

Childhood Lead Poisoning Prevention and Control

2013 Annual Disease Surveillance Report

State of Connecticut Department of Public Health Lead and Healthy Homes Program

This report describes the rates of childhood lead testing by pediatricians, the rates of childhood lead poisoning for children under the age of six, the identification and frequency of lead hazards in residential properties, and the effectiveness of the actions taken by local health departments and districts in response to reported cases of severe childhood lead poisoning.

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CT Department of Public Health 2013 Annual Disease Surveillance Report on

Childhood Lead Poisoning Prevention and Control

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Connecticut Department of Public Health

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KEY FINDINGS

The following provides a summary of key findings for lead poisoning disease surveillance conducted by the Lead and Healthy Homes Program during the 2013 calendar year (CY):

• Statewide Mandatory Blood Lead Screening/Compliance

- 83,739 blood lead tests for children under age of 6 received by the Lead and Healthy Homes program
- o 75,749 children under age of 6 were screened
- Among the birth cohort 2010 who turned 3 years of age in 2013: 83.0% were screened by age 2 and 97.0% were screened by age 3
- Among the birth cohort 2010, 51.5% of children were screened at age 1 and again at age 2

• Prevalence of Childhood Lead Poisoning

Children are considered lead poisoned when diagnosed with a confirmed blood lead level $\geq 5 \ \mu g/dL$. Among children under 6 years of age who had a confirmed blood lead test:

- \circ 2,275 (30 per 1,000, i.e. 3.0%) children ≥5 µg/dL
- \circ 214 (3 per 1,000, i.e. 0.3%) children ≥15 µg/dL
- 0 111 (1 per 1,000, i.e. 0.1%) children ≥20 µg/dL

Incidence of Childhood Lead Poisoning

Number of new cases identified (incidence) among children under 6 years of age who had a confirmed blood lead test:

- o 1677 (23 per 1,000) ≥5 μg/dL
- \circ 166 (2 per 1,000) ≥15 μg/dL
- o 86 (1 per 1,000) ≥20 μg/dL

• Race and Ethnicity Associated with Childhood Lead Poisoning

Among children under 6 years of age who had a confirmed blood lead test:

- \circ Blacks (5.9%) were twice as likely to be lead poisoned at levels ≥5 µg/dL than Whites (2.5%), or Asians (2.1%)
- \circ Hispanics (4.2%) were 1.5 times as likely to be lead poisoned at levels ≥5 µg/dL than Non-Hispanics (2.6%)

• Environmental Lead Hazard Investigations

Among the 137 dwelling units for which environmental investigations were completed and reported for poisoned children:

- o 86.1% were identified with environmental lead hazards
- o 73.7% were multiple-unit dwellings
- 81.0% were identified with paint hazards
- o 50.4% were identified with dust hazards
- o 32.8% were identified with soil hazards
- o 0.0% with a drinking water hazard

UNDERSTANDING THE LEAD DATA

Connecticut General Statutes (CGS) Section 19a-110 -- Report of lead poisoning, requires laboratory reporting of blood lead tests for all individuals. Laboratories are required to submit blood lead test reports (i.e., findings \geq 10 µg/dL of lead in blood) within 48 hours of receipt of the test result to the Connecticut Department of Public Health (CT DPH) and the local health department serving the town where the person (child) resides. At least monthly, laboratories are also required to submit to the CT DPH a comprehensive report of all blood lead test results for Connecticut residents.

The CT DPH has maintained a blood lead surveillance system since 1994. In 2010, the CT DPH Lead and Healthy Homes program upgraded its blood lead surveillance system to a new, more comprehensive webbased system. The new system has enhanced the ability to merge birth records and comprehensive environmental data with childhood blood lead data. The new surveillance system has had a significant positive impact on the Lead and Healthy Homes program's capability to utilize surveillance data to enhance child case management efforts. The web-based feature of the new system enables secure and remote access by local health department staff. Case management features are built into the system for both child and property case management activities at the local health department level. The new system has been offered to local health departments since May 2011. Sixty-one health departments have adopted the CT DPH surveillance system and utilize it on an ongoing basis.

Important Business Rules:

Lead Screening – A person is considered to have a lead screening if he or she was tested for lead with either a venous or capillary blood draw.

Lead Poisoning - Children who are diagnosed with a blood lead level of \geq 5 µg/dL are considered to be lead poisoned. In 2013, the Connecticut DPH lowered the case management action level from 10 µg/dL to 5 µg/dL to correspond with the Centers for Disease Control and Prevention (CDC) reference value (2012, June 7. CDC Response to Advisory Committee on Childhood Lead Poisoning Prevention Recommendations in "*Low Level Lead Exposure Harms Children: A Renewed Call of Primary Prevention*" retrieved October 31, 2012 from

<u>http://www.cdc.gov/nceh/lead/acclpp/cdc_response_lead_exposure_recs.pdf</u>). Blood lead levels as low as 5 μ g/dL have been shown to affect IQ, ability to pay attention, and academic achievement. This new reference value is based on the children ages 1-5 years who are in the highest 2.5% of children when tested for lead in their blood by CDC's National Health and Nutrition Examination Survey (NHANES). Prior to 2013, lead poisoning was defined in Connecticut as a blood lead level of \geq 10 μ g/dL (i.e. "level of concern"). All previous CT DPH published lead poisoning statistics are based on the former "level of concern".

Children who had a blood sample collected for a lead screening in 2013 are included in this report regardless of whether the test was analyzed in 2013.

When a child had more than one lead screening in CY 2013, the child was only counted once and the highest confirmed lead result was used. If the child had multiple lead screenings while living in more than one town in CY 2013, the statistics regarding the child were applied to the town where the child lived when tested with the highest confirmed lead result.

A confirmed test result is defined as one of the following:

- 1) A venous blood draw
- 2) A capillary blood draw with a result of $<5 \mu g/dL$

Part I. BLOOD LEAD SCREENING

Blood Lead Screening in 2013

Connecticut law mandates that medical providers must conduct annual lead screening (i.e., blood lead testing) for each child 9 to 35 months of age, effective January 1, 2009. Furthermore, the law requires that any child between 36-72 months of age who has not been previously tested must also be tested by his or her medical provider, regardless of risk.

During calendar year (CY) 2013:

- The Lead and Healthy Homes program received 83,739 blood lead tests for children under age of six
- 75,749 children under six years of age were tested for lead poisoning
- 55,862 (71.0%) children between 9 months and 2 years old were tested for lead poisoning

Statewide Screening

Figure 1. Number of children under 6 years of age who had a lead screening, by calendar year – Connecticut 1995-2013



In CY 2013, 75,749 children under six years of age were tested for lead at least one time. The demographic characteristics for these children are reported in Table 1.

This figure displays the raw data counts and doesn't represent declining screening rates. Number of births in Connecticut consistently declined over the past years since 2007. The number of births dropped 10% (4385 children) from 2007 to 2011.

Demographics	Number	Percent
Age		
0-8 months	520	0.7%
9-11 months	5,314	7.0%
12-23 months	26,031	34.4%
24-35 months	24,517	32.4%
36-47 months	8,498	11.2%
48-59 months	7,202	9.5%
60-71 months	3,667	4.8%
Gender		
Male	38,361	48.1%
Female	36,456	50.7%
Unknown	932	1.2%
Race		
White	48,901	64.6%
Black	10569	14.0%
Asian	3399	4.5%
Native American	295	0.4%
Hawaiian or Pacific Islander	1	<0.1%
Other	959	1.3%
Unknown	11,625	15.4%
Ethnicity		
Hispanic	19,373	25.6%
Non-Hispanic	45,234	59.7%
Unknown	11,142	14.7%

Table 1. Demographics of children under 6 years of age who had a lead screening – Connecticut CY2013 (N=75,749)



Figure 2. Percentage of children 1-2 years of age who had a lead screening – Connecticut 1996-2013

In CY 2013, 55,862 (71.0%) children between 9 months and 2 years of age were tested for lead poisoning. There was an increase of 2.2% (1,338 children) in the screening rate from 2012 to 2013.

Starting with the 2011 report, the CT DPH modified how screening rates were evaluated for one and two year olds. State law requires medical providers to test children between 9 to 24 months of age. As such, the CT DPH included the 9 months to 11 months test results to the analysis. In prior reports, children between 9-11 months of age were not counted.

By Town Screening

A map illustrating screening rates, by town, for children between 9 months and 2 years old is shown on the next page (Map 1). For detailed information on screening by town for children between 9 months and 2 years of age, see Appendix Table 1.

Map 1.

By Town Blood Lead Screening Rate Children 9 Months to 2 Years Old, Connecticut 2013



Screening rate=

Compliance with Blood Lead Testing Requirements:

Screening rates among birth cohorts who turned 2 years old, 3 years old, and 6 years old in 2013

All healthcare providers in Connecticut must conduct annual blood lead testing for children between 9 to 35 months of age. Compliance with the law is assessed by measuring the proportion of children born in Connecticut during a given year who have had at least one blood lead test by age two or three, and at least one more blood lead test by age three.

In this report, the Department of Public Health Lead and Healthy Homes Program is able to evaluate the effectiveness of universal screening laws (i.e., mandated blood lead testing) for children under the age of three by assessing the screening rate among the 2010 birth cohort as the entire 2010 birth cohort reached three years of age (36 months) in 2013.

The analysis uses the total number of children who received a lead test while residing in Connecticut, regardless of where the child was born, divided by the total number of births in the given year from the vital registry. The numerator includes all children born in the given year who had a lead test associated with a Connecticut address regardless of the child's birth state. This method accounts for population relocation. This method is adopted by the CDC's National Environmental Public Health Tracking (EPHT) Program to assess lead screening in young children among the grantee states. One unknown weakness in this method of calculation is that it may overestimate the screening rate*, especially for smaller geographic areas.

Children born in the given year who received a blood lead tests reported with a CT address # of live births in a given year in CT

^{*} CDC EPHT program conducted screening rate analyses at county level and the results indicated some counties had screening rates over 100%. CDC explains this by stating, "There are several reasons why the number of children tested in a county may be higher than the number of children born in a county. Using the number of children born in a county doesn't account for children who move into a county before being tested."

Blood Lead Testing By Birth Cohort:

Summary statistics for children up to three years of age

2011 Birth Cohort (turned 2 years old in 2013)

Assessment of first required screening

Among children born in 2011,

- 17.3% were tested before age 1 (defined as under 12 months)
- 68.7% were tested at age 1 (defined as 12 months to 23 months)
- 82.5% were tested by age 2 (defined as under 24 months)

2010 Birth Cohort (turned 3 years old in 2013)

Assessment of required first and second annual screening

The 2010 birth cohort provides us with an opportunity to evaluate medical provider compliance with required blood lead testing for children between 9 to 35 months.

