

SCREENING FOR PRIMARY HYPERTENSION IN CHILDREN AND ADOLESCENTS CLINICAL SUMMARY OF U.S. PREVENTIVE SERVICES TASK FORCE RECOMMENDATION

| Population | Children and adolescents without symptoms of hypertension |
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| Recommendation | No recommendation. Grade: I statement |
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| Risk Assessment | The strongest risk factor for primary hypertension in children is elevated body mass index. Other risk factors include low birthweight, male sex, ethnicity, and a family history of hypertension. |
| Screening Tests | Blood pressure screening with sphygmomanometry in the clinical setting may identify children and adolescents with hypertension with reasonable sensitivity; however, false-positive results may occur with normalization of subsequent blood pressure measurements. |
| Treatment | Stage 1 hypertension in children is treated with lifestyle and pharmacological interventions; medications are not recommended as first-line therapy. |
| Balance of Benefits and Harms | The USPSTF found inadequate evidence on the diagnostic accuracy of screening for primary hypertension. The USPSTF also found inadequate evidence on the effectiveness of treatment and the harms of screening or treatment. Therefore, the USPSTF cannot determine the balance of benefits and harms of screening for hypertension in children and adolescents. |
| Other Relevant USPSTF Recommendations | The USPSTF has made recommendations on screening for lipid disorders in children and adolescents. These recommendations are available at http://www.uspreventiveservicestaskforce.org/ . |

For a summary of the evidence systematically reviewed in making this recommendation, the full recommendation statement, and supporting documents, please go to http://www.uspreventiveservicestaskforce.org/.