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Healthy hearts start at young age

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NEW ORLEANS — Doctors will miss half the children at risk for heart disease if they follow national guidelines for cholesterol testing, according to a new report from the long-term Bogalusa Heart Study.

However, the coordinator of the National Cholesterol Education Program said he does not expect the report in the January issue of *Circulation*, the journal of the American Heart Association, to prompt new guidelines. The NCEP guidelines published in 1991 call for testing children's cholesterol only if their parents have a history of heart problems.

The Bogalusa Heart Study checked its records on nearly 8,300 of the people it has checked over the past several decades. Among other things, it looked for children whose low-density lipoprotein, or "bad cholesterol," was in the top 5 percent for their age group.

"Half of the children who had high LDL did not have a family history of heart disease," said Dr. Gerald S. Berenson, director of the Bogalusa project.

The problem stems from the fact that young children's parents don't have heart attacks because the parents also are young, he said.

Dr. James Cleeman, the NCEP coordinator, said it makes much more sense to teach all children to exercise and to follow a healthy diets and to test only those who have family histories or other test results that indicate a potential

problem.

Cleeman cautioned that many children whose cholesterol levels are in the top 20 percent to 25 percent grow up to have perfectly normal levels.

Berenson, however, maintains that all children should be screened for the main predictors of heart problems — high blood pressure, high cholesterol, high blood sugar and obesity.

Not every child with high cholesterol grows up to have high cholesterol, but most of them do, Berenson said.

"Prevention always seems costly. ... They say it's not cost beneficial. I say it costs us \$25,000 to \$30,000 to do a bypass surgery. We can do a cholesterol test for five bucks," he said.

Dr. Michael Miller, director of preventive cardiology at the University of Maryland Hospital in Baltimore, said he agreed with Berenson's conclusions but thought more studies are needed to prove the effectiveness and cost-efficiency of screening all children.

"If you don't get them at a young age, you're going to get them when they have had their heart attack," he said.

The project already has found that children whose cholesterol levels, weight or blood pressure are in the top 10 percent for their age group are likely to be at risk for heart problems later in life.

It also has found that risk factors for heart disease can be identified in infancy and that intervention — chiefly exercise and a healthy diet — should start as early as possible.