Among children born in 2010,

- 17.7% were tested before age 1 (defined as under 12 months)
- 68.7% were tested at age 1 (defined as 12 months to 23 months)
- 65.5% tested at age 2 (defined as 24 to 35 months)
- 83.0% were tested by age 2 (defined as under 24 months)
- 97.0% were tested by age 3 (defined as under 36 months)
- 51.5% were screened at age 1[‡] and again at age 2

Please refer to the illustrated graph, shown on the next page (Figures 3.1 and 3.2) which describes testing behaviors of medical providers for the 2010 birth cohort.

[‡] Including children 9 to 11 months old



Figure 3.1. Screening rate by age at blood lead testing among birth cohort 2010

Figure 3.2. Percentage screened for lead at least once by age and annually under age three among birth cohort 2010



Figures 3.1 and 3.2. illustrate the data for the 2010 birth cohort described on the prior page of this report. The 2010 birth cohort provides an opportunity to evaluate medical provider compliance with required blood lead testing for children between 9 to 35 months of age. The data indicate that healthcare providers are screening children for lead at least once by age three. However, efforts need to be made to remind healthcare providers of the requirement to test children under the age of three <u>annually</u>; 97.0% of children are tested for lead by age three at least one time, but only 51.5% are tested the required two times before turning three years of age.

A map (Map 2.) illustrating by town screening rates for the 2010 birth cohort is shown on next page. Looking more closely at lead screening rates by towns provides the Lead and Healthy Homes Program with the opportunity to evaluate healthcare provider practices in specific geographic areas. The program uses the data to inform and focus outreach efforts in collaboration with local health departments and district departments of health.



Map 2

Percent of Children Who Received Two Annual Lead Tests by Age 3* Connecticut Birth Cohort 2010





Figure 4. At least one screening by second birthday (0 to 23 months), birth cohort 2005 to 2011

Another method for evaluating the effectiveness of mandatory screening for young children is to compare blood lead testing rates between birth cohorts. Since every child should be tested annually between 9-35 months of age, then minimally, every child should have had at least one blood lead test by age two. Figure 4 illustrates the percentage of children who were tested for lead by their healthcare providers at least one time before turning two years old. After steady increases in the screening rates by second birthday for birth cohorts 2005 to 2009, a slightly decreased trend is observed in the 2010 and 2011 birth cohorts (illustrated by Figure 4 above).

Birth Cohort Analysis for Children under Six



Figure 5. Percentage of children who have had at least one screening by 72 months of age, by year of birth – Connecticut 2000-2007

Many children, prior to 2009, were not tested for lead before reaching three years of age. If a healthcare provider determines that a child older than three and under the age of six has never been tested for lead, the provider is then required to test that child. Therefore, an analysis of lead testing for birth cohorts that have reached six years of age by 2013 should also be considered. Figure 5 illustrates that, over time, more children under the age of six are being screened by healthcare providers, indicating that providers are complying with statutory requirements for testing older children who were previously never tested. The increase in blood lead screening among birth cohorts (illustrated by Figure 5 above) is also coupled with a decrease in childhood lead poisoning rates (page 19, Figure 7.) strongly suggesting that mandatory screening laws are an effective tool for reducing both the burden and incidence of childhood lead poisoning in Connecticut.

Our analysis shows 100.0% of children had at least one lead screening by 6 years of age among children born in 2007. The statistic method deployed is consistent with the CDC's methods for creating the childhood lead poisoning Nationally Consistent Data and Measures (Indicator: Blood Lead Levels by Birth Cohort.

<u>http://ephtracking.cdc.gov/showIndicatorPages.action</u>). Although by looking at each individual child, we identified some children born in Connecticut did not received a blood lead screening by age 6, we are unable to confirm if these children resided in Connecticut until age 6. As aforementioned CDC states that screening rates could be over 100% in some geographic areas using the CDC standard method. However, this statistic serves as an indicator for trends and progress in prevention of lead poisoning.

Part II. PREVALENCE OF CHILDHOOD LEAD POISONING

Prevalence of Childhood Lead Poisoning among Children under Six Years of Age

Prevalence of childhood lead poisoning is defined as the proportion of children under six years of age with a confirmed lead test in CY 2013 whose blood lead levels were $\geq 5 \ \mu g/dL$. The previous reference value in place since 1991 was 10 $\mu g/dL$. A growing body of research identified that blood lead levels below 10 $\mu g/dL$ can harm children in terms of their IQ, cognitive functions, and academic achievement. The CDC recommended a new "reference value" of 5 $\mu g/dL$, for lead poisoning among young children in May 2012. The State of Connecticut adopted the new reference value in May 2013. As such, Connecticut local health departments and district departments of health are required to initiate public health case management actions for children with a confirmed blood level of $\geq 5 \ \mu g/dL$.

Prevalence includes child lead poisoning cases that may have occurred prior to 2013, and remained lead poisoning cases into CY 2013.

Prevalence of Environmental Intervention Blood Lead Levels -

Prevalence of childhood lead poisoning cases of \geq 15 µg/dL is defined as the proportion of children under 6 years of age with a confirmed lead test in CY 2013 whose blood lead levels were \geq 15 µg/dL.

Prevalence of childhood lead poisoning cases $\geq 20 \ \mu g/dL$ is defined as the proportion of children under 6 years of age with a confirmed lead test in CY 2013 whose blood lead levels were $\geq 20 \ \mu g/dL$.

Response Policies for Actionable Blood Lead Levels in 2013 -

Per Connecticut General Statutes (CGS) sections 19a-110(d), and 19a-111, local health departments are responsible for responding to reported blood lead levels of 10 μ g/dL or more. With the adoption of new reference value of 5 μ g/dL, all local health departments/districts were required, by July 2013, to implement new response policy related to education and outreach at lower blood lead values. When a child's blood lead is at or above the action level, the local health department must provide the parent or guardian of the child with information describing the dangers of lead poisoning, precautions to reduce the risk of lead poisoning, information about potential eligibility for services under the Birth-to-Three Program, and laws and regulations pertaining to lead abatement. In addition to mandated response policies, local health departments also carry out lead poisoning <u>prevention</u> activities annually, enabled by CGS section 19a-111j.

Prevalence

A local health department must conduct an on-site comprehensive lead inspection and order the abatement of identified lead hazards for a child under 6 years of age, when that child has two venous blood lead levels of 15 to 19 μ g/dL for tests taken at least 3 months apart. When a child's venous blood lead level exceeds 20 μ g/dL, a local health department must conduct an epidemiological investigation (which includes an on-site comprehensive lead inspection and interviews with parents or caregivers to determine all potential sources of lead exposure) and order the abatement of the identified sources of lead exposure for that child.

Some local health departments opt to conduct investigations and order the abatement of identified lead hazards at lower levels of diagnosed lead poisoning. Those environmental data elements are also included in this report.



Figure 6. Number of children under 6 years of age diagnosed with lead poisoning, CY 2013

Number of children identified as lead poisoned in 2013:

- $2,275 \ge 5 \ \mu g/dL^{\ddagger}$
- 525 \geq 10 μ g/dL[§]
- 214 ≥15 μg/dL^{**}
- 111 ≥20 μg/dL

 ‡ Inclusive with blood lead levels $\geq \! 10~\mu g/dL$, $\geq \! 15~\mu g/dL$, and $\geq \! 20~\mu g/dL$

[§] Inclusive with blood lead levels \geq 15 µg/dL and \geq 20 µg/dL

^{**} Inclusive with blood lead levels \geq 20 µg/dL

Prevalence



Connecticut 1995-2013



Data of 1995-2001 are based on analysis using number of tests instead of number of children screened as the unit of analysis.

Data source of the 1995-2001 data is the previous published reports commonly known as Screening Data by Town.

Per CGS **Sec. 19a-110(d)**, "On and after January 1, 2012, if one per cent or more of children in this state under the age of six report blood lead levels equal to or greater than ten micrograms per deciliter, the director shall conduct such on-site inspection and order such remediation for any child having a confirmed venous blood lead level equal to or greater than ten micrograms per deciliter in two tests taken at least three months apart". Based on the 2013 blood lead surveillance, 0.7% of children under the age of six in Connecticut were diagnosed with a confirmed blood lead levels \geq 10 µg/dL. Since CY 2009, the prevalence of childhood lead poisoning cases of \geq 10 µg/dL has dropped below 1%.

The prevalence for children under 6 years of age with confirmed blood lead tests $\ge 5 \ \mu g/dL$ decreased by 0.1% from 2012 to 2013. The prevalence of $\ge 10 \ \mu g/dL$, $\ge 15 \ \mu g/dL$, and $\ge 20 \ \mu g/dL$ did not change from 2012 to 2013.





Starting in the 2012, blood lead levels of $\ge 5 \ \mu$ g/dL are added to this graph, because of the adoption of the new CDC reference value by the CT Department of Public Health. In CY 2013, 2,275 children under 6 years of age were identified with a blood lead level $\ge 5 \ \mu$ g/dL. Although the prevalence rate for blood lead levels of $\ge 5 \ \mu$ g/dL dropped from 3.1% to 3.0% from 2012 to 2013 as shown in Figure 7, there is a slight increase of 14 cases from 2012 to 2013.

The number of children under 6 years of age diagnosed with lead levels of $\geq 10 \ \mu$ g/dL decreased by 1,208 children over the past 10 year period. As the number of children tested increased in 2013, we observed a minor increase (3 children) diagnosed with lead levels of $\geq 10 \ \mu$ g/dL from CY 2012 to CY 2013.

Figure 9. Percentage and number of children under 6 years of age with blood lead levels ≥5 µg/dL– Connecticut 2013



In CY 2013, a total of 2,275 children under 6 years of age were identified with blood lead levels \geq 5 µg/dL, indicating some exposure to lead hazards. Among these children, the majority (2.3%) have a level between 5-9 µg/dL, while 11 children (<0.1%) had a chelation level \geq 45 µg/dL. *Detailed tables of this data are presented in Table 2 in the appendices.*

Мар 3.



Мар 4.



Part III. INCIDENCE OF CHILDHOOD LEAD POISONING

Incidence of Lead Poisoning among Children Under Six Years of Age

The incidence of lead poisoning cases (i.e., new cases of lead poisoning) is defined as the proportion of children under 6 years of age who had a confirmed lead test of $\geq 5 \ \mu g/dL$ for the first time in 2013 compared to all children under 6 years of age who were screened for lead in 2013 *AND* did not have a result of $\geq 5 \ \mu g/dL$ prior to 2013.

