

Study Seeks More Checks of Kids' Cholesterol

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BY RON WINSLOW

A new study suggests that current guidelines for screening children for high cholesterol fail to capture many youngsters with elevated levels who might benefit from healthier diet and exercise habits or treatment with cholesterol-lowering medication.

National recommendations now say doctors should check cholesterol in children and adolescents when parents or grandparents have been diagnosed with heart disease prior to age

55, when such family history isn't known, or when a parent has total cholesterol over 240.

But data from a school-based program in West Virginia that has screened all fifth graders for cholesterol over the past decade found that nearly 10% of children who wouldn't be checked under the guidelines had abnormally high levels of LDL or bad cholesterol. About 1.7% had readings high enough to be candidates for drug treatment, researchers said.

All told, 20,266 kids were

screened, but 5,798 didn't meet the current guidelines. Researchers said that of the 268 children found to have LDLs above 160—high enough to warrant treatment with a cholesterol-lowering drug called a statin—98 were among the group not considered candidates for screening to begin with.

"We would have missed 36% of children with seriously high LDL, said William Neal, a pediatric cardiologist at West Virginia University and director of the study. The findings are being published Monday in the journal Pediatrics.

The current guidelines, established in the 1990s, didn't call for universal cholesterol-screening of children partly to avoid labeling children with heart risk and to avoid what some feared could be an overuse of cholesterol drugs in kids, the study says.

Stephen Daniels, chairman of pediatrics at University of Colorado School of Medicine, in Denver, who was involved in writing the guidelines, said most children who take cholesterol drugs have cholesterol that is high because of genetics, not because of unhealthy habits.

The new study adds to evidence of shortcomings of family history as a criterion for screen-

ing, said Dr. Daniels, who was not involved in the West Virginia study. Many parents and some grandparents of fifth graders may not be old enough to develop heart disease. Single-parent households can complicate getting accurate family information.

Dr. Neal is director of a project called Cardiac, which stands for Coronary Artery Risk Detection in Appalachian Communities. It has been screening West Virginia school children for the risk of heart disease since 1998.

The long-term study, is state-funded and doesn't involve drug-industry sponsorship. In addition to cholesterol, researchers take the fifth graders' blood pressure and body mass index, a measure of body size based on a ratio of height and weight.

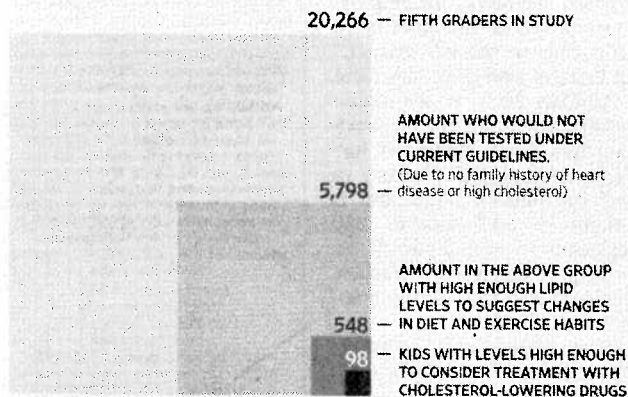
Dr. Neal said the project was intended to raise awareness of heart-disease risk by focusing on children.

Death from cardiovascular causes is 20% higher in West Virginia than the national average, he said, and the state regularly ranks among the five highest in that category.

Other research has connected high cholesterol levels in children and adolescents with early accumulation of fatty deposits in blood vessels.

Slipping Through the Screen

A new study found that current guidelines on high-cholesterol screening miss some kids who have the condition.



Source: the journal Pediatrics