



October 27, 2017

Dear Ms Soiza:

Thank you for the opportunity to provide feedback regarding the [WISHA Lead Rule working draft](#).

The University of Washington PEHSU is a team of pediatricians and environmental health specialists funded by the EPA and the CDC ATSDR to address pediatric and reproductive environmental health concerns. In this capacity, we provide evidence-based consultation to health care providers, state officials, and individual families. As pediatric environmental health specialists we want to be sure you have been provided with all of the necessary information as you make decisions regarding this rule that will potentially affect our patient population and future generations.

It has been well established there is no safe blood lead level, especially in children. The neuro-development of both a fetus and small child can be adversely and permanently affected by even small amounts of lead, and unfortunately have their greatest impact at the lowest levels. The American Academy of Pediatrics<sup>1</sup> as well as the American College of Obstetrics and Gynecology<sup>2</sup> have issued professional statements reporting the take home pathway via parental occupation continue to be a major source of lead exposure for children. We regularly receive consultations on lead poisoning for families throughout the state of Washington, including elevated pediatric blood lead levels due to occupational take-home exposure.

The use of protective gear, hand-washing, separation of eating areas are only effective in protecting fetuses, breast-feeding babies and small children at home when they are used consistently and effectively. Thus, it is imperative that parents and future parents, both men and women, working with lead be made aware of the risks that their own exposure can pose to their children. By explaining specifically how their practices and work areas can pose risk to their loved ones if not prevented, and that those exposures are indeed preventable, L&I can provide more information for the workers to make educated decision about how much they want to adhere to occupational safety practices.

Thank you for your efforts to protect the health and well being of Washington's laborers and for revisiting the rules and expectations around occupational practices involving the use of lead. We appreciate your attention to our comments in order to ensure the inclusion of these workers' family members as important stakeholders, relevant to the objectives of the new Lead Rule. Thank you for your time and consideration.

Sincerely,

Elizabeth Friedman, MD, MPH

Sheela Sathyanarayana, MD, MPH  
Associate Professor

<sup>1</sup>AAP COUNCIL ON ENVIRONMENTAL HEALTH. Prevention of Childhood Lead Toxicity. *Pediatrics*.2016;138(1)

<sup>2</sup>Guidelines for the Identification and Management of Lead Exposure in Pregnant and Lactating Women. CDC 2010.