Incidence of Environmental Intervention Blood Lead Levels -

The incidence of lead poisoning cases of $\geq 15 \ \mu g/dL$ (i.e., new cases of blood lead $\geq 15 \ \mu g/dL$) is defined as the proportion of children under 6 years of age who had a confirmed lead test of $\geq 15 \ \mu g/dL$ for the first time in 2013 compared to all children under 6 years of age who were tested for lead in 2013 *AND* who had not had a result of $\geq 15 \ \mu g/dL$ prior to 2013.

The incidence of lead poisoning cases of $\ge 20 \ \mu g/dL$ (i.e., new cases of blood lead $\ge 20 \ \mu g/dL$) is defined as the proportion of children under 6 years of age who had a confirmed lead test of $\ge 20 \ \mu g/dL$ for the first time in 2013 compared to all children under 6 years of age who were screened for lead in 2013 *AND* who did not have a result of $\ge 20 \ \mu g/dL$ prior to 2013.



Blood Lead Levels

Figure 10. Incidence of lead poisoning among children under 6 years of age, by blood lead levels – Connecticut CY 2013

Number of new cases identified and incidence of lead poisoning in 2013:

- 1,677 (23 per 1,000) ≥5 μg/dL
- 166 (2 per 1,000) ≥15 μg/dL
- 86 (1 per 1,000) ≥20 μg/dL

For by town incidence of lead poisoning among children under 6 years of age, see Appendix Table 3.





- Of the 2,275 children who were found to have blood lead levels ≥5 µg/dL in 2013, 1677 (73.7%) were new cases.
- Of the 525 children who were found to have blood lead levels ≥10 µg/dL in 2013, 404 (77.0%) were new cases.
- Of the 214 children who were found to have blood lead levels ≥15 µg/dL in 2013, 166 (77.6%) were new cases.
- Of the 111 children who were found to have blood lead levels ≥20 µg/dL in 2013, 86 (77.5%) were new cases.

Figure 12. Incidence Rate of lead poisoning among children under 6 years of age, by blood lead levels – Connecticut CY 2004-2013



Among children under 6 years of age who had a confirmed blood lead test in 2013, 0.5%, 0.2%, and 0.1% of children were found to be a new case of $\geq 10 \ \mu\text{g/dL}$, $\geq 15 \ \mu\text{g/dL}$, and $\geq 20 \ \mu\text{g/dL}$ respectivly. A trend of gradual decreased incidence rates has been observed every few years for the incidence rates of $\geq 10 \ \mu\text{g/dL}$ and $\geq 15 \ \mu\text{g/dL}$ across years. The incidence rate for $\geq 20 \ \mu\text{g/dL}$ remains unchanged since 2009.
Incidence



Map6



Part IV. Demographic Characteristics Associated with Childhood Lead Poisoning

Race and Ethnicity

For the purposes of this report, children who were diagnosed with a blood lead level of $\geq 5 \ \mu g/dL$ are considered to be lead poisoned. The health disparities for lead poisoning among races and between Hispanic and non-Hispanic ethnicities remain in 2013. These health disparities were noticed in the first comprehensive annual lead surveillance report in 2004. The following figures portray the association between lead poisoning and race and ethnicity. They also indicate health disparities.

<u>Race</u>

Figure 12. Percentage of children under 6 years of age with a blood lead level $\ge 5 \mu g/dL$, by race – Connecticut CY 2013



Among children under 6 years of age who had a confirmed blood lead test in 2013, Blacks (5.9%) were twice as likely to be lead poisoned at levels of \geq 5 µg/dL when compared to Whites (2.5%) or Asians (2.1%). The health disparity for lead poisoning prevalence among White and Black children did not change between 2012 and 2013.

<u>Ethnicity</u>



Figure 13. Percentage of children under 6 years of age with a blood lead level $\ge 5 \mu g/dL$, by ethnicity – Connecticut CY 2013

Among children under 6 years of age who had a confirmed blood lead test in 2013, Hispanics (4.2%) were 1.5 times as likely to be lead poisoned at levels of $\geq 5 \ \mu g/dL$ than non-Hispanics (2.6%). The disparity in the lead poisoning prevalence between Hispanics and non-Hispanics did not change between 2012 and 2013.

Household Income below Poverty Level (Map 6)

A correlation between household incomes below poverty level and childhood lead poisoning is observed using geospatial illustration. Map 6 (page 35) depicts the overlay of lead poisoning cases and household incomes below poverty level. Hartford, Bridgeport, New Haven, and Waterbury are locations that have the highest number of households with incomes below poverty level, as well as the highest rates of childhood lead poisoning.

Pre-1978 housing (Map 7)

Lead-based paints were banned for residential use by 1978. The U.S. Environmental Protection Agency reports that 83% of homes built prior to 1980 contain some lead paint (*Report on the National Survey of Lead-Based Paint in Housing, Base Report*, EPA, 1995. EPA 747-R-95-003.). Older houses have an even higher probability of containing lead-based paint. In Connecticut, 46% of the housing stock was built before 1960 (*2010 American Community Survey 1-Year Estimates*, US Census, 2011). Map 7 (page 36) depicts childhood lead poisoning cases and pre-1960 housing.













PART V. ENVIRONMENTAL INVESTIGATIONS FOR CHILDREN WITH ENVIRONMENTAL INTERVENTION BLOOD LEAD LEVELS

Environmental Investigations

Per Connecticut General Statutes (CGS) sections 19a-110(d), and 19a-111, and the Lead Poisoning Prevention and Control Regulations (19a-111 et. seq.), local health departments are required to carry out comprehensive lead inspections at the residences of lead poisoned children. A comprehensive lead inspection includes the sampling of representative painted (or coated) surfaces of a dwelling unit, as well as the collection and analysis of dust, water, and exposed soil at the property.

When a child's venous blood lead level is reported as $\geq 20 \ \mu g/dL$, a local health department must conduct an epidemiological investigation and order the elimination (abatement) of the sources of lead exposure for that child. The investigation as to the sources of lead exposure may result in the health department conducting a lead inspection at more than one property, if that child is routinely cared for in alternate locations. Additionally, if a lead poisoned child moves to a new dwelling unit (while still poisoned), the new dwelling unit must also be inspected for lead hazards. If a child resides in more than one dwelling unit, multiple investigations are conducted for all the dwelling units where the lead poisoned child resides.

Some local health departments opt to conduct investigations and order remediation or abatement at lower levels of diagnosed lead poisoning. Those environmental data elements are also included in this report.

In 2013, 149 environmental cases were opened for children who had blood lead levels that triggered environmental intervention.

Among the 149 environmental cases opened, 139 properties required a comprehensive or limited lead inspection; ten of the homes were built after 1978. Of the 139 properties, 125 units received a comprehensive lead inspection, 12 properties received a limited inspection, and two refused entry. In order for a comprehensive inspection to be considered complete, the report must minimally include paint sampling, dust sampling, water analysis, and soil analysis results (where applicable) while for limited testing, the report must include dust sampling, water analysis, and soil analysis, and soil analysis results.

The analyses of the environmental findings below are based on the environmental investigation reports for the 137 dwelling units for which environmental investigations were conducted for lead poisoned children and where lead inspection reports were provided to the CT DPH.

<u>Housing style</u>

Of the 137 dwelling units inspected, 101 (73.7%) were multiple-unit dwellings, 24 (17.5%) were attached single family dwellings, and 12 (8.8%) were detached single family dwellings.





<u>Environmental lead hazards</u>

Children are most commonly exposed to lead from lead-based paint hazards. Lead-based paint hazards include defective painted surfaces, friction and chewable surfaces, lead-contaminated dust on interior floors and surfaces, and lead contaminated soil and water. Children are less frequently poisoned from herbal or ethnic remedies, imported cosmetics, and other miscellaneous lead-contaminated products and foods. A comprehensive lead inspection minimally consists of a lead paint inspection, as well as dust, soil, and water sampling and analyses. If other less common sources of lead exposure are identified during a comprehensive lead inspection or through conversations with a caregiver, those media are also collected, sampled and analyzed. The Lead and Healthy Homes Program collects, analyzes, and reports on data for the most common sources of lead exposure.

Of the 137 dwelling units for which lead inspection results were received, 118 (86.1%) were identified with at least one environmental lead hazard, and 19 (13.9%) had no identified environmental lead hazard. 39 of 68

Environmental lead hazards identified by source



Figure 15. Percentage of environmental lead hazards identified by source

Of the 137 dwelling units investigated and reported, a total of 111 (81.0%) were identified with a lead-based paint hazard, 69 (50.4%) were identified with a dust lead hazard, 45 (32.8%) were identified with a soil lead hazard, and 0 (0.0%) was identified with a lead in drinking water hazard.

Environmental lead hazards identified by existence of lead paint hazard



Figure 16. Percentage of environmental lead hazards related to paint or non-paint hazards

Of the 137 dwelling units for which investigations were completed, 36 (26.3%) dwelling units were identified with lead-based paint hazards only, 75 (54.7%) dwelling units were identified with both lead-based paint and non-paint hazards^{††}, 7 (5.1%) were identified with non-paint hazards only, and 19 (13.9%) had no environmental lead hazard.

⁺⁺ Non-paint hazards consist of lead dust, lead in soil, or lead in water.

Reported abatement and management activities

A health department is required to issue an order to the property owner to abate the lead-based paint hazards identified during the comprehensive lead inspection. The dwelling unit, common areas, ancillary structures (garages/sheds), and exterior exposed soil areas may undergo lead abatement if a lead hazard was identified on the property during the comprehensive lead inspection. Intact lead-based paint surfaces that remain in the home must be placed on a management plan to ensure that they remain intact, and do not become a lead hazard and future source of exposure for occupants.

Through the lead inspection report information provided to the CT DPH, the Lead and Healthy Homes Program identified 363 dwelling units (including cases carried forward from previous years) that remained open environmental cases in 2013.



Figure 17. Abatement and management activities among dwelling units requiring abatement of lead hazards

Among the 364 dwelling units for which abatement of lead hazards was required in 2013, 74 units started lead abatement in 2013 and 91 units were completed in 2013.



Figure 18. Number of days to complete abatement among dwelling units completed abatement of lead hazards in 2013

Among the 91 dwelling units where lead abatement was completed in 2013, it took property owners between 17 to 1975 days to complete the work. The broad range of time it takes to complete abatement is dependent on factors such as the level of lead abatement needed at a property, the willingness of a property owner to comply with health orders and the enforcement of orders issued by a Director of Health. Fifty of the 91 property owners completed lead abatement within one year.





