



Lead Contamination of Imported Goods

Research Paper

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EM 532, Productivity and Quality Engineering
December 11, 2007



Outline

- Introduction
- Problem Size
- Recall Variance
- Health Effects
- Biological Impact of Lead
- Blood Lead Level
- Cases
- Detection Methods
- Laws and Regulations
- Governmental Roles
- Industry Roles
- Location of Contamination
- Regulation Enforcement
- Recommendations



Introduction

- Multiple toy recalls in 2007 due to lead paint
- Apply quality engineering techniques to solve problem

Problem Size

- 74 toy recalls in 2007
- 38 recalls due to lead paint levels
- All recalled toys were produced in China and Hong Kong
- No injuries or incidents from recalled toys
- Pareto Analysis
- CPSC published list of recalled toys

FOR IMMEDIATE RELEASE
November 7, 2007
Release #08-072

Firm's Recall Hotline: (800) 767-8697
CPSC Recall Hotline: (800) 638-2772
CPSC Media Contact: (301) 504-7900

Schylling Associates Recalls Collectable Toy Robot Due To Violation of Lead Paint Standard

WASHINGTON, D.C. - The U.S. Consumer Product Safety Commission, in cooperation with the firm named below, today announced a voluntary recall of the following consumer products. Consumers should stop using recalled products immediately unless otherwise instructed.

Name of Product: "Robot 2000" collectable tin robot

Units: About 2,600

Importer: Schylling Associates Inc., of Rowley, Mass.

Hazard: Surface paints on the robot contain excessive levels of lead, which violates the federal lead paint standard.

Incidents/Injuries: None reported.

Description: The "Robot 2000" is a battery-operated, tin robot standing 12" tall. It has a red light on the head and chest panels that open.

Sold at: Specialty toy stores and gift shops nationwide from October 2006 through September 2007 for about \$25.

Manufactured in: China

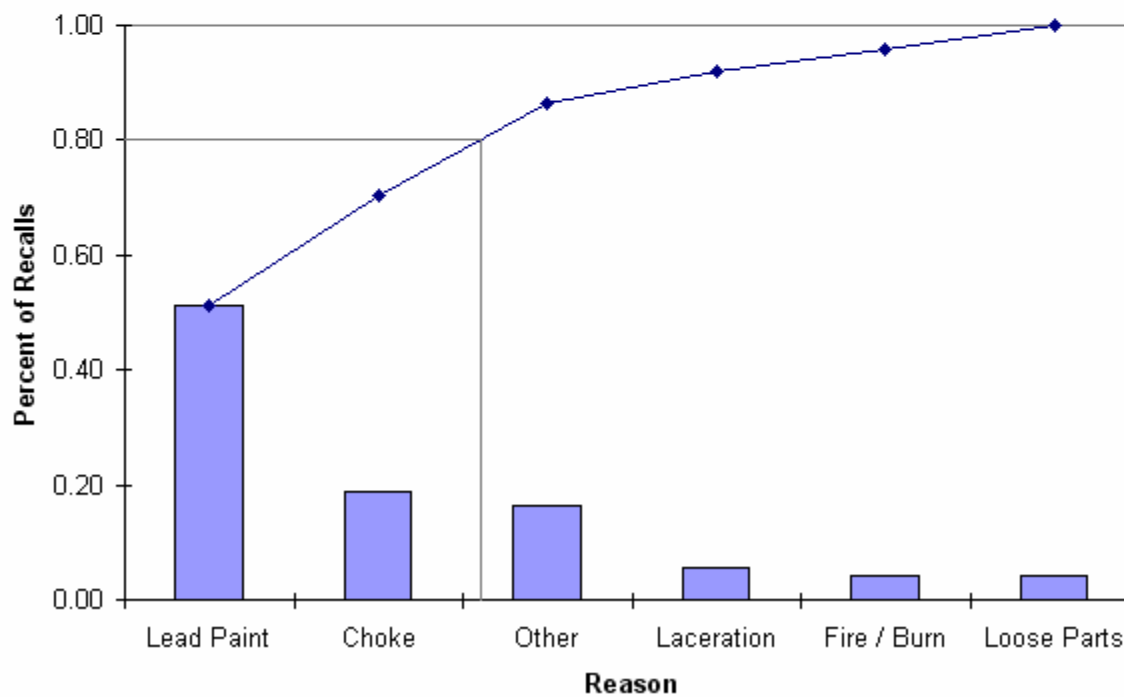
Remedy: Consumers should immediately take the recalled toy away from children and contact Schylling to receive a refund or free replacement toy.

