

Cholesterol Guidelines for Children

Who set them?

The recommendations were made by a 12-member panel of experts in pediatrics, nutrition and heart disease and were issued by the National Cholesterol Education Project, sponsored by the National Heart, Lung and Blood Institute. They are endorsed by 42 major health and professional groups, including the American Heart Association and the American Academy of Pediatrics.

Why were they set?

Scientific evidence shows that atherosclerosis begins in childhood and is related to nutrition habits which affect blood cholesterol levels in both children and adults. Recommendations for adults were made in 1988. Growing children have different nutritional needs than do adults and a separate set of recommendations was necessary.

Is cholesterol screening recommended?

Routine screening for all children is not needed and may lead to unnecessary drug therapy. Nearly half of the children who have high blood cholesterol levels are likely to have almost normal levels as adults.

Children and adolescents should be screened if

- A parent or grandparent had atherosclerosis at or before age 55.
- A parent or grandparent suffered a heart attack, or showed other signs of artery disease at or before age 55.
- A parent has a blood cholesterol level over 240.

Experts say about half of the estimated 15 million children who would need testing under the new guidelines probably would need further treatment. Most could lower their blood cholesterol level by changing eating habits. A few might need drug treatment and then only if over the age of 10.

Children should have a cholesterol level less than 175 milligrams per tenth of a liter of blood. Those with counts of 175 to 199 should be considered "borderline" and make moderate diet changes. Children with counts above 200 probably need diet restrictions and may need to be considered for drug treatment.

Cholesterol



North Central Regional Extension Publication 431

Sponsored by the Extension Services of Indiana, Iowa, Kansas, Lincoln University, Minnesota, North Dakota, and Ohio. In cooperation with Extension Service, U.S. Department of Agriculture, Washington, D.C.

March 1995

What are the recommendations for diet?

Blood cholesterol levels are most closely related to fat consumption, so the guidelines suggest limiting total fat and saturated fat.

The following specific amounts are *only for children over the age of two*. Infants need cholesterol and fat for growth. Two- and three-year-olds are in transition and gradually can assume the eating habits of the rest of the family.

The guidelines can be met by eating more fruit and vegetables, grains, breads and cereals, and legumes. Low-fat dairy products should be used. Moderate amounts of lean red meats, poultry without skin, and fish should be included.

High-fat foods — like hot dogs, ice cream, french fries, pizza — can still be eaten in moderation and when balanced with other foods over a day or week.

For more information

These publications are available from county extension offices:

Cholesterol in Your Body, NCR 332 (free)

Foods and Your Cholesterol, NCR 334 (\$.50)

Guide to Low Cholesterol Foods, NCR 335 (free)

How to Eat Less Fat, NCR 336 (\$.50)

How to Eat Out Without Raising Your Cholesterol, NCR 336 (free)

What You Should Know About Triglycerides and Fatty Acids, NCR 333 (free)

Percentage of Average Daily Calories from Fat

	Current	Recommended
Total fat	35-36%	No more than 30%
Saturated fatty acids	14% of calories	Less than 10% of calories
Mono-unsaturated	13-14% of calories	10-15% of calories
Polyunsaturated	6% of calories	Up to 10% of calories

Source: National Cholesterol Education Program

Applying the Guidelines to Calorie Recommendations

Age	Total Calories*	Calories from Fat	Grams of Fat
7-10			
boys	2,000	600	67
girls	2,000	600	67
11-14			
boys	2,500	750	83
girls	2,200	660	73
15-18			
boys	3,000	900	100
girls	2,200	660	73

*Average daily calorie amounts; individual needs may vary due to exercise and other health needs.

Prepared by Elisabeth Schafer, Ph.D., Iowa State University extension nutrition specialist and Diane Nelson, Iowa State University extension communications specialist.

Programs and activities of the Cooperative Extension Service are available to all without regard to race, color, national origin, religion, sex, age or disability.

In cooperation with NCR Educational Materials Project

Issued in furtherance of Cooperative Extension work. Acts of Congress of May 8 and June 30, 1914, in cooperation with the U.S. Department of Agriculture and Cooperative