Intact lead-based paint and encapsulated surfaces must be placed on a lead management plan. Of the 91 dwelling units for which lead abatement was completed in 2013, 59 (64.8%) of the dwelling units required lead management plans, 26 (28.6%) did not require lead management plans, and the status of 6 (6.6%) dwelling units was not reported.

Part VI. Appendices

Table 1. By town screening for children under age 6 and 9 months to 2 years old – Connecticut CY 2013

		Number of Children Under Age 6 Screened Number	Population* Age 9 months- 2 yrs.	Number and Percent of Childi Number	ren Age 9ms-2yrs Screened Percent
	Connecticut				
	CY 2002*	69,857	88,094	40,452	45.9
	CY 2003*	67,592	88,094	38,742	44.0
	CY 2004*	68,606	88,094	39,894	45.3
	CY 2005*	69,263	88,094	42,954	48.8
	CY 2006*	69,315	88,094	43,193	49.0
	CY 2007*	72,088	88,094	45,037	51.1
	CY 2008*	76,722	88,094	48,594	55.2
	CY 2009*	85,354	88,094	54,106	61.4
	CY 2010*	82,194	79,676	52,744	66.2
	CY 2011	77,423	82,765	55,960	67.6
	CY 2012	75,569	80,411	54,524	67.8
	CY 2013	75,749	78,288	55,862	71.4
	By-Town, CY 2013				
1	ANDOVER	35	45	25	56
2	ANSONIA	500	495	358	72
3	ASHFORD	68	87	58	67
4	AVON	241	239	187	78
5	BARKHAMSTED	40	39	33	85
6	BEACON FALLS	83	96	57	59
7	BERLIN	243	313	206	66
8	BETHANY	63	75	60	80
9	BETHEL	337	330	288	87

		Number of Children Under Age 6 Screened Number	Population* Age 9 months- 2 yrs.	Number and Percent of Children Age 9ms-2yrs Screened Number Percent				
10	BETHLEHEM	39	42	24	57			
11	BLOOMFIELD	339	410	283	69			
12	BOLTON	64	71	51	72			
13	BOZRAH	20	38	17	45			
14	BRANFORD	373	436	346	79			
15	BRIDGEPORT	6254	4531	3652	81			
16	BRIDGEWATER	6	13	6	46			
17	BRISTOL	990	1377	800	58			
18	BROOKFIELD	226	252	187	74			
19	BROOKLYN	150	139	96	69			
20	BURLINGTON	133	131	104	79			
21	CANAAN	10	26	7	27			
22	CANTERBURY	78	77	61	79			
23	CANTON	143	160	104	65			
24	CHAPLIN	29	44	25	57			
25	CHESHIRE	287	364	238	65			
26	CHESTER	56	57	53	93			
27	CLINTON	188	196	181	92			
28	COLCHESTER	205	316	173	55			
29	COLEBROOK	3	15	2	13			
30	COLUMBIA	70	95	63	66			
31	CORNWALL	19	17	18	100‡			
32	COVENTRY	194	235	167	71			
33	CROMWELL	276	344	254	74			
34	DANBURY	2262	2161	1715	79			

		Number of Children Under Age 6 Screened Number	Population* Age 9 months- 2 yrs.	Number and Percent of Children Age 9ms-2yrs Screened Number Percent				
35	DARIEN	459	485	375	77			
36	DEEP RIVER	59	75	59	79			
37	DERBY	288	298	210	70			
38	DURHAM	112	122	101	83			
39	EAST GRANBY	80	112	60	54			
40	EAST HADDAM	112	147	104	71			
41	EAST HAMPTON	187	309	175	57			
42	EAST HARTFORD	1254	1405	947	67			
43	EAST HAVEN	490	560	409	73			
44	EAST LYME	224	238	182	76			
45	EAST WINDSOR	168	267	132	49			
46	EASTFORD	19	22	16	73			
47	EASTON	82	83	73	88			
48	ELLINGTON	260	319	195	61			
49	ENFIELD	733	778	501	64			
50	ESSEX	70	81	66	81			
51	FAIRFIELD	944	1022	847	83			
52	FARMINGTON	366	412	278	67			
53	FRANKLIN	16	28	13	46			
54	GLASTONBURY	389	508	324	64			
55	GOSHEN	31	28	30	100‡			
56	GRANBY	131	145	105	72			
57	GREENWICH	1205	1166	1063	91			
58	GRISWOLD	220	234	166	71			
59	GROTON	1146	1139	845	74			

		Number of Children Under Age 6 Screened Number	Population* Age 9 months- 2 yrs.	Number and Percent of Children Age 9ms-2yrs Screened Number Percent				
60	GUILFORD	211	267	195	73			
61	HADDAM	118	157	115	73			
62	HAMDEN	1011	1289	862	67			
63	HAMPTON	28	31	25	81			
64	HARTFORD	4652	4224	3193	76			
65	HARTLAND	19	27	17	63			
66	HARWINTON	68	71	59	83			
67	HEBRON	85	156	75	48			
68	KENT	26	31	25	81			
69	KILLINGLY	455	332	279	84			
70	KILLINGWORTH	74	78	68	87			
71	LEBANON	81	119	73	61			
72	LEDYARD	281	316	228	72			
73	LISBON	32	67	27	40			
74	LITCHFIELD	76	105	63	60			
75	LYME & OLD LYME $^{\beta}$	117	101	107	100‡			
76	MADISON	199	196	190	97			
77	MANCHESTER	1356	1703	1060	62			
78	MANSFIELD	149	191	129	68			
79	MARLBOROUGH	68	91	64	70			
80	MERIDEN	1829	1635	1204	74			
81	MIDDLEBURY	100	118	64	54			
82	MIDDLEFIELD	44	75	40	53			
83	MIDDLETOWN	968	1251	872	70			
84	MILFORD	890	1042	726	70			

		Number of Children Under Age 6 Screened Number	Population* Age 9 months- 2 yrs.	Number and Percent of Childi Number	ren Age 9ms-2yrs Screened Percent
85	MONROE	274	284	240	85
86	MONTVILLE	312	357	254	71
87	MORRIS	28	37	23	62
88	NAUGATUCK	642	792	435	55
89	NEW BRITAIN	2772	2462	1696	69
90	NEW CANAAN	370	410	333	81
91	NEW FAIRFIELD	179	180	151	84
92	NEW HARTFORD	79	113	69	61
93	NEW HAVEN	4678	4047	3069	76
94	NEW LONDON	745	731	526	72
95	NEW MILFORD	455	502	408	81
96	NEWINGTON	368	589	312	53
97	NEWTOWN	308	370	283	76
98	NORFOLK	14	19	11	58
99	NORTH BRANFORD	189	214	170	79
100	NORTH CANAAN	25	46	19	41
101	NORTH HAVEN	359	405	309	76
102	NORTH STONINGTON	78	60	63	100‡
103	NORWALK	2314	2571	1783	69
104	NORWICH	1019	1078	677	63
105	OLD LYME & LYME $^{\beta}$	117	101	107	100‡
106	OLD SAYBROOK	124	128	115	90
107	ORANGE	185	188	162	86
108	OXFORD	185	220	154	70
109	PLAINFIELD	341	316	239	76

		Number of Children Under Age 6 Screened Number	Population* Age 9 months- 2 yrs.	Number and Percent of Children Age 9ms-2yrs Screened Number Percent				
110	PLAINVILLE	295	377	228	60			
111	PLYMOUTH	159	235	115	49			
112	POMFRET	86	71	51	72			
113	PORTLAND	142	185	134	72			
114	PRESTON	57	68	52	76			
115	PROSPECT	95	130	67	52			
116	PUTNAM	268	182	174	96			
117	REDDING	92	119	83	70			
118	RIDGEFIELD	361	372	306	82			
119	ROCKY HILL	361	427	307	72			
120	ROXBURY	19	26	19	73			
121	SALEM	46	61	36	59			
122	SALISBURY	18	42	14	33			
123	SCOTLAND	10	28	10	36			
124	SEYMOUR	333	348	279	80			
125	SHARON	17	26	15	58			
126	SHELTON	623	735	558	76			
127	SHERMAN	24	32	23	72			
128	SIMSBURY	254	349	221	63			
129	SOMERS	132	101	86	85			
130	SOUTH WINDSOR	331	422	285	68			
131	SOUTHBURY	166	224	155	69			
132	SOUTHINGTON	500	742	375	51			
133	SPRAGUE	72	60	56	93			
134	STAFFORD	196	218	160	73			

		Number of Children Under Age 6 Screened Number	Population* Age 9 months- 2 yrs.	Number and Percent of Children Age 9ms-2yrs Screened Number Percent				
135	STAMFORD	3704	4218	2948	70			
136	STERLING	73	47	44	94			
137	STONINGTON	233	145	189	130			
138	STRATFORD	1080	1157	836	72			
139	SUFFIELD	156	153	105	69			
140	THOMASTON	117	131	74	56			
141	THOMPSON	185	110	113	100‡			
142	TOLLAND	221	216	184	85			
143	TORRINGTON	500	773	453	59			
144	TRUMBULL	537	553	475	86			
145	UNION	10	15	10	67			
146	VERNON	649	815	492	60			
147	VOLUNTOWN	37	41	25	61			
148	WALLINGFORD	820	845	619	73			
149	WARREN	3	13	3	23			
150	WASHINGTON	35	50	32	64			
151	WATERBURY	4505	3210	2116	66			
152	WATERFORD	277	297	188	63			
153	WATERTOWN	330	367	204	56			
154	WEST HARTFORD	974	1320	824	62			
155	WEST HAVEN	1360	1458	1002	69			
156	WESTBROOK	91	95	86	91			
157	WESTON	112	109	103	94			
158	WESTPORT	411	356	356	100			
159	WETHERSFIELD	427	581	376	65			

		Number of Children Under Age 6 Screened Number	Population* Age 9 months- 2 yrs.	Number and Percent of Childr Number	ren Age 9ms-2yrs Screened Percent
160	WILLINGTON	89	86	73	85
161	WILTON	263	303	233	77
162	WINCHESTER	150	208	130	63
163	WINDHAM	566	631	507	80
164	WINDSOR	412	560	310	55
165	WINDSOR LOCKS	166	229	126	55
166	WOLCOTT	191	235	115	49
167	WOODBRIDGE	115	119	101	85
168	WOODBURY	110	131	87	66
169	WOODSTOCK	134	90	78	87

NOTE: Children are counted only once, regardless of the number of times they are tested.

- Population estimate is based on vital registry for birth cohorts 2010 and 2011. Children 9 months to 11 months old who were tested in 2013 were added to the population denominator.
- * Screening rates for CY 2002 to CY 2010 are based on number of children who were 1 or 2 years old at time of screening. These statistics were reported in previous annual reports
- ‡ Screening rate rounded down to 100%.
- $^{\beta}$ Lyme and Old Lyme are combined because residents of Lyme are often reported as residing in Old Lyme.