Consumer Contact: For additional information, contact Schylling at (800) 767-8697 between 9 a.m. and 5 p.m. ET Monday through Friday, or visit the firm's Web site at www.schylling.com



Reason	Count	Percentage	Cumulative Percentage
Lead Paint	38	0.51	0.51
Choke	14	0.19	0.70
Other	12	0.16	0.86
Laceration	4	0.05	0.92
Fire / Burn	3	0.04	0.96
Loose Parts	3	0.04	1.00
Total	74	1.00	

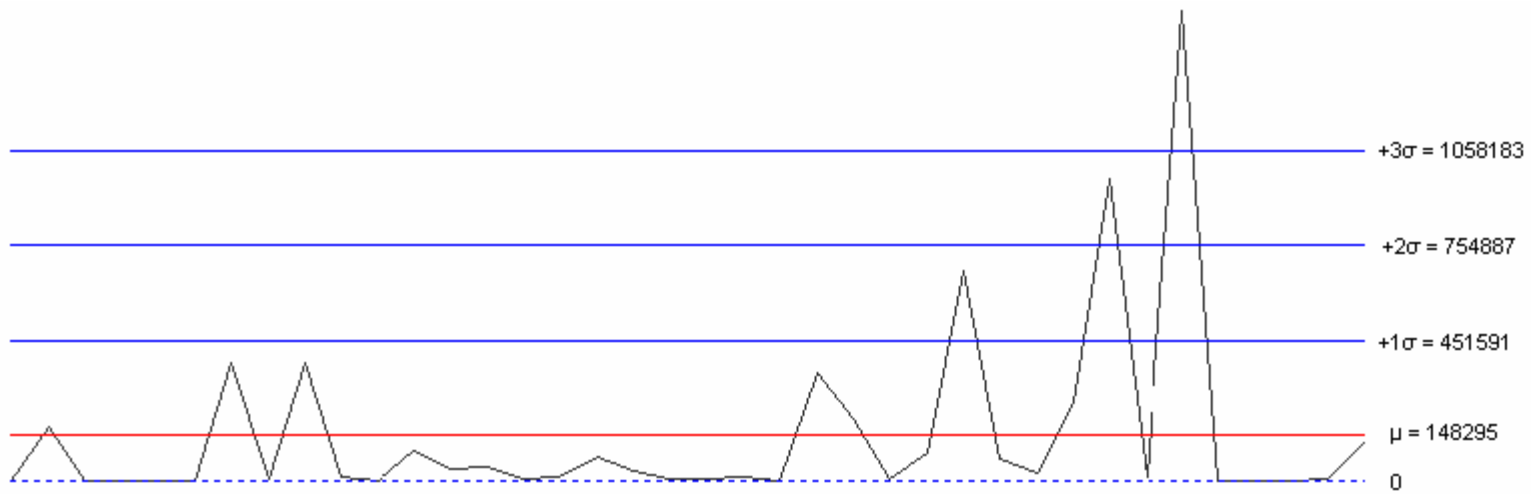
Pareto Analysis



Recalled Units Variance

- Control chart constructed for the number of units affected for each recall
- Initial points in control, later points not in control
- 1 point outside the $+1\sigma$ control limit
- 1 point outside the $+2\sigma$ control limit
- 1 point outside the $+3\sigma$ control limit

Control Chart – Units per Recall



Health Effects

- Studies began in the 1920's
- Low level of lead exposure to children
 - Reduced IQ
 - Learning Disabilities
 - Attention Deficit Disorders
 - Stunted Growth
 - Impaired Hearing Kidney Damage
- High level of lead exposure to children
 - Mental Retardation
 - Coma
 - Death



Biological Impact of Lead

- Lead has no benefit to human body
- Mimics other metals (calcium, iron, zinc)
- Prevents molecules from producing enzymes
- Delta-aminoevulinic acid dehydratase (ALAD)



Blood Lead Levels

- Measured in micro grams per deciliter
- Below 10 $\mu\text{g} / \text{dL}$ is normal
- Above 50 $\mu\text{g} / \text{dL}$ is a serious concern
- Measured through finger stick or venous sample

Tennessee Childhood Lead Poisoning Prevention Program

NEW Recommended Schedule for a Confirmatory Venous Sample

Screening test result ($\mu\text{g}/\text{dL}$)	Perform a confirmation test within:
10-19	3 months
20-44	1 week - 1 month*
45-59	48 hours
60-69	24 hours
> 70	<i>Immediately as an emergency lab test</i>

*The higher the BLL on the screening test, the more urgent the need for confirmatory testing.

