

## PRACTICAL PEARLS: Hyperlipidemia

<b>INTRODUCTION</b>	<ul style="list-style-type: none"><li>• Universal screening of children aged 9-11 and 17-21 years is recommended to identify lipid disorders such as familial hypercholesterolemia that increase the risk of early CVD if untreated. <a href="http://pediatrics.aappublications.org/content/128/Supplement_5/S213.long">http://pediatrics.aappublications.org/content/128/Supplement_5/S213.long</a></li><li>• Most lipid abnormalities are secondary to obesity (dyslipidemia: elevated TG/low HDL) and are treated with lifestyle modification.</li></ul>
<b>INITIAL EVALUATION AND MANAGEMENT BY PRIMARY CARE</b>	<ul style="list-style-type: none"><li>• A non-fasting TC <math>\geq 200</math> mg/dl and/or non-HDL-C (TC-HDL) <math>\geq 145</math> mg/dl necessitate a fasting lipid panel.</li><li>• Mild elevations (LDL <math>\geq 130</math>-160 mg/dl, TG <math>\geq 150</math>-500 mg/dl) can be treated with dietary modification.</li><li>• Medical causes of hyperlipidemia should be ruled out.</li><li>• Email or securely text (using Cortext) Dr. Boney for a courtesy review of fasting lipid profile and recommendation for further evaluation.</li></ul>
<b>WHEN TO REFER</b>	<ul style="list-style-type: none"><li>• TC <math>&gt; 250</math> mg/dl, LDL <math>\geq 160</math> mg/dl, fasting TG <math>\geq 500</math> mg/dl and/or HDL <math>&lt; 20</math> mg/dl warrant referral to a lipid specialist.</li></ul>
<b>HOW TO REFER</b>	<ul style="list-style-type: none"><li>• (413) 794-KIDS: Lipid Clinic (Dr. Conroy pediatric endocrinologist, Dr. Mackie cardiologist, Ms. Lynn Henry dietician; Dr. Boney advisor)</li></ul>
<b>WHAT TO EXPECT FROM BAYSTATE CHILDREN'S HOSPITAL VISIT</b>	<ul style="list-style-type: none"><li>• Multidisciplinary team will evaluate and treat children with primary, non-obesity related hyperlipidemia through a combination of lifestyle modification and pharmacotherapy.</li></ul>

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