<u>Table 2. Percent of Children with a Blood Lead Level 0-4 μ g/dL and Cumulative Percent of Children with a blood lead level of \geq 5 μ g/dL among children under 6 years of age, by Blood Lead Categories</u>

			Numbers and Percents of Confirmed Blood Lead Levels										
				amo	ng Children A	Aged Less Th	nan Six Years	with a Conf	irmed Lead T	est			
		Number of Children				Cumulative Statistics							
	CY 2013 Data (<6 years old)	with Confirmed Test	0–4 μg/dL		≥ 5 μg/dL		≥ 10 µg/dL		≥ 15 µg/dL		≥ 20 μg/dL		
			Number	%	Number	%	Number	%	Number	%	Number	%	
Connecticut									_	_			
	CY 2002	69,062					1,733	2.5			353	0.5	
CY 2003 66,847						1,445	2.2			272	0.4		
	CY 2004	67,688					1,472	2.2			288	0.4	
	CY 2005	68,757					1,263	1.8			212	0.3	
	CY 2006	68,828					1,082	1.6	415	0.6	215	0.3	
	CY 2007	71,627					1,020	1.4	445	0.6	208	0.3	
	CY 2008	76,367					1,054	1.4	448	0.6	221	0.3	
	CY 2009	85,138					737	0.9	308	0.4	153	0.2	
	CY 2010	81,999	76.598	93.4	5,401*	6.6	743	0.9	315	0.4	156	0.2	
	CY 2011	77,306	72,322	93.6	4,984*	6.4*	619	0.8	264	0.3	111	0.1	
	CY2012	73,785	71,524	96.9	2,261	3.1	522	0.7	196	0.3	107	0.1	
	CY2013	74,636	72,361	97.0	2,275	3.0	525	0.7	214	0.3	111	0.1	
	By-Town						1				i		
1	ANDOVER	35	34	97.1	1	2.9	1	2.9	0	0	0	0	
2	ANSONIA	487	467	95.9	20	4.1	4	0.8	2	0.4	1	0.2	
3	ASHFORD	68	67	98.5	1	1.5	1	1.5	0	0	0	0	
4	AVON	240	239	99.6	1	0.4	1	0.4	1	0.4	1	0.4	
5	BARKHAMSTED	39	39	100	0	0	0	0	0	0	0	0	
6	BEACON FALLS	82	80	97.6	2	2.4	1	1.2	1	1.2	1	1.2	
7	BERLIN	242	239	98.8	3	1.2	1	0.4	0	0	0	0	

* Capillary tests \geq 5 µg/dL were treated as confirmatory tests based on previous confirmatory definition

					Numbers	and Percent	s of Confirme	d Blood Lead	d Levels				
		Number of	<u> </u>	amo	ing Children A	ig Children Aged Less Than Six Years with a Confirmed Lead Test							
		Children					<u></u>	Cumulativ	re Statistics	<u>}</u>			
	CY 2013 Data (<6 years old)	Confirmed Test	0–4 µ	ıg/dL	≥5 µ	lg/dL	≥ 10 j	µg/dL	≥ 15 µ	ıg/dL	≥ 20 µ	.g/dL	
			Number	%	Number	%	Number	%	Number	%	Number	%	
8	BETHANY	61	60	98.4	1	1.6	1	1.6	0	0	0	0	
9	BETHEL	335	332	99.1	3	0.9	0	0	0	0	0	0	
10	BETHLEHEM	39	39	100	0	0	0	0	0	0	0	0	
11	BLOOMFIELD	334	324	97	10	3	1	0.3	0	0	0	0	
12	BOLTON	63	63	100	0	0	0	0	0	0	0	0	
13	BOZRAH	20	20	100	0	0	0	0	0	0	0	0	
14	BRANFORD	367	364	99.2	3	0.8	1	0.3	1	0.3	1	0.3	
15	BRIDGEPORT	6,156	5,754	93.5	402	6.5	81	1.3	33	0.5	16	0.3	
16	BRIDGEWATER	6	6	100	0	0	0	0	0	0	0	0	
17	BRISTOL	975	951	97.5	24	2.5	9	0.9	4	0.4	2	0.2	
18	BROOKFIELD	222	221	99.5	1	0.5	1	0.5	0	0	0	0	
19	BROOKLYN	148	146	98.6	2	1.4	1	0.7	0	0	0	0	
20	BURLINGTON	133	132	99.2	1	0.8	0	0	0	0	0	0	
21	CANAAN	10	7	70	3	30	0	0	0	0	0	0	
22	CANTERBURY	78	74	94.9	4	5.1	1	1.3	1	1.3	0	0	
23	CANTON	142	142	100	0	0	0	0	0	0	0	0	
24	CHAPLIN	29	29	100	0	0	0	0	0	0	0	0	
25	CHESHIRE	286	285	99.7	1	0.3	0	0	0	0	0	0	
26	CHESTER	55	52	94.5	3	5.5	0	0	0	0	0	0	
27	CLINTON	187	184	98.4	3	1.6	0	0	0	0	0	0	
28	COLCHESTER	201	201	100	0	0	0	0	0	0	0	0	
29	COLEBROOK	3	2	66.7	1	33.3	0	0	0	0	0	0	
30	COLUMBIA	69	69	100	0	0	0	0	0	0	0	0	
31	CORNWALL	18	16	88.9	2	11.1	0	0	0	0	0	0	
32	COVENTRY	193	192	99.5	1	0.5	0	0	0	0	0	0	
33	CROMWELL	276	273	98.9	3	1.1	1	0.4	0	0	0	0	

					Numbers	and Percent	s of Confirme	ed Blood Lea	d Levels				
		Number of	<u></u>	amo	Ig Children Aged Less Than Six Years with a Confirmed Lead Test								
		Children			Cumulative Statistics								
	CY 2013 Data (<6 years old)	with Confirmed Test	04 J	ıg/dL	≥ 5 µ	ւg/dL	≥ 10 ₁	μg/dL	≥ 15 į	μg/dL	≥ 20 µ	g/dL	
			Number	%	Number	%	Number	%	Number	%	Number	%	
34	DANBURY	2,233	2,205	98.7	28	1.3	7	0.3	3	0.1	3	0.1	
35	DARIEN	457	456	99.8	1	0.2	0	0	0	0	0	0	
36	DEEP RIVER	56	54	96.4	2	3.6	0	0	0	0	0	0	
37	DERBY	277	268	96.8	9	3.2	3	1.1	1	0.4	1	0.4	
38	DURHAM	110	109	99.1	1	0.9	1	0.9	0	0	0	0	
39	EAST GRANBY	78	78	100	0	0	0	0	0	0	0	0	
40	EAST HADDAM	110	109	99.1	1	0.9	0	0	0	0	0	0	
41	EAST HAMPTON	183	179	97.8	4	2.2	0	0	0	0	0	0	
42	EAST HARTFORD	1,245	1,223	98.2	22	1.8	9	0.7	2	0.2	2	0.2	
43	EAST HAVEN	485	473	97.5	12	2.5	3	0.6	1	0.2	0	0	
44	EAST LYME	220	218	99.1	2	0.9	1	0.5	0	0	0	0	
45	EAST WINDSOR	167	164	98.2	3	1.8	1	0.6	1	0.6	0	0	
46	EASTFORD	19	19	100	0	0	0	0	0	0	0	0	
47	EASTON	81	81	100	0	0	0	0	0	0	0	0	
48	ELLINGTON	260	259	99.6	1	0.4	0	0	0	0	0	0	
49	ENFIELD	730	718	98.4	12	1.6	2	0.3	1	0.1	1	0.1	
50	ESSEX	69	69	100	0	0	0	0	0	0	0	0	
51	FAIRFIELD	937	931	99.4	6	0.6	1	0.1	0	0	0	0	
52	FARMINGTON	363	362	99.7	1	0.3	0	0	0	0	0	0	
53	FRANKLIN	16	16	100	0	0	0	0	0	0	0	0	
54	GLASTONBURY	388	385	99.2	3	0.8	0	0	0	0	0	0	
55	GOSHEN	30	30	100	0	0	0	0	0	0	0	0	
56	GRANBY	129	127	98.4	2	1.6	0	0	0	0	0	0	
57	GREENWICH	1,192	1,184	99.3	8	0.7	4	0.3	2	0.2	2	0.2	
58	GRISWOLD	219	207	94.5	12	5.5	1	0.5	1	0.5	1	0.5	
59	GROTON	1,133	1,128	99.6	5	0.4	3	0.3	1	0.1	0	0	

					Numbers	and Percent	s of Confirme	ed Blood Lea	d Levels			
		Number of		amo	ng Children /	Aged Less Tr	han Six Years	s with a Confi	rmed Lead T	est		
	CY 2013 Data	Children with						Cumulativ	e Statistics	6		
	(<6 years old)	Confirmed Test	0–4 µ	ւg/dL	≥5 µ	g/dL	≥ 10	μg/dL	≥ 15 j	ıg/dL	≥ 20 µ	g/dL
			Number	%	Number	%	Number	%	Number	%	Number	%
60	GUILFORD	208	207	99.5	1	0.5	1	0.5	0	0	0	0
61	HADDAM	116	114	98.3	2	1.7	1	0.9	1	0.9	1	0.9
62	HAMDEN	1,001	980	97.9	21	2.1	6	0.6	1	0.1	1	0.1
63	HAMPTON	28	27	96.4	1	3.6	0	0	0	0	0	0
64	HARTFORD	4,587	4,426	96.5	161	3.5	32	0.7	17	0.4	12	0.3
65	HARTLAND	19	19	100	0	0	0	0	0	0	0	0
66	HARWINTON	67	67	100	0	0	0	0	0	0	0	0
67	HEBRON	81	81	100	0	0	0	0	0	0	0	0
68	KENT	26	25	96.2	1	3.8	0	0	0	0	0	0
69	KILLINGLY	448	439	98	9	2	2	0.4	1	0.2	0	0
70	KILLINGWORTH	73	73	100	0	0	0	0	0	0	0	0
71	LEBANON	81	79	97.5	2	2.5	0	0	0	0	0	0
72	LEDYARD	279	279	100	0	0	0	0	0	0	0	0
73	LISBON	32	32	100	0	0	0	0	0	0	0	0
74	LITCHFIELD	72	70	97.2	2	2.8	0	0	0	0	0	0
75	LYME	1	1	100	0	0	0	0	0	0	0	0
76	MADISON	199	199	100	0	0	0	0	0	0	0	0
77	MANCHESTER	1,349	1,323	98.1	26	1.9	11	0.8	6	0.4	2	0.1
78	MANSFIELD	147	146	99.3	1	0.7	0	0	0	0	0	0
79	MARLBOROUGH	67	67	100	0	0	0	0	0	0	0	0
80	MERIDEN	1,814	1,712	94.4	102	5.6	30	1.7	11	0.6	5	0.3
81	MIDDLEBURY	98	96	98	2	2	0	0	0	0	0	0
82	MIDDLEFIELD	43	43	100	0	0	0	0	0	0	0	0
83	MIDDLETOWN	959	934	97.4	25	2.6	3	0.3	1	0.1	0	0
84	MILFORD	879	872	99.2	7	0.8	1	0.1	0	0	0	0
85	MONROE	271	271	100	0	0	0	0	0	0	0	0