Screening Guidelines

1. Blood lead test may be done as a finger stick
2. If the blood lead level comes back $10 \mu\text{g}/\text{dL}$ or greater, the level must be confirmed by a venous blood lead level

Who Should Be Screened?

1. Children at 12 and 24 months old*
2. Children 36-72 months old without a documented blood lead level*
3. Children whose parent/guardian requests a blood lead level
4. Children whose parent/guardian answers "yes" or "don't know" to any questions on risk assessment questionnaire used at well-child checks of 6 and 72 months or when child's risk status changes

*CMS requirements for TennCare recipients

Recommended Schedule for Follow-Up Blood Lead Testing ^(a)

Venous blood lead level ($\mu\text{g}/\text{dL}$)	Early follow-up (first 2-4 tests after identification)	Late follow-up (after BLL begins to decline)
10-14	3 months ^(b)	6-9 months
15-19	1-3 months ^(b)	3-6 months
20-24	1-3 months ^(b)	1-3 months
25-44	2 weeks-1 month	1 month
> 45	As soon as possible	Chelation with subsequent follow-up

(a) Seasonal variation of BLLs exists and may be more apparent in colder climate areas. Greater exposure in the summer months may necessitate more frequent follow-ups.

(b) Some case managers or PCPs may choose to repeat blood lead tests on all new patients within a month to ensure that their BLL is not rising more quickly than anticipated.

Additional Contact Information

Tennessee Department of Health: <http://www2.state.tn.us/health/lead> OR call: (615) 741-0355

Tennessee Department of Environment and Conservation: <http://www.state.tn.us/environment>
OR call: (615) 532-LEAD or the in-state-only hotline at 1-888-771-LEAD (5323)

Lead-based Paint Inspectors, Risk Assessors: <http://www.state.tn.us/environment/swm/leadpaint/listprof.htm>

Summary of Recommendations for Children with Confirmed (Venous) Elevated Blood Lead Levels

Blood Lead Level ($\mu\text{g}/\text{dL}$)				
10-14	15-19	20-44	45-69	≥ 70
<ul style="list-style-type: none"> • Lead education <ul style="list-style-type: none"> - Dietary - Environmental • Follow-up blood lead monitoring 	<ul style="list-style-type: none"> • Lead education <ul style="list-style-type: none"> - Dietary - Environmental • Follow-up blood lead monitoring • Proceed according to actions for 20-44 $\mu\text{g}/\text{dL}$ if: <ul style="list-style-type: none"> - A follow-up BLL is in this range at least 3 months after initial venous test <li style="text-align: center;">or - BLLs increase 	<ul style="list-style-type: none"> • Lead education <ul style="list-style-type: none"> - Dietary - Environmental • Follow-up blood lead monitoring • Complete history and physical exam • Lab work: <ul style="list-style-type: none"> - Hemoglobin or hematocrit - Iron status • Environmental investigation • Lead hazard reduction • Neurodevelopmental monitoring • Abdominal X-ray (if particulate lead ingestion is suspected) with bowel decontamination if indicated 	<ul style="list-style-type: none"> • Lead education <ul style="list-style-type: none"> - Dietary - Environmental • Follow-up blood lead monitoring • Complete history and physical exam • Complete neurological exam • Lab work: <ul style="list-style-type: none"> - Hemoglobin or hematocrit - Iron status - FEP or ZPP • Environmental investigation • Lead hazard reduction • Neurodevelopmental monitoring • Abdominal X-ray with bowel decontamination if indicated • Chelation therapy 	<ul style="list-style-type: none"> • Hospitalize and commence chelation therapy • Proceed according to actions for 45-69 $\mu\text{g}/\text{dL}$

The following actions are NOT recommended at any blood lead level:

- | | |
|---|--|
| <ul style="list-style-type: none"> • Searching for gingival lead lines • Testing of neurophysiological function • Evaluation of renal function (except during chelation with EDTA) | <ul style="list-style-type: none"> • Testing of hair, teeth or fingernails for lead • Radiographic imaging of long bones • X-ray fluorescence of long bones |
|---|--|

Cases

■ Oregon 2003

- 4 year old swallowed object containing 38.8% lead
- BLL of 123 $\mu\text{g} / \text{dL}$
- Hospitalized, but recovered

