

U.S. Preventive Services Task Force Issues Final Recommendation Statement on Screening for Lipid Disorders in Children and Adolescents

Task Force finds insufficient evidence to recommend for or against screening for lipid disorders in asymptomatic children and adolescents

WASHINGTON, D.C. – August 9, 2016 – The U.S. Preventive Services Task Force (Task Force) today published a final recommendation statement and evidence summaries on screening for lipid disorders in children and adolescents. Based on its review, the Task Force found that the current evidence is insufficient to assess the balance of benefits and harms of screening patients 20 years or younger without symptoms or signs of, or a known diagnosis of, a lipid disorder. **This is an I statement** and not a recommendation for or against screening. This final recommendation is consistent with and updates the previous recommendation statement on this topic in 2007.

High cholesterol in individuals 20 years or younger can be caused primarily by genetics (familial hypercholesterolemia) or from both genetic and environmental factors, such as a high fat diet (multifactorial dyslipidemia). The Task Force reviewed evidence for screening children and adolescents for both familial hypercholesterolemia and multifactorial dyslipidemia and found that there is not enough evidence to determine the benefits or harms of screening in either case.

Grade in this recommendation:

I: The balance of benefits and harms cannot be determined.

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“By issuing an I statement, we are calling for more research to better understand the benefits and harms of screening and treatment of lipid disorders in children and teens and on the impact these interventions may have on their cardiovascular health as adults, says Task Force vice chair David Grossman, M.D., M.P.H. “In the absence of evidence, health care professionals should continue to take each patient’s individual risks and circumstances in consideration, and use their best judgment when deciding whether or not to screen.”

“Despite this lack of evidence on lipid screening, the Task Force does recommend screening for obesity in children 6 years and older and referring them to intensive behavioral counseling on weight management,” says former Task Force member Douglas K. Owens, M.D., M.S. “Helping children improve their diet and physical activity, may also improve their cardiovascular health as well.”

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

Dr. Grossman is a pediatrician recognized for his research on clinical preventive services, injury prevention, and Native American health. He is a senior investigator at the Group Health Research Institute in Seattle, WA, where he is also medical director for population health. He is also professor of health services and adjunct professor of pediatrics at the University of Washington.

Dr. Owens is the Henry J. Kaiser, Jr., professor at Stanford University, where he is also a professor of medicine, health research and policy (by courtesy), and management science and engineering (by courtesy), as well as senior fellow at the Freeman Spogli Institute for International Studies.

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