Authority. Scientific opinion on lead in food. EFSA 2010; 8: 1570 (http://www.efsa.europa.eu/sites/default/files/scientific_output/files/main_documents/1570.pdf).
4. Bellinger, D.C. **Lead Contamination in Flint — An Abject Failure to Protect Public Health** February 10, 2016, at NEJM.org.
5. LEAD EXPOSURE Issue Statement and Recommendations Paula K. Schreck, MD, IBCLC, FABM Michigan Breastfeeding Network January 2016
6. Healthy People 2020: topics and objectives index. Washington, DC: US Department of Health and Human Services; 2012. Available at: <http://www.healthypeople.gov/2020/topicsobjectives2020>. Accessed February 25, 2016.
7. Centers for Disease Control and Prevention, Advisory Committee on Childhood Lead Poisoning Prevention. *Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention*. Atlanta, GA: Centers for Disease Control and Prevention; 2012. Available at: http://www.cdc.gov/nceh/lead/ACCLPP/Final_Document_030712.pdf. Accessed January 14, 2016
8. National Institute of Environmental Health Sciences, National Toxicological Program *Monograph on Health Effects of Low-Level Lead*, 2012. Available at: http://ntp.niehs.nih.gov/ntp/ohat/lead/final/monographhealtheffectslowlevellead_newissn_508.pdf Accessed February 25, 2016.