■ Minnesota 2006

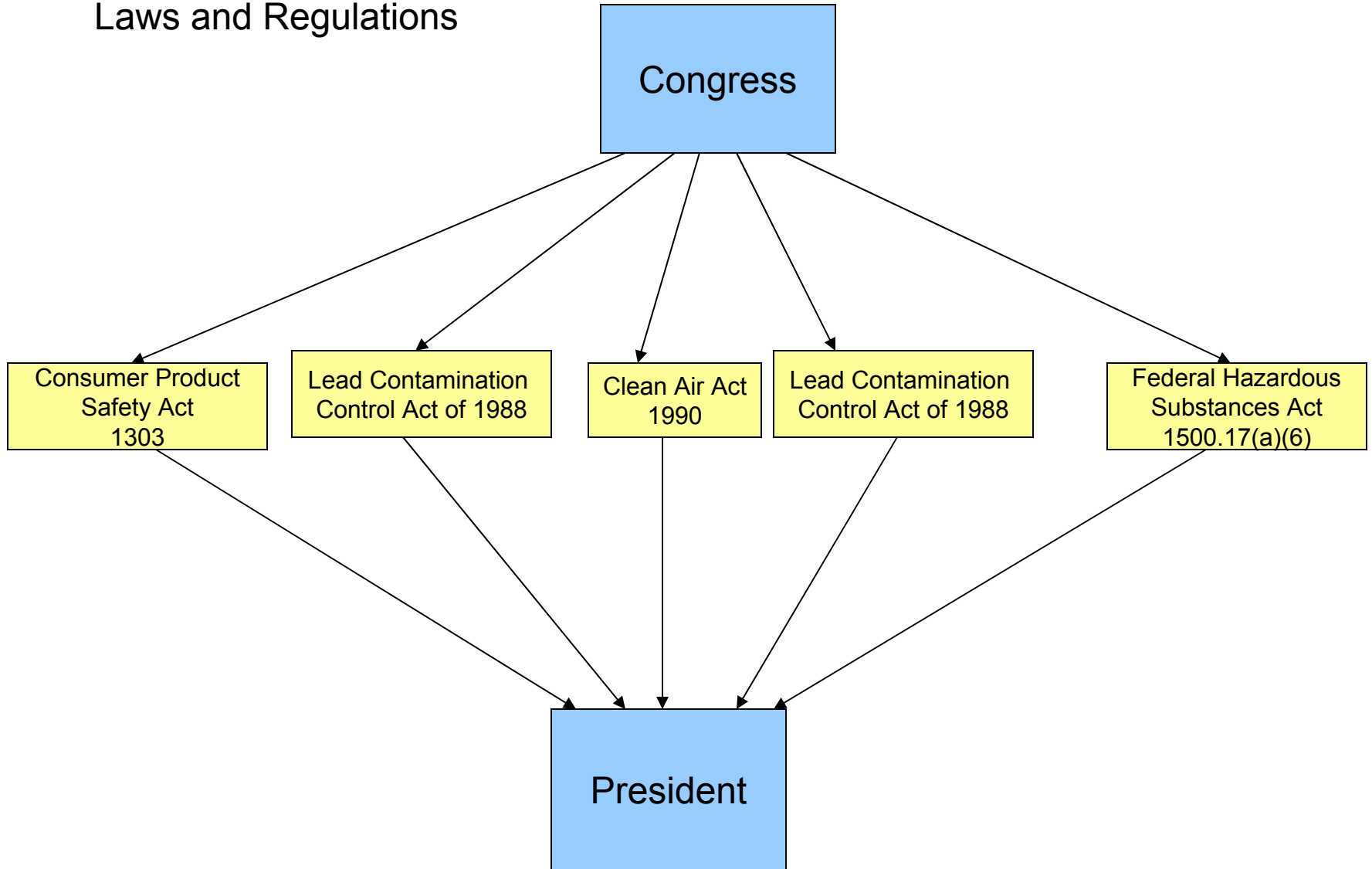
- 4 year old swallowed object containing 99.1% lead
- BLL of 180 $\mu\text{g} / \text{dL}$
- Resulted in death
- 50.52% standard deviation of lead content of similar objects from same manufacturer



