Figure. Screening for Lipid Disorders in Children and Adolescents: Clinical Summary

Population	Asymptomatic children and adolescents 20 years or younger
Recommendation	No recommendation. Grade: I (insufficient evidence)

Risk Assessment	Multifactorial dyslipidemia is associated with risk factors such as environmental factors (eg, obesity) and currently unidentified genetic factors. Familial hypercholesterolemia is an autosomal dominant disorder caused by a genetic mutation.
Screening Tests	Total cholesterol may be measured with fasting or nonfasting serum testing. Serum LDL-C levels may be calculated using the Friedewald formula. Direct LDL-C measurement does not require fasting. Other recent guidelines on screening for dyslipidemia in children have recommended measuring either LDL-C or non–HDL-C levels.
Treatment and Interventions	Interventions for dyslipidemia include lifestyle modification (eg, changes in diet and physical activity) and pharmacotherapy (eg, statins, bile acid-sequestering agents, or cholesterol absorption inhibitors). The appropriate age at which to start statin use is subject to debate. The long-term benefits and harms of statin use in children and adolescents are unknown.
Balance of Benefits and Harms	The USPSTF concludes that the current evidence is insufficient and that the balance of benefits and harms of screening for lipid disorders in asymptomatic children and adolescents 20 years or younger cannot be determined.
Other Relevant USPSTF Recommendations	The USPSTF recommends that clinicians screen for obesity in children 6 years or older and offer them or refer them to a comprehensive, intensive behavioral intervention (B recommendation). The USPSTF found insufficient evidence on screening for primary hypertension in asymptomatic children and adolescents to prevent subsequent cardiovascular disease in childhood or adulthood (I statement). These recommendations are available on the USPSTF website (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 <u>www.uspreventiveservicestaskforce.org</u>.

Abbreviations: LDL-C=low-density lipoprotein cholesterol; non-HDL-C=non-high-density lipoprotein cholesterol.