		Numbers and Percents of Confirmed Blood Lead Levels												
		Normalia an af	<u></u>	amo	ng Children A	Aged Less Th	nan Six Years	with a Confi	irmed Lead T	est				
		Children		Cumulative Statistics										
	CY 2013 Data (<6 years old)	with Confirmed Test	0–4 µg/dL		≥5 µ	≥ 5 μg/dL		≥ 10 µg/dL		≥15 µg/dL		g/dL		
			Number	%	Number	%	Number	%	Number	%	Number	%		
86	MONTVILLE	311	306	98.4	5	1.6	1	0.3	1	0.3	1	0.3		
87	MORRIS	28	28	100	0	0	0	0	0	0	0	0		
88	NAUGATUCK	635	616	97	19	3	7	1.1	1	0.2	0	0		
89	NEW BRITAIN	2,748	2,660	96.8	88	3.2	15	0.5	8	0.3	4	0.1		
90	NEW CANAAN	366	365	99.7	1	0.3	1	0.3	1	0.3	0	0		
91	NEW FAIRFIELD	179	178	99.4	1	0.6	0	0	0	0	0	0		
92	NEW HARTFORD	76	75	98.7	1	1.3	0	0	0	0	0	0		
93	NEW HAVEN	4,519	4,114	91	405	9	91	2	36	0.8	20	0.4		
94	NEW LONDON	726	689	94.9	37	5.1	6	0.8	1	0.1	1	0.1		
95	NEW MILFORD	451	448	99.3	3	0.7	1	0.2	1	0.2	0	0		
96	NEWINGTON	366	363	99.2	3	0.8	0	0	0	0	0	0		
97	NEWTOWN	306	302	98.7	4	1.3	1	0.3	0	0	0	0		
98	NORFOLK	11	10	90.9	1	9.1	0	0	0	0	0	0		
99	NORTH BRANFORD	187	186	99.5	1	0.5	0	0	0	0	0	0		
100	NORTH CANAAN	24	24	100	0	0	0	0	0	0	0	0		
101	NORTH HAVEN	357	354	99.2	3	0.8	1	0.3	1	0.3	1	0.3		
102	NORTH STONINGTON	77	74	96.1	3	3.9	0	0	0	0	0	0		
103	NORWALK	2,285	2,234	97.8	51	2.2	11	0.5	3	0.1	3	0.1		
104	NORWICH	1,007	951	94.4	56	5.6	17	1.7	8	0.8	4	0.4		
105	OLD LYME	115	112	97.4	3	2.6	1	0.9	0	0	0	0		
106	OLD SAYBROOK	123	122	99.2	1	0.8	0	0	0	0	0	0		
107	ORANGE	182	182	100	0	0	0	0	0	0	0	0		
108	OXFORD	181	178	98.3	3	1.7	0	0	0	0	0	0		
109	PLAINFIELD	330	321	97.3	9	2.7	2	0.6	1	0.3	0	0		
110	PLAINVILLE	294	290	98.6	4	1.4	0	0	0	0	0	0		
111	PLYMOUTH	157	155	98.7	2	1.3	1	0.6	0	0	0	0		

			Numbers and Percents of Confirmed Blood Lead Levels												
		Number of		amo	ng Children A	Aged Less Th	an Six Years	with a Confi	rmed Lead T	est					
		Children		Cumulative Statistics											
	CY 2013 Data (<6 years old)	Confirmed Test	0-4 μ	0–4 μg/dL		≥ 5 μg/dL		≥ 10 µg/dL		≥ 15 μg/dL		≥ 20 µg/dL			
			Number	%	Number	%	Number	%	Number	%	Number	%			
112	POMFRET	86	81	94.2	5	5.8	1	1.2	0	0	0	0			
113	PORTLAND	138	137	99.3	1	0.7	0	0	0	0	0	0			
114	PRESTON	57	57	100	0	0	0	0	0	0	0	0			
115	PROSPECT	95	95	100	0	0	0	0	0	0	0	0			
116	PUTNAM	262	252	96.2	10	3.8	1	0.4	1	0.4	1	0.4			
117	REDDING	91	91	100	0	0	0	0	0	0	0	0			
118	RIDGEFIELD	358	357	99.7	1	0.3	0	0	0	0	0	0			
119	ROCKY HILL	356	349	98	7	2	2	0.6	0	0	0	0			
120	ROXBURY	19	19	100	0	0	0	0	0	0	0	0			
121	SALEM	46	46	100	0	0	0	0	0	0	0	0			
122	SALISBURY	17	15	88.2	2	11.8	1	5.9	0	0	0	0			
123	SCOTLAND	10	9	90	1	10	0	0	0	0	0	0			
124	SEYMOUR	329	325	98.8	4	1.2	2	0.6	1	0.3	0	0			
125	SHARON	17	15	88.2	2	11.8	0	0	0	0	0	0			
126	SHELTON	613	608	99.2	5	0.8	0	0	0	0	0	0			
127	SHERMAN	24	24	100	0	0	0	0	0	0	0	0			
128	SIMSBURY	252	250	99.2	2	0.8	1	0.4	0	0	0	0			
129	SOMERS	129	127	98.4	2	1.6	1	0.8	1	0.8	1	0.8			
130	SOUTH WINDSOR	329	323	98.2	6	1.8	2	0.6	1	0.3	0	0			
131	SOUTHBURY	166	165	99.4	1	0.6	0	0	0	0	0	0			
132	SOUTHINGTON	499	497	99.6	2	0.4	0	0	0	0	0	0			
133	SPRAGUE	71	67	94.4	4	5.6	0	0	0	0	0	0			
134	STAFFORD	188	178	94.7	10	5.3	0	0	0	0	0	0			
135	STAMFORD	3,662	3,612	98.6	50	1.4	9	0.2	2	0.1	1	0			
136	STERLING	72	71	98.6	1	1.4	0	0	0	0	0	0			
137	STONINGTON	229	223	97.4	6	2.6	1	0.4	0	0	0	0			

		Numbers and Percents of Confirmed Blood Lead Levels												
		Number of	1	amo	ng Children A	Aged Less If	an Six Years with a Confirmed Lead Test							
		Children					1	Cumulativ	<u>re Statistics</u>	3	1			
	CY 2013 Data (<6 years old)	Confirmed Test	0–4 µg/dL		≥ 5 μg/dL		≥ 10 µg/dL		≥ 15 µg/dL		≥ 20 μg/dL			
			Number	%	Number	%	Number	%	Number	%	Number	%		
138	STRATFORD	1,070	1,047	97.9	23	2.1	2	0.2	0	0	0	0		
139	SUFFIELD	151	149	98.7	2	1.3	0	0	0	0	0	0		
140	THOMASTON	115	113	98.3	2	1.7	0	0	0	0	0	0		
141	THOMPSON	185	174	94.1	11	5.9	2	1.1	1	0.5	1	0.5		
142	TOLLAND	220	219	99.5	1	0.5	0	0	0	0	0	0		
143	TORRINGTON	473	439	92.8	34	7.2	11	2.3	3	0.6	0	0		
144	TRUMBULL	535	530	99.1	5	0.9	3	0.6	2	0.4	0	0		
145	UNION	9	8	88.9	1	11.1	0	0	0	0	0	0		
146	VERNON	638	616	96.6	22	3.4	3	0.5	0	0	0	0		
147	VOLUNTOWN	37	36	97.3	1	2.7	0	0	0	0	0	0		
148	WALLINGFORD	813	803	98.8	10	1.2	4	0.5	1	0.1	1	0.1		
149	WARREN	3	3	100	0	0	0	0	0	0	0	0		
150	WASHINGTON	34	33	97.1	1	2.9	0	0	0	0	0	0		
151	WATERBURY	4,381	4,152	94.8	229	5.2	56	1.3	28	0.6	14	0.3		
152	WATERFORD	270	270	100	0	0	0	0	0	0	0	0		
153	WATERTOWN	323	318	98.5	5	1.5	1	0.3	0	0	0	0		
154	WEST	961	948	98.6	13	1.4	3	0.3	0	0	0	0		
155	WEST HAVEN	1.346	1.305	97	41	3	16	1.2	10	0.7	2	0.1		
156	WESTBROOK	89	85	95.5	4	4.5	1	1.1	0	0	0	0		
157	WESTON	111	111	100	0	0	0	0	0	0	0	0		
158	WESTPORT	406	405	99.8	1	0.2	0	0	0	0	0	0		
159	WETHERSFIELD	425	424	99.8	1	0.2	0	0	0	0	0	0		
160	WILLINGTON	88	88	100	0	0	0	0	0	0	0	0		
161	WILTON	259	258	99.6	1	0.4	0	0	0	0	0	0		
162	WINCHESTER	144	133	92.4	11	7.6	3	2.1	2	1.4	0	0		
163	WINDHAM	548	526	96	22	4	10	1.8	3	0.5	1	0.2		

				amo	Numbers	and Percent	s of Confirme	ed Blood Lea s with a Conf	d Levels irmed Lead T	est			
		Number of Children			Cumulative Statistics								
	CY 2013 Data (<6 years old)	with Confirmed Test	0–4 µg/dL		≥5 μg/dL		≥ 10	μg/dL	≥ 15 _I	ug/dL	≥ 20 µg/dL		
			Number	%	Number	%	Number	%	Number	%	Number	%	
164	WINDSOR	410	404	98.5	6	1.5	1	0.2	0	0	0	0	
165	WINDSOR LOCKS	162	159	98.1	3	1.9	2	1.2	2	1.2	2	1.2	
166	WOLCOTT	187	186	99.5	1	0.5	0	0	0	0	0	0	
167	WOODBRIDGE	115	114	99.1	1	0.9	0	0	0	0	0	0	
168	WOODBURY	110	108	98.2	2	1.8	1	0.9	0	0	0	0	
169	WOODSTOCK	131	130	99.2	1	0.8	0	0	0	0	0	0	

