

## **USPSTF Bulletin**

## U.S. Preventive Services Task Force Issues Draft Statement: Screening for Hypertension in Children and Adolescents

WASHINGTON, D.C. – February 26, 2013 – The U.S. Preventive Services Task Force (Task Force) today posted a draft statement on screening for hypertension (high blood pressure) in children and adolescents. The Task Force is providing an opportunity for public comment on this draft statement until March 25. All public comments will be considered as the Task Force develops its final recommendation.

High blood pressure in children and teens has increased in recent years, in part due to the rise in childhood obesity. However, there is not enough solid evidence to recommend screening for high blood pressure because it is difficult to predict which children and teens will develop the condition as adults. The evidence is equally unclear as to whether lowering blood pressure in youth leads to improved cardiovascular health in adulthood. As such, screening for hypertension in children and adolescents has been given an I statement, which the Task Force issues when there's not enough solid evidence to make a recommendation.

"The Task Force recognizes the importance of cardiovascular health," said Task Force member Kirsten Bibbins-Domingo, Ph.D., M.D. "But for children and teens who show no other signs or symptoms of high blood pressure or an underlying health problem, there is not enough solid evidence to recommend that they should be screened for the condition."

An I statement is not a recommendation for or against screening. It means that there is not enough evidence to say definitively whether screening results in more benefit than harm. In the absence of clear evidence, health care professionals should consider a number of things: the current scientific research, expert opinion, their own knowledge and experience as well their patient's health history along with the values and preference of the patient and family.

It is important to note this draft statement applies only to children and teens who show no other signs or symptoms suggestive of an underlying health problem. In addition, the scope of this recommendation only includes primary hypertension and not secondary hypertension. Secondary hypertension is usually caused by an underlying condition that is generally accompanied by a range of different symptoms. The treatment of secondary hypertension is likely to be handled as part of the management of the underlying condition.

"The Task Force calls on the research community to prioritize studies on screening and treatment of high blood pressure in children and teens and on the impact such interventions may have on cardiovascular health as these children and teens become adults," said Dr. Bibbins-Domingo. "Investments in such research may lead to improved cardiovascular health for Americans and to a definitive recommendation from the Task Force in the future."

The Task Force's draft statement has been posted for public comment on the Task Force Web site at <u>www.uspreventiveservicestaskforce.org</u>. Comments can be submitted from February 26 to March 25 at <u>www.uspreventiveservicestaskforce.org/tfcomment.htm</u>.

The Task Force is an independent group of national experts in prevention and evidence-based medicine who work to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

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