



NUTROCIÊNCIA

How Helpful Is Family History in Identifying Children with Elevated Cholesterol?



Screening on the basis of family history missed many children with hyperlipidemia.

In 2008, the American Academy of Pediatrics (AAP) released revised guidelines on lipid screening in children (JW *Pediatr Adolesc Med* 2008) and reinforced the need for selective screening in children with positive family history of cardiovascular disease (parent with high cholesterol level, parent or grandparent with documented coronary artery disease before age 55). According to the guidelines, dyslipidemia in children is defined as low-density lipoprotein (LDL) levels ≥ 130 mg/dL, and drug therapy should be considered in children with consistent LDL levels ≥ 160 mg/dL despite diet therapy.

Investigators examined the accuracy of family history in identifying children with hyperlipidemia by using data from an ongoing study of 20,266 fifth graders in West Virginia who had fasting lipid profiles and whose parents completed family history questionnaires; 71% had positive family history, and 29% did not. Of those with *positive* family history, 8.3% had LDL levels ≥ 130 mg/dL and 1.2% had LDL levels ≥ 160 mg/dL. Of those with *negative* family history, 9.5% had LDL levels ≥ 130 mg/dL and 1.7% had LDL levels ≥ 160 mg/dL.

Comment: Regardless of whether you believe in screening and treating children with dyslipidemia, this study highlights two very important facts: (1) Family history is a poor way to identify children with elevated LDL cholesterol levels, and (2) about 1.5% of fifth-grade children would meet AAP guidelines for possible drug therapy, at least in this sample.

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