

New effort to cover up impact of lead poisoning in Flint

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At an annual meeting of doctors at Hurley Medical Center in Flint, Michigan, a resolution was reportedly adopted declaring that henceforth Hurley doctors would collectively stop using the term “lead poisoned,” instead would use “lead-exposed” when referring to the water crisis in the city. This was announced on the Hurley Medical Center Facebook page and reported by local media.

According to the post on Facebook, “As advocates for their patients they collectively resolved for a more proper communication so as to reduce the further stigmatization of a generation of children growing up in the City of Flint.”

Dr. Mona Hanna-Attisha was not in attendance at the meeting. The next day, she expressed her opposition to the resolution: “FYI, I completely disagree with this resolution (which I understand did NOT pass) and with these ongoing and misguided efforts to minimize the crisis.” She also was cited in the local media, “Our water was poisoned. That is scientifically proven.”

Hanna-Attisha is the Hurley pediatrician who conducted the September 2015 study of the spike in Flint children’s blood-lead levels during the state-mandated water source switch to corrosive Flint River water. Her findings eventually forced the governor to return the city to its original water source.

The doctors’ meeting took place on Wednesday, May 16 and was reported in the press on May 18. Dr. Hernan Gomez from the University of Michigan, Flint presented a report based on a paper published in the June *Journal of Pediatrics*. This paper, titled, “Blood Lead Levels of Children in Flint, Michigan: 2006-2016,” claimed among other things, that “...changes in GM BLLs [geometric mean blood lead levels] in young children in Flint, Michigan, during the Flint River water exposure did not meet the level of an environmental emergency.”

Gomez’ conclusion in the paper’s abstract states: “These findings suggest that the 11 year trend of annual decreases in BLLs in children in Flint, Michigan, reversed to a degree consistent with random variation from 2010 to 2011, and again during the exposure to Flint River water in 2014-2015. Historically, public health efforts to reduce BLLs of young children in Flint have been effective over the 11-year period studied.”

In plain English, Gomez praises state officials who enforced and covered up the criminally negligent decision to pump Flint River water without proper treatment into the homes of 100,000 residents, for their “efforts to reduce the blood-lead levels of young children.” For close to two years, these officials responded with indifference and outright lies to the complaints and protests by residents about the foul water coming from their taps.

On the face of it, the broader timeframe of the data Gomez

presents—from 2006 to 2016—would seem to present a more objective picture of lead poisoning in Flint. But what it actually does is give the doctor a pretext to call the spike in the number of children with elevated blood-lead levels that Hanna-Attisha’s study uncovered merely a “random fluctuation.” This is almost the textbook definition of a smokescreen.

To understand what has happened, one needs an even broader historical context of lead poisoning in America. Blood-lead levels in the US have fallen drastically since the removal of lead from gasoline and paint.

The WSWS wrote on this two years ago:

It is true that recent years have seen a reduction in the blood-lead levels of children—the most vulnerable of the population to lead poisoning—due largely to the efforts of Dr. Herbert Needleman of the University of Pittsburgh. Through his research, Needleman became alarmed and animated when he discovered the extent of the deleterious and irreversible effects of lead poisoning, especially when exposed to children.

Needleman was instrumental in ending the use of lead in gasoline after testifying before Congress in 1979. The banning of lead in paint and in plumbing followed later. In a 1991 appearance before Congress, Needleman warned that the danger wasn’t over. Pointing out that 17 percent of Americans had a blood-lead level of 15µg/dL and higher, he insisted that more work must be done. He compared the fight against lead poisoning to the elimination of smallpox, insisting that lead poisoning could be eliminated if it were attacked with similar determination.

In a late March op-ed piece published in the *Detroit Free Press*, Hanna-Attisha asks, “How many children have to be poisoned for something to become an “environmental emergency”? When it comes to lead, a potent, irreversible neurotoxin that is proven to have no safe level, even one child is too many.”

Answering Gomez’s use of the statistical evidence showing blood-lead levels dropping in 2016, Hanna-Attisha writes, “Of course it has. This is largely because of our response to the water crisis—alerting the public in September 2015, switching the water source back from the Flint River to the Lake Huron water source in early October and beginning to provide filters and bottled water the same month.”

Gomez’ paper appeared in the June issue of *Journal of Pediatrics*, with an accompanying op-ed written by Dr. William Banner titled,

“‘Toxicohistrionics’: Flint and the Lead Crisis,” endorsing Gomez’ paper.

In his op-ed, Banner asserts that the Flint water crisis “entered the public realm through news outlets rather than the scientific literature. On September 24, 2015 [the day Hanna-Attisha announced the results of her study], data released to the public triggered a media firestorm.” Assuming the mantle of a reasonable scientist opposing the “mob” of public opinion is a complete reversal of reality. If it was not for the outraged public outcry that found expression in the media, the so-called scientists in the state agencies responsible for health and safety of the public would be continuing to poison the population.

