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HEALTH INDUSTRY NOVEMBER 12, 2011 Panel Urges Cholesterol Testing for Kids

By RON WINSLOW And JENNIFER CORBETT DOOREN

Government health experts recommended Friday that all children be tested for high cholesterol before they reach puberty, in an effort to get an early start in preventing cardiovascular disease.

The National Heart, Lung and Blood Institute said a child's first cholesterol check should occur between ages 9 and 11 and the test should be repeated between ages 17 and 21. The American Academy of Pediatrics endorsed the guideline.

What Doctors Say

Recommendations for children:

Referral to dietician to make changes if cholesterol is high.

Exercise 30-60 minutes a day; avoid saturated fats; eat plant-based foods, whole grains.

Fat-free milk at age 2 and up.

Medication for some aged 10 and up if these steps fail.

The recommendation reflects growing evidence the biological processes that underlie heart attacks and other consequences of cardiovascular disease begin in childhood, even though manifestations of the diseases generally don't strike until middle age or later.

The guidelines also come amid broad concern about growing numbers of American children who are overweight or obese and thus potentially on course for diabetes, high blood pressure and other abnormalities. The U.S. Centers for Disease Control and Prevention

estimate that 17% of American children are obese, triple the level three decades ago.

Until now, doctors were advised to check cholesterol in children from families with a history of high cholesterol or early heart disease. But recent studies have found that this guideline misses many who are at risk.

"The reason for doing it is ... that targeted screening doesn't work very well," said Stephen Daniels, chairman of the task force that wrote the new guidelines and a chief pediatrician at Children's Hospital Colorado in Denver.

Strategies for addressing high cholesterol in children are similar to those for adults: a strong emphasis on diet and increasing exercise. While broad screening could also increase the numbers of children prescribed cholesterol-lowering drugs called statins, doctors cautioned against reading the new guidelines as a call for using medication.

"I don't think this is a license to broadly start statins in children," said Gordon Tomaselli, chief of cardiology at Johns Hopkins School of Medicine and president of the American Heart Association. Dr. Daniels estimated that less than 1% of children would end up taking statins, mostly those with a genetic mutation that results in sharply elevated levels of the so-called bad cholesterol, or LDL (for low-density lipoprotein).

Still, Danny Benjamin, a Duke University pediatrics professor, said one concern is the recommendation

might lead to more children ending up on statins, and there is little research about the best doses for kids and none on those for obese kids.

Rita Redberg, a cardiologist at University of California, San Francisco, expressed skepticism. "I don't know of any data that screening children ages 9 to 11 is of any benefit to them," she said. "We don't need to do cholesterol tests to advise children to eat fruits and vegetables, watch their weight and get regular physical activity."

She also said screening could end up creating anxiety and lead to further unnecessary tests.

Broad screening would come at a cost. A lab might charge an insurer about \$80 for a test, said Richard Baltaro, an associate professor of pathology at Creighton University in Omaha, Neb. Online direct-to-consumer lab services also sell lipid screenings, which include both "bad" and "good" cholesterol (HDL) plus triglycerides, for around \$30 to \$50.

Insurers generally cover cholesterol testing, Dr. Baltaro said, but policies vary. <u>Aetna</u> Inc. said it covers cholesterol tests for all ages, but for children, it doesn't generally class them as preventive benefits, which are typically provided without any out-of-pocket charge. Aetna's chief medical officer, Lonny Reisman, said the insurer will consider covering the screenings for 9- to 11-year-olds as a preventive benefit.

<u>UnitedHealth Group</u> Inc. said its plans already cover cholesterol screenings for 9- to 11-year-olds. <u>Cigna</u> Corp. said it reimburses 100% for screenings for children aged as young as 2 with risk factors such as obesity and high blood pressure, and it will review the new recommendation..

Evidence in support of the guidelines came in part from a heart-risk screening program under way in West Virginia since 1998. Recently published findings found that previous guidelines missed 37% of those whose cholesterol was high enough to consider drug therapy, said William Neal, chief of preventive cardiology at West Virginia University, Morgantown, who led the state-funded project.

Based on 85,000 fifth-graders screened, about 1% had high enough cholesterol to be candidates for drug treatment and 5% to 6% had mildly elevated levels. Among overweight or obese children, the likelihood of elevated cholesterol was 10% to 11%, he said. In most cases, this would be addressed by improving diets and boosting exercise to at least one hour a day.

The guidelines seek to address lifestyle factors from birth with a recommendation that babies be breast-fed, adding that after age 1, children can be given low-fat milk and after age 2 can be given fat-free milk.

Daphne Hsu, chief of pediatric cardiology at Children's Hospital at Montefiore in New York's Bronx borough, said she struggles to get children and their families to stick to diet and exercise changes, but having children flagged as having high cholesterol might motivate families more.

-Anna Wilde Mathews contributed to this article.

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Corrections & Amplifications

The first name of Lonny Reisman, Aetna Inc.'s chief medical officer, was misspelled as Lonnie in an earlier version of this article.

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