

Survey: Many pediatricians don't follow lipid recommendations

from the **AAP Department of Research**



New results from the AAP Periodic Survey of Fellows indicate that U.S. pediatricians screen

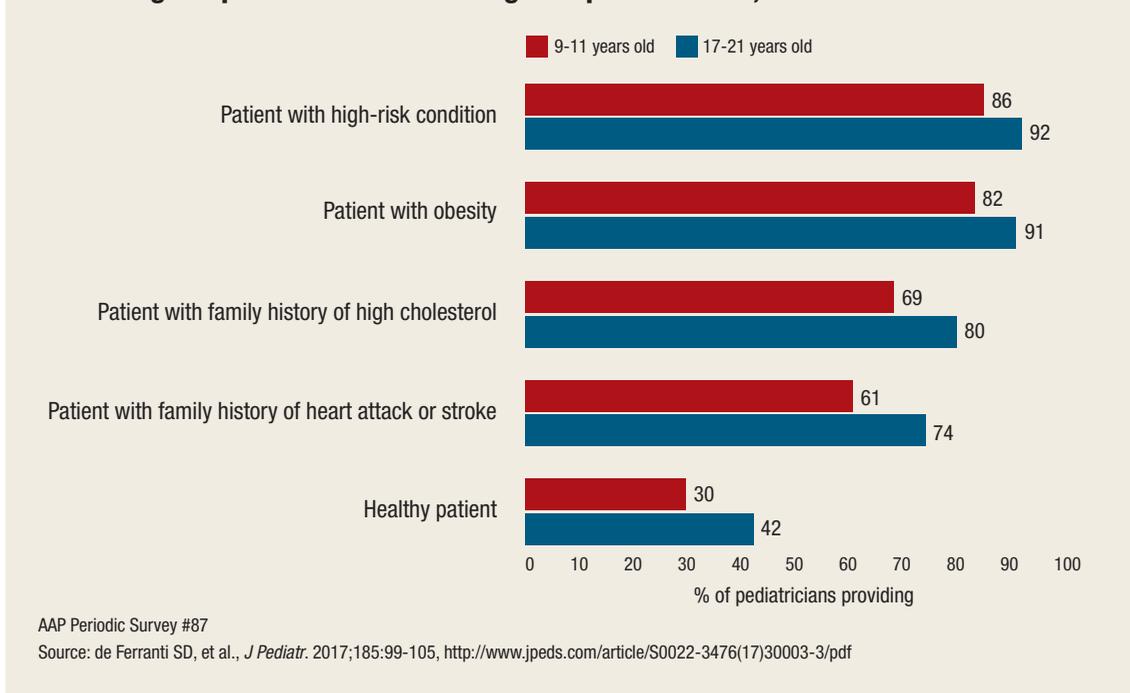
and treat lipid disorders less frequently than is recommended by various national guidelines (de Ferranti SD, et al. *J Pediatr.* 2017;185:99-105, [http://www.jpeds.com/article/S0022-3476\(17\)30003-3/pdf](http://www.jpeds.com/article/S0022-3476(17)30003-3/pdf)).

The authors found that pediatricians screen based on selective criteria. For example, pediatricians reported screening 86% of 9- to 11-year-olds with high-risk conditions, 82% with obesity and 69% with family history of high cholesterol usually or all the time. Screening rates were higher for 17- to 21-year-old patients (see figure).

For both the younger and older age groups, however, less than half of pediatricians reported screening healthy patients as recommended by the 2011 National Heart, Lung, and Blood Institute (NHLBI) expert panel guidelines (30% and 42%, respectively).

Nearly all pediatricians (97%) reported that they would provide additional diet and exercise counseling for a 9- to 11-year-old patient with persistently high low-density lipoprotein cholesterol (LDL-C, 200 mg/dL, 5.2 mmol/L) despite six months of lifestyle counseling. Over three-quarters (76%) would refer

Percentage of pediatricians screening for lipid disorders, 2014



the patient to a dietitian, 54% would refer the patient to a lipid specialist and 8% would prescribe a statin.

The most commonly reported major barriers to lipid treatment included the inability of patients and families to adhere to lifestyle recommendations

(83%), pediatrician lack of comfort prescribing statins (62%), lack of patient access to appropriate physical activity (49%) and lack of patient access to affordable healthy food (47%).

Study authors suggested that better education is needed regarding recommended screening and treatment approaches, the health consequences of severe lipid disorders, and the benefits and potential harms of treatment.

Of pediatricians providing health supervision, 46% report being moderately or very knowledgeable about the 2008 AAP guidelines. Fewer pediatricians (26%) reported familiarity with the 2011 NHLBI expert panel guidelines, which include recommendations for universal screening of healthy children, and 26% reported familiarity with the 2007 U.S. Preventive Services Task Force evidence review on pediatric lipid screening and treatment.

Periodic Survey #87 was conducted from December 2013 to June 2014. The survey was mailed to 1,627 nonretired AAP members in the United States, with a response rate of 43%. Analyses were limited to pediatricians who provide direct patient care.

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RESOURCES

- In 2011, the NHLBI released *Expert Panel on Integrated Guidelines for Cardiovascular Health and Risk Reduction in Children and Adolescents*. The Academy endorsed the report, and a summary was published in *Pediatrics*, <http://pediatrics.aappublications.org/content/early/2011/11/09/peds.2009-2107C>.
- For more information on pediatric cardiovascular risk-reduction strategies, contact Debra Burrowes, in the AAP Division of Technical and Medical Services, at 847-434-4927 or dburrowes@aap.org.
- For more information on the Periodic Survey of Fellows, visit <http://www2.aap.org/research/periodicsurvey.htm> or contact Blake Sisk, in the AAP Division of Health Services Research, at 847-434-7630 or bsisk@aap.org.