“These are clearly designed to minimize what happened in Flint,” Dr. Bruce Lanphear told the *World Socialist Web Site*. “Banner earns much of his income as a ‘rented white coat,’” he said, using a term for industry-funded “scientists” who produce studies and papers that in one way or another serve corporate interests.

Dr. Lanphear is a professor in the Health Sciences faculty of Simon Fraser University in Burnaby, British Columbia. For 25 years he has studied the effects of neurotoxins including lead, pesticides, mercury, alcohol, PCB’s and environmental tobacco smoke on fetal and early childhood health. Through his work with the Centers for Disease Control and Prevention (CDC), Lanphear is responsible for the federal agency’s determination that there is no safe level of lead in children’s bloodstreams.

Lanphear explained, “Banner testified on behalf of Sherwin-Williams Paint Company in a 2005-06 trial in which he said that there is no evidence that lead in children’s blood led to neurological damage.

“It’s common to give testimony in court cases. I’ve done it many times, but I either do it pro bono or if there is payment involved, it goes into a fund where it will benefit children who are harmed,” Lanphear said.

“I’d recommend that you ask William Balistreri, editor-in-chief of the *Journal* if there is a financial conflict of interest.” Balistreri himself “receives grants from Gilead Sciences, Abbvie, and Merk; serves on a data and safety monitoring board for Otsuka; and serves as a consultant for Alexion.” [from *The Journal of Pediatrics* conflicts of interest page]

“When it [*Journal of Pediatrics*] is purported to be a scientific journal, yet articles are funded by industry, it’s a problem,” Lanphear said.

There is no question that there is immense political pressure to “move on” from the disaster in Flint. For a medical doctor, a toxicologist and a scientist to be focused on combatting “reinforcement of stereotypes that already exist,” under the pretense that he is protecting children has the character of a wolf in sheep’s clothing. This is really an attempt to change the narrative and downplay the significance of what was done to Flint and is being uncovered in water systems all over the country.

In order to further the rewriting of the lead poisoning “episode” in Flint, sleight of hand is used by Gomez. For example, he calls the action level for elevated blood-lead level of 5 µg/dL a “reference range and not an indicator of poisoning.” This is false. The 5µg/dL level is considered “elevated.” Studies such as Hanna-Attisha’s base themselves on comparisons of the number of children/patients with an “elevated blood-lead level” (EBLL). That threshold is *exactly* a measurement of lead poisoning.

Another false premise is that “Past studies demonstrating that lead poisoning had effected IQ or criminal behavior were studies that

measured lead levels, IQ and criminal behavior over the entire lifetime of a child. It can’t be ascertained from a single point in time due to an exposure to lead.” Hardly a better example could be made up of minimizing the danger of lead poisoning! In fact, this is the argument put forward by Dr. Banner, the “expert witness” for Sherwin-Williams paint company.

Following from that premise is spun the most bare-faced of lies: **“Not a single child in the City of Flint has been lead poisoned from the water switch. Rather, they were lead exposed.”** [our emphasis] To the people of Flint, that is beneath replying to. Tell that to LeeAnne Walters, Keri Webber, Nakiya Wakes and the thousands of other Flint residents and their children who have suffered the effects!

Dr. Lanphear added, “Yes, it is true that blood lead levels have come down. But it is proven that every six years, 24 million IQ points are lost at the lowest level of exposure to lead. While children of two-to-three months are the most vulnerable, children aren’t the only ones vulnerable to lead poisoning.

“In the US, 400,000 premature deaths occur every year as a result of lead. Of those, 250,000 are cardiovascular-related. And of those, 185,000 are coronary-related. The idea that the public can be protected by playing these dangers down is just false.

“Despite the relatively recent drop in blood lead levels touted by many, today the average blood-lead levels of children are 10 to 100 times higher than our pre-industrial ancestors.”

The resolution’s claim that telling the truth somehow “stigmatizes” a whole generation of children is utterly false, and repeats the assertion made by President Obama in May 2016 when he declared that the children of Flint would be “just fine” and that every one of the president’s generation “got some lead in their system when they were growing up.” He added, “I don’t want anybody to start thinking that somehow all the kids in Flint are going to have problems for the rest of their lives, because that’s not true.”

The belittling of the scope of public health disaster by the president and other officials served to justify their continued indifference and refusal to provide the necessary lifelong resources needed to address the consequences of this social crime.

See: Dr. Lanphear’s video “Little Things Matter: The Impact of Toxic Chemicals on the Developing Brain.”



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