

February 14, 2026

Delegate Marc Korman, Chairman  
House Environment & Transportation Committee  
250 Taylor Office Building  
Annapolis, MD 21401

Re: HB 1067 - Hunting - Phase-Out of Lead Ammunition - FAVORABLE

Dear Chairman Korman and Vice Chair Guyton:

My name is Bruce Lanphear, MD, MPH. I am a physician-epidemiologist and Professor of Health Sciences at Simon Fraser University, and I have spent more than three decades studying the health effects of lead poisoning. I am the lead author of a recent review on lead poisoning published in the *New England Journal of Medicine*. Based on the scientific evidence, I strongly support SB 181, the phase-out of lead ammunition.

Several points are critical:

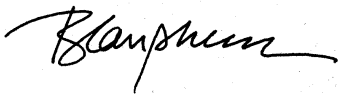
- **There is no safe level of lead exposure.** Decades of epidemiologic research show that even very low blood lead levels—well below those once considered “acceptable”—cause irreversible harm. In children, low-level exposure is associated with reduced IQ, attention problems, and behavioral difficulties. These effects are permanent and carry lifelong consequences.
- **The largest burden of lead toxicity today is cardiovascular disease in adults.** Evidence reviewed in the *New England Journal of Medicine* shows that low-level lead exposure raises blood pressure, accelerates atherosclerosis, and increases the risk of heart attacks. Most of this risk occurs at blood lead levels previously thought to be harmless.
- **Lead is a cumulative toxicant.** It accumulates in bone and is slowly released back into the bloodstream over decades, prolonging exposure and risk. Because there is no effective treatment to reverse lead’s damage, prevention is essential.
- **Lead ammunition is a preventable source of human exposure.** Fired bullets and shot fragment into microscopic lead particles that contaminate game meat. These particles cannot be reliably removed through trimming or cooking, creating an avoidable pathway of exposure for hunters and their families.

Phasing out lead ammunition is a practical, evidence-based primary-prevention measure. Safe and effective non-lead alternatives already exist and are widely available. Eliminating this source of exposure would reduce preventable harm without compromising hunting.

By passing SB 181, Maryland would protect public health and demonstrate leadership by acting on clear scientific evidence. This is precisely the kind of upstream intervention that has historically produced the greatest gains in population health.

Thank you for your consideration of this important legislation.

Best regards,

A handwritten signature in black ink, appearing to read "B. Lanphear", written in a cursive style.

Bruce P. Lanphear, MD, MPH  
Professor, Faculty of Health Sciences, Simon Fraser University