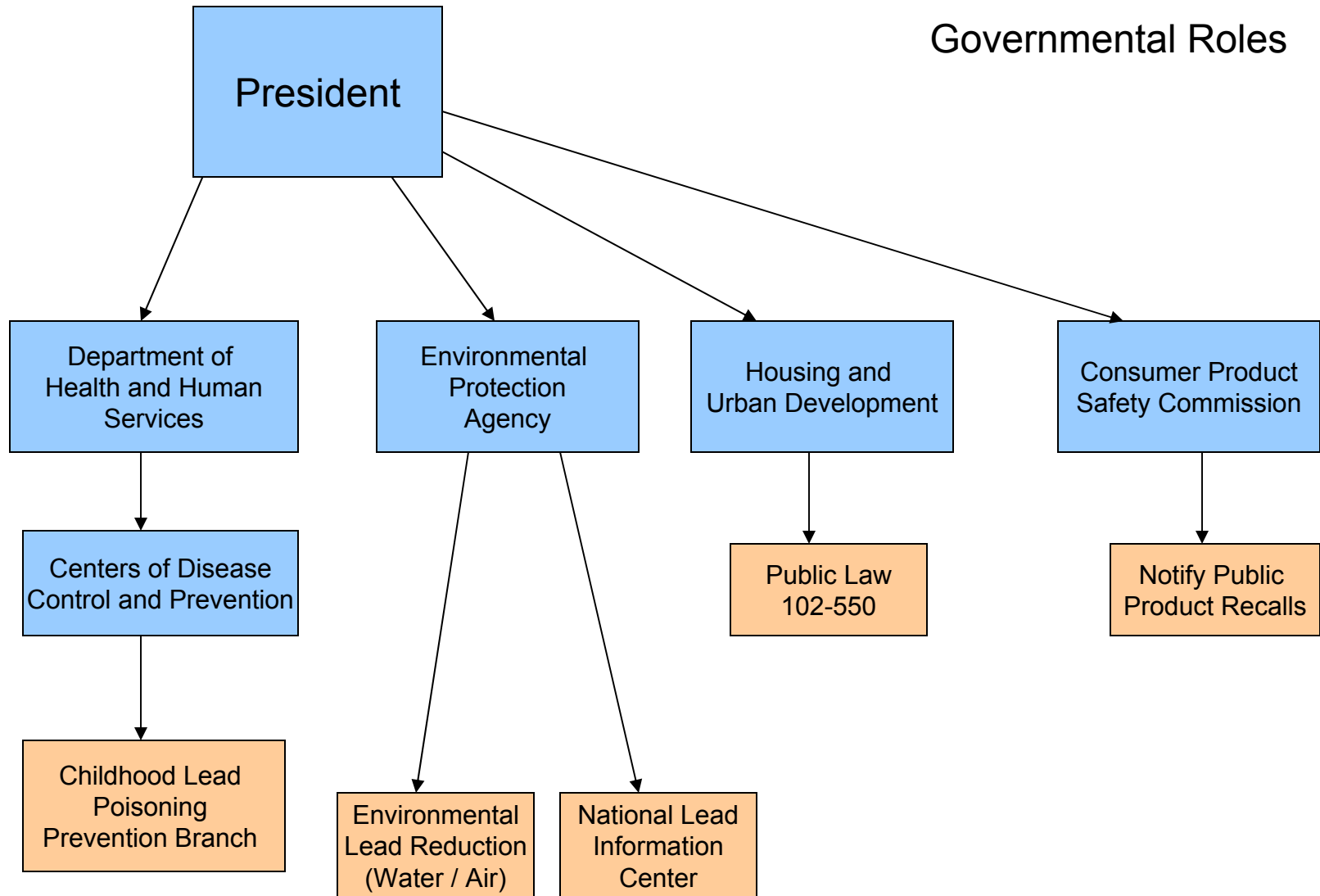
Detection Methods

- Portable X-ray fluorescence (PXRF)
 - Devices cost over \$8,000
- Chemical Spot Test
- Household Kits
 - Inaccurate results
 - False positives
 - False negatives

Laws and Regulations



Governmental Roles



Industry Roles

- Disney: Inspecting toys on shelves
- Toys 'R' Us: More inspections
- Charities: Checking all toys against recall lists; some rejecting donations
 - Goodwill
 - Salvation Army
 - Toys for Tots

Location of Contamination

- Lee Der Industrial Co
 - Manufacturer in China
 - 967,000 recalled units
 - Chinese government banned company from exporting
 - Executive commits suicide
- Hansheng Wood Products Factory
 - Manufacturer in China
 - 1.5 million recalled units
- Long supply chains in China make finding source difficult



Regulation Enforcement

- No apparent punishment for companies selling contaminated products, aside from economic impact and ruined reputation
- Sale of recalled products over the Internet
- CPSC: 400 employees

Recommendations

■ Quality Techniques

- Detailed Supply Chain
- Sampling Techniques
- Operating Characteristic Curve
 - AQL
 - LTPD
 - Producer's Risk
 - Consumer's Risk
- Six Sigma project to reduce lead in products
- Control Charts (X bar, R)