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Table 3. Incidence of lead poisoning among children under six years of age, by town and by blood lead levels – Connecticut CY 2013

			Numbers and Percents of New Confirmed Blood Lead Levels											
	CY 2013 Data	Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 5 μg/dL	≥ 5 µg/dL Incidence (%)	Number of Children with BLL ≥ 10 μ g/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 10 μg/dL	≥ 10 μg/dL Incidence (%)	Number of Children with BLL ≥ 15 μg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 15 μg/dL	≥15 μg/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 20 μg/dL	≥ 20 μg/dL Incidence (%)	
	Connecticut													
		1,677	73,878	2.3	404	75,088	0.5	166	75,437	0.2	86	75,569	0.1	
	By-Town													
1	ANDOVER	1	35	2.9	1	35	2.9	0	35	0.0	0	35	0.0	
2	ANSONIA	11	474	2.3	3	489	0.6	2	496	0.4	1	497	0.2	
3	ASHFORD	1	68	1.5	1	68	1.5	0	68	0.0	0	68	0.0	
4	AVON	1	240	0.4	1	241	0.4	1	241	0.4	1	241	0.4	
5	BARKHAMSTED	0	40	0	0	40	0.0	0	40	0.0	0	40	0.0	
6	BEACON FALLS	0	80	0	0	81	0.0	0	82	0.0	0	82	0.0	
7	BERLIN	2	241	0.8	1	243	0.4	0	243	0.0	0	243	0.0	
8	BETHANY	0	61	0	1	63	1.6	0	63	0.0	0	63	0.0	
9	BETHEL	2	332	0.6	0	335	0.0	0	336	0.0	0	336	0.0	
10	BETHLEHEM	0	39	0	0	39	0.0	0	39	0.0	0	39	0.0	
11	BLOOMFIELD	6	333	1.8	0	336	0.0	0	336	0.0	0	338	0.0	
12	BOLTON	0	64	0	0	64	0.0	0	64	0.0	0	64	0.0	
13	BOZRAH	0	20	0	0	20	0.0	0	20	0.0	0	20	0.0	
14	BRANFORD	2	370	0.5	0	372	0.0	0	372	0.0	0	372	0.0	
15	BRIDGEPORT	275	5875	4.7	66	6133	1.1	26	6192	0.4	13	6223	0.2	
16	BRIDGEWATER	0	6	0	0	6	0.0	0	6	0.0	0	6	0.0	
17	BRISTOL	21	981	2.1	8	989	0.8	4	989	0.4	2	990	0.2	
18	BROOKFIELD	1	226	0.4	1	226	0.4	0	226	0.0	0	226	0.0	
19	BROOKLYN	1	149	0.7	1	149	0.7	0	150	0.0	0	150	0.0	
20	BURLINGTON	1	133	0.8	0	133	0.0	0	133	0.0	0	133	0.0	
21	CANAAN	2	8	25	0	9	0.0	0	9	0.0	0	10	0.0	
22	CANTERBURY	4	77	5.2	1	78	1.3	1	78	1.3	0	78	0.0	
23	CANTON	0	140	0	0	143	0.0	0	143	0.0	0	143	0.0	
24	CHAPLIN	0	28	0	0	29	0.0	0	29	0.0	0	29	0.0	

					Numbe	ers and Perc	ents of Ne	w Confirme	d Blood Lea	d Levels			
	CY 2013 Data	Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 5 μg/dL	≥5 μg/dL Incidence (%)	Number of Children with BLL ≥ 10 μg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥10 μg/dL	≥ 10 μg/dL Incidence (%)	Number of Children with BLL ≥ 15 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 15 μg/dL	≥15 μ g/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 20 μg/dL	≥ 20 μg/dL Incidence (%)
25	CHESHIRE	1	287	0.3	0	287	0.0	0	287	0.0	0	287	0.0
26	CHESTER	3	55	5.5	0	56	0.0	0	56	0.0	0	56	0.0
27	CLINTON	2	187	1.1	0	188	0.0	0	188	0.0	0	188	0.0
28	COLCHESTER	0	203	0	0	204	0.0	0	205	0.0	0	205	0.0
29	COLEBROOK	1	3	33.3	0	3	0.0	0	3	0.0	0	3	0.0
30	COLUMBIA	0	70	0	0	70	0.0	0	70	0.0	0	70	0.0
31	CORNWALL	2	19	10.5	0	19	0.0	0	19	0.0	0	19	0.0
32	COVENTRY	1	194	0.5	0	194	0.0	0	194	0.0	0	194	0.0
33	CROMWELL	1	272	0.4	1	275	0.4	0	276	0.0	0	276	0.0
34	DANBURY	23	2208	1	6	2249	0.3	3	2257	0.1	3	2261	0.1
35	DARIEN	1	456	0.2	0	457	0.0	0	459	0.0	0	459	0.0
36	DEEP RIVER	2	59	3.4	0	59	0.0	0	59	0.0	0	59	0.0
37	DERBY	7	275	2.5	1	285	0.4	0	287	0.0	0	287	0.0
38	DURHAM	0	111	0	0	111	0.0	0	111	0.0	0	111	0.0
39	EAST GRANBY	0	80	0	0	80	0.0	0	80	0.0	0	80	0.0
40	EAST HADDAM	1	112	0.9	0	112	0.0	0	112	0.0	0	112	0.0
41	EAST HAMPTON	4	186	2.2	0	186	0.0	0	186	0.0	0	187	0.0
42	EAST HARTFORD	15	1223	1.2	6	1247	0.5	2	1248	0.2	2	1251	0.2
43	EAST HAVEN	6	483	1.2	3	487	0.6	1	490	0.2	0	490	0.0
44	EAST LYME	1	223	0.4	0	223	0.0	0	223	0.0	0	223	0.0
45	EAST WINDSOR	3	168	1.8	1	168	0.6	1	168	0.6	0	168	0.0
46	EASTFORD	0	19	0	0	19	0.0	0	19	0.0	0	19	0.0
47	EASTON	0	81	0	0	81	0.0	0	81	0.0	0	81	0.0
48	ELLINGTON	1	259	0.4	0	260	0.0	0	260	0.0	0	260	0.0
49	ENFIELD	7	720	1	1	729	0.1	0	731	0.0	0	732	0.0
50	ESSEX	0	69	0	0	70	0.0	0	70	0.0	0	70	0.0
51	FAIRFIELD	5	940	0.5	1	941	0.1	0	944	0.0	0	944	0.0
52	FARMINGTON	1	366	0.3	0	366	0.0	0	366	0.0	0	366	0.0

					Numbe	ers and Perc	ents of Ne	w Confirme	d Blood Lea	d Levels			
CY 2013 Data		Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 5 μg/dL	≥ 5 μg/dL Incidence (%)	Number of Children with BLL ≥ 10 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥10 μg/dL	≥ 10 μg/dL Incidence (%)	Number of Children with BLL ≥ 15 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 15 μg/dL	≥ 15 μ g/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 20 µg/dL	≥ 20 μ g/dL Incidence (%)
53	FRANKLIN	0	16	0	0	16	0.0	0	16	0.0	0	16	0.0
54	GLASTONBURY	2	388	0.5	0	389	0.0	0	389	0.0	0	389	0.0
55	GOSHEN	0	31	0	0	31	0.0	0	31	0.0	0	31	0.0
56	GRANBY	1	129	0.8	0	131	0.0	0	131	0.0	0	131	0.0
57	GREENWICH	8	1201	0.7	4	1203	0.3	2	1204	0.2	2	1204	0.2
58	GRISWOLD	12	217	5.5	1	219	0.5	1	219	0.5	1	219	0.5
59	GROTON	5	1141	0.4	3	1143	0.3	1	1144	0.1	0	1144	0.0
60	GUILFORD	1	209	0.5	1	211	0.5	0	211	0.0	0	211	0.0
61	HADDAM	1	117	0.9	0	117	0.0	0	117	0.0	0	117	0.0
62	HAMDEN	18	1000	1.8	5	1006	0.5	1	1010	0.1	1	1011	0.1
63	HAMPTON	0	27	0	0	28	0.0	0	28	0.0	0	28	0.0
64	HARTFORD	109	4450	2.4	22	4595	0.5	11	4627	0.2	7	4635	0.2
65	HARTLAND	0	19	0	0	19	0.0	0	19	0.0	0	19	0.0
66	HARWINTON	0	67	0	0	68	0.0	0	68	0.0	0	68	0.0
67	HEBRON	0	85	0	0	85	0.0	0	85	0.0	0	85	0.0
68	KENT	1	26	3.8	0	26	0.0	0	26	0.0	0	26	0.0
69	KILLINGLY	8	450	1.8	2	454	0.4	1	455	0.2	0	455	0.0
70	KILLINGWORTH	0	74	0	0	74	0.0	0	74	0.0	0	74	0.0
71	LEBANON	2	80	2.5	0	81	0.0	0	81	0.0	0	81	0.0
72	LEDYARD	0	280	0	0	281	0.0	0	281	0.0	0	281	0.0
73	LISBON	0	31	0	0	31	0.0	0	32	0.0	0	32	0.0
74	LITCHFIELD	2	75	2.7	0	76	0.0	0	76	0.0	0	76	0.0
75	LYME	0	1	0	0	1	0.0	0	1	0.0	0	1	0.0
76	MADISON	0	199	0	0	199	0.0	0	199	0.0	0	199	0.0
77	MANCHESTER	20	1329	1.5	9	1347	0.7	6	1353	0.4	2	1353	0.1
78	MANSFIELD	1	148	0.7	0	148	0.0	0	149	0.0	0	149	0.0
79	MARLBOROUGH	0	68	0	0	68	0.0	0	68	0.0	0	68	0.0
80	MERIDEN	75	1766	4.2	21	1805	1.2	11	1814	0.6	5	1822	0.3
81	MIDDLEBURY	2	99	2	0	100	0.0	0	100	0.0	0	100	0.0
					Numbe	ers and Perc	ents of Ne	w Confirme	d Blood Lea	d Levels			
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	CY 2013 Data	Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 5 μg/dL	≥ 5 µg/dL Incidence (%)	Number of Children with BLL ≥ 10 µ g/dL For the First Time	Total # Children Screened with No Previous BLL of ≥10 µg/dL	≥ 10 μg/dL Incidence (%)	Number of Children with BLL ≥ 15 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 15 μg/dL	≥15 µg/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 20 μ g/dL	≥ 20 μg/dL Incidence (%)
82	MIDDLEFIELD	0	42	0	0	43	0.0	0	43	0.0	0	44	0.0
83	MIDDLETOWN	23	960	2.4	3	965	0.3	1	968	0.1	0	968	0.0
84	MILFORD	7	887	0.8	1	889	0.1	0	890	0.0	0	890	0.0
85	MONROE	0	274	0	0	274	0.0	0	274	0.0	0	274	0.0
86	MONTVILLE	3	308	1	1	311	0.3	1	311	0.3	1	312	0.3
87	MORRIS	0	28	0	0	28	0.0	0	28	0.0	0	28	0.0
88	NAUGATUCK	14	628	2.2	5	634	0.8	0	639	0.0	0	641	0.0
89	NEW BRITAIN	60	2657	2.3	10	2735	0.4	6	2757	0.2	3	2761	0.1
90	NEW CANAAN	1	370	0.3	1	370	0.3	1	370	0.3	0	370	0.0
91	NEW FAIRFIELD	1	179	0.6	0	179	0.0	0	179	0.0	0	179	0.0
92	NEW HARTFORD	0	78	0	0	78	0.0	0	79	0.0	0	79	0.0
93	NEW HAVEN	296	4427	6.7	70	4566	1.5	24	4625	0.5	13	4644	0.3
94	NEW LONDON	31	723	4.3	6	735	0.8	1	742	0.1	1	743	0.1
95	NEW MILFORD	3	451	0.7	1	455	0.2	1	455	0.2	0	455	0.0
96	NEWINGTON	3	365	0.8	0	367	0.0	0	368	0.0	0	368	0.0
97	NEWTOWN	4	308	1.3	1	308	0.3	0	308	0.0	0	308	0.0
98	NORFOLK	1	14	7.1	0	14	0.0	0	14	0.0	0	14	0.0
99	NORTH BRANFORD	0	186	0	0	187	0.0	0	189	0.0	0	189	0.0
100	NORTH CANAAN	0	25	0	0	25	0.0	0	25	0.0	0	25	0.0
101	NORTH HAVEN	3	358	0.8	1	359	0.3	1	359	0.3	1	359	0.3
102	NORTH STONINGTON	3	77	3.9	0	77	0.0	0	77	0.0	0	77	0.0
103	NORWALK	43	2275	1.9	10	2306	0.4	3	2309	0.1	3	2313	0.1
104	NORWICH	41	989	4.1	14	1009	1.4	7	1014	0.7	3	1016	0.3
105	OLD LYME	3	116	2.6	1	116	0.9	0	116	0.0	0	116	0.0
106	OLD SAYBROOK	1	124	0.8	0	124	0.0	0	124	0.0	0	124	0.0
107	ORANGE	0	184	0	0	185	0.0	0	185	0.0	0	185	0.0
108	OXFORD	3	183	1.6	0	184	0.0	0	185	0.0	0	185	0.0

