Why Should My Child Have a Cholesterol Test?

The American Academy of Pediatrics recommends that all children have a cholesterol test between the ages 9-11 and again between the ages of 17-21.

Children from families with a history of early heart/vascular disease or familial hypercholesterolemia (FH) should have their cholesterol tested at the age of 2.

Heart/Vascular Disease
Heart/Vascular disease includes heart attacks, strokes, angioplasty, stenting of heart or carotid arteries, bypass surgery or sudden cardiac death. If a man experiences one of these events before the age of 55 or a woman before 65 this would be considered early.

Familial Hypercholesterolemia
Familial hypercholesterolemia (FH) is a common genetic condition which occurs in 1 in every 250 people, and causes very high cholesterol which can lead to very early heart disease. FH should be suspected in children who are found to have LDL Cholesterol (“bad cholesterol”) levels at or above 160 mg/dL.

Checking Cholesterol
How is cholesterol checked?
Cholesterol is measured by a blood test. The initial test can be done on a non-fasting sample. If your child is found to have high cholesterol a fasting test may be recommended.

What gets measured in a cholesterol test?
A cholesterol test, or Lipid Profile, measures Total Cholesterol, LDL Cholesterol (“bad cholesterol”), HDL Cholesterol (“good cholesterol”) and Triglycerides (another blood fat).

Why check cholesterol in children?
Checking cholesterol is one way to check your child’s health. If found early, children with modest elevations in their cholesterol levels can often correct their cholesterol level by making healthy changes in their diet and exercise programs.

We know that children with FH, who have very elevated cholesterol, can begin to deposit cholesterol into their heart arteries by about the age of 10.

We also know that children with FH can prevent future heart disease by following a heart healthy lifestyle and beginning medications at around the age of 10. Children with FH are typically followed by a pediatric cholesterol specialist.

<table>
<thead>
<tr>
<th></th>
<th>Acceptable</th>
<th>Borderline</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Cholesterol</td>
<td>&lt;170</td>
<td>170-199</td>
<td>&gt;200</td>
</tr>
<tr>
<td>LDL Cholesterol</td>
<td>&lt;110</td>
<td>110-129</td>
<td>&gt;130</td>
</tr>
<tr>
<td>HDL Cholesterol</td>
<td>&gt;45</td>
<td>40-45</td>
<td>&lt;40</td>
</tr>
<tr>
<td>Triglycerides 0-9 years</td>
<td>&lt;75</td>
<td>75-99</td>
<td>&gt;100</td>
</tr>
<tr>
<td>Triglycerides 10-19 years</td>
<td>&lt;90</td>
<td>90-129</td>
<td>&gt;130</td>
</tr>
</tbody>
</table>

<= less than, >= greater than. All values are in mg/dL.

FH runs in families
Each child of a person with FH has a 50% chance of inheriting the disorder so it is essential to screen parents, siblings and children of a person diagnosed with FH to find others who may have inherited the gene.

Helpful websites for dietary advice include:
www.cspinet.org/eating-healthy/what-eat

If your child is diagnosed with FH, the FH Foundation can help:
www.theFHfoundation.org