9-2007

Lead-Contaminated Candies in Southern Nevada

Shawn Gerstenberger  
*University of Nevada, Las Vegas, shawn.gerstenberger@unlv.edu*

Glenn Savage  
*Southern Nevada Health District*

Clayton Sellers  
*Southern Nevada Health District*

Keith Zupnik  
*Southern Nevada Health District*

Emmanuel C. Gorospe  
*University of Nevada, Las Vegas*

Follow this and additional works at: [http://digitalscholarship.unlv.edu/env_occ_health_fac_articles](http://digitalscholarship.unlv.edu/env_occ_health_fac_articles)

Part of the [Community-Based Research Commons](http://digitalscholarship.unlv.edu/commdev), [Food Science Commons](http://digitalscholarship.unlv.edu/food), [Medicine and Health Commons](http://digitalscholarship.unlv.edu/med), [Public Health Commons](http://digitalscholarship.unlv.edu/pubhealth), and the [Toxicology Commons](http://digitalscholarship.unlv.edu/toxicology)

**Citation Information**  
[http://digitalscholarship.unlv.edu/env_occ_health_fac_articles/28](http://digitalscholarship.unlv.edu/env_occ_health_fac_articles/28)

This Article is brought to you for free and open access by the Environmental and Occupational Health at Digital Scholarship@UNLV. It has been accepted for inclusion in Environmental & Occupational Health Faculty Publications by an authorized administrator of Digital Scholarship@UNLV. For more information, please contact [digitalscholarship@unlv.edu](mailto:digitalscholarship@unlv.edu).
LEAD-CONTAMINATED CANDIES IN SOUTHERN NEVADA

Lead-contaminated candies from Latin America are beginning to gain attention in the public media1,2 and in the medical literature.3–5 These candies come from a number of sources and are manufactured outside Food and Drug Administration regulatory control. In 2005, we sampled 50 imported Latin American candies sold in Southern Nevada. A total of 20 (40%) tested positive with an average lead content of 1.46 ± 0.27 mg/kg in the candies’ wrappers and straws, based on standard Graphite Furnace Atomic Absorption Spectrophotometry methodology. Given these results, the Southern Nevada Health District issued a cease-and-desist order on February 13, 2006, to local commercial establishments selling imported Latin American candies.

Parallel with our efforts to eliminate lead-contaminated candies, the Southern Nevada Lead Poisoning Prevention Program identified 13 children whose increased blood lead levels (BLLs) were likely associated with the consumption of such candies. These cases were initially diagnosed by local physicians whose referrals resulted in home lead-risk investigations, where we encountered lead-tainted candies.

Childhood lead poisoning is an important health disparities issue that affects children of Hispanic communities in the U.S.6,7 In our ongoing Lead Poisoning Prevention program, 23 of our total cases (88%) are Hispanic.8 Among the 13 children with elevated BLLs and a history of imported candy consumption, 10 (77%) are also of Hispanic descent. Despite the present ban, many of these lead-tainted candies are still sold in flea markets and brought to Nevada by merchants and families returning to the U.S. from Latin America, as we have encountered in our home investigations.

A stronger collaboration among clinicians, public health personnel, and the local community is needed to effectively address this emerging problem. Our current efforts are directed to reaching the growing Hispanic community in Southern Nevada through education, blood lead screening of high-risk children, and increased surveillance of lead-containing food products. Similar to other reports,19 our preliminary data suggest that lead-tainted candy wrappers, straws, and containers may likely be sources of lead toxicity. Further investigation is needed to elucidate the effects of lead-tainted candy wrappers and their contribution to childhood lead poisoning.

This work was funded in part by a grant from the Centers for Disease Control and Prevention (grant #1H64EH000145-01) entitled the Clark County Childhood Lead Poisoning Prevention Program.

Shawn L. Gerstenberger, PhD a
Glenn Savage, BS, REHS b
Clayton Sellers, MS b
Keith Zupnik, MD, REHS b
Emmanuel C. Gorospe, MD a

aUniversity of Nevada Las Vegas School of Public Health, Department of Environmental and Occupational Health, Las Vegas, NV
bSouthern Nevada Health District, Environmental Health Division, Las Vegas, NV

REFERENCES