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			Numbers and Percents of New Confirmed Blood Lead Levels										
	CY 2013 Data	Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 5 μg/dL	≥ 5 μ g/dL Incidence (%)	Number of Children with BLL ≥ 10 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 10 μg/dL	≥ 10 μg/dL Incidence (%)	Number of Children with BLL ≥ 15 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 15 μg/dL	≥ 15 μg/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 20 μg/dL	≥ 20 μg/dL Incidence (%)
109	PLAINFIELD	8	339	2.4	1	340	0.3	1	341	0.3	0	341	0.0
110	PLAINVILLE	4	292	1.4	0	293	0.0	0	295	0.0	0	295	0.0
111	PLYMOUTH	1	157	0.6	1	158	0.6	0	158	0.0	0	158	0.0
112	POMFRET	4	84	4.8	0	84	0.0	0	86	0.0	0	86	0.0
113	PORTLAND	1	142	0.7	0	142	0.0	0	142	0.0	0	142	0.0
114	PRESTON	0	57	0	0	57	0.0	0	57	0.0	0	57	0.0
115	PROSPECT	0	95	0	0	95	0.0	0	95	0.0	0	95	0.0
116	PUTNAM	7	261	2.7	0	265	0.0	0	266	0.0	0	266	0.0
117	REDDING	0	91	0	0	92	0.0	0	92	0.0	0	92	0.0
118	RIDGEFIELD	1	359	0.3	0	361	0.0	0	361	0.0	0	361	0.0
119	ROCKY HILL	7	360	1.9	2	361	0.6	0	361	0.0	0	361	0.0
120	ROXBURY	0	19	0	0	19	0.0	0	19	0.0	0	19	0.0
121	SALEM	0	46	0	0	46	0.0	0	46	0.0	0	46	0.0
122	SALISBURY	2	17	11.8	1	18	5.6	0	18	0.0	0	18	0.0
123	SCOTLAND	1	10	10	0	10	0.0	0	10	0.0	0	10	0.0
124	SEYMOUR	3	331	0.9	1	332	0.3	0	332	0.0	0	333	0.0
125	SHARON	2	17	11.8	0	17	0.0	0	17	0.0	0	17	0.0
126	SHELTON	5	622	0.8	0	623	0.0	0	623	0.0	0	623	0.0
127	SHERMAN	0	24	0	0	24	0.0	0	24	0.0	0	24	0.0
128	SIMSBURY	2	253	0.8	1	254	0.4	0	254	0.0	0	254	0.0
129	SOMERS	1	130	0.8	1	131	0.8	1	131	0.8	1	132	0.8
130	SOUTH WINDSOR	4	329	1.2	1	329	0.3	0	330	0.0	0	330	0.0
131	SOUTHBURY	1	166	0.6	0	166	0.0	0	166	0.0	0	166	0.0
132	SOUTHINGTON	2	497	0.4	0	498	0.0	0	499	0.0	0	499	0.0
133	SPRAGUE	3	71	4.2	0	71	0.0	0	72	0.0	0	72	0.0
134	STAFFORD	8	192	4.2	0	195	0.0	0	196	0.0	0	196	0.0
135	STAMFORD	40	3655	1.1	8	3693	0.2	1	3699	0.0	0	3703	0.0
136	STERLING	1	70	1.4	0	72	0.0	0	73	0.0	0	73	0.0

		Numbers and Percents of New Confirmed Blood Lead Levels											
	CY 2013 Data	Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 5 μg/dL	≥ 5 µg/dL Incidence (%)	Number of Children with BLL ≥ 10 µ g/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 10 μg/dL	≥ 10 μg/dL Incidence (%)	Number of Children with BLL ≥ 15 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 15 μ g/dL	≥15 μg/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 20 μg/dL	≥ 20 μg/dL Incidence (%)
137	STONINGTON	6	230	2.6	1	231	0.4	0	232	0.0	0	233	0.0
138	STRATFORD	16	1059	1.5	2	1075	0.2	0	1076	0.0	0	1079	0.0
139	SUFFIELD	2	156	1.3	0	156	0.0	0	156	0.0	0	156	0.0
140	THOMASTON	2	117	1.7	0	117	0.0	0	117	0.0	0	117	0.0
141	THOMPSON	9	179	5	2	181	1.1	1	184	0.5	1	185	0.5
142	TOLLAND	1	221	0.5	0	221	0.0	0	221	0.0	0	221	0.0
143	TORRINGTON	28	493	5.7	8	495	1.6	1	496	0.2	0	496	0.0
144	TRUMBULL	4	535	0.7	2	536	0.4	1	536	0.2	0	536	0.0
145	UNION	1	10	10	0	10	0.0	0	10	0.0	0	10	0.0
146	VERNON	18	637	2.8	3	643	0.5	0	647	0.0	0	647	0.0
147	VOLUNTOWN	1	37	2.7	0	37	0.0	0	37	0.0	0	37	0.0
148	WALLINGFORD	9	816	1.1	3	818	0.4	1	820	0.1	1	820	0.1
149	WARREN	0	3	0	0	3	0.0	0	3	0.0	0	3	0.0
150	WASHINGTON	1	32	3.1	0	35	0.0	0	35	0.0	0	35	0.0
151	WATERBURY	157	4293	3.7	40	4419	0.9	23	4463	0.5	13	4478	0.3
152	WATERFORD	0	276	0	0	277	0.0	0	277	0.0	0	277	0.0
153	WATERTOWN	5	327	1.5	1	330	0.3	0	330	0.0	0	330	0.0
154	WEST HARTFORD	11	965	1.1	2	971	0.2	0	972	0.0	0	974	0.0
155	WEST HAVEN	31	1327	2.3	15	1353	1.1	10	1357	0.7	2	1358	0.1
156	WESTBROOK	3	89	3.4	0	89	0.0	0	91	0.0	0	91	0.0
157	WESTON	0	112	0	0	112	0.0	0	112	0.0	0	112	0.0
158	WESTPORT	1	410	0.2	0	411	0.0	0	411	0.0	0	411	0.0
159	WETHERSFIELD	1	425	0.2	0	426	0.0	0	426	0.0	0	426	0.0
160	WILLINGTON	0	86	0	0	87	0.0	0	89	0.0	0	89	0.0
161	WILTON	1	263	0.4	0	263	0.0	0	263	0.0	0	263	0.0
162	WINCHESTER	7	145	4.8	1	147	0.7	1	148	0.7	0	150	0.0
163	WINDHAM	13	549	2.4	5	556	0.9	2	563	0.4	1	565	0.2

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		Numbers and Percents of New Confirmed Blood Lead Levels											
CY 2013 Data		Number of Children with BLL ≥ 5 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 5 μg/dL	≥ 5 μg/dL Incidence (%)	Number of Children with BLL ≥ 10 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 10 μg/dL	≥ 10 μg/dL Incidence (%)	Number of Children with BLL ≥ 15 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 15 μg/dL	≥ 15 μ g/dL Incidence (%)	Number of Children with BLL ≥ 20 µg/dL For the First Time	Total # Children Screened with No Previous BLL of ≥ 20 μg/dL	≥ 20 μg/dL Incidence (%)
164	WINDSOR	4	408	1	1	411	0.2	0	411	0.0	0	412	0.0
165	WINDSOR LOCKS	3	164	1.8	2	166	1.2	2	166	1.2	2	166	1.2
166	WOLCOTT	0	189	0	0	189	0.0	0	190	0.0	0	190	0.0
167	WOODBRIDGE	0	112	0	0	114	0.0	0	114	0.0	0	115	0.0
168	WOODBURY	2	109	1.8	1	110	0.9	0	110	0.0	0	110	0.0
169	WOODSTOCK	1	131	0.8	0	131	0.0	0	131	0.0	0	132	0.0





Hands and toys can become contaminated from household dust or exterior soil. Regularly wash children's hands and toys can help prevent lead poisoning.

The children in the photos in this report are **not** lead poisoned. The goal of the Department of Public Health is for all children to be safe from lead poisoning.

Additional lead poisoning data can be found at http://www.ct.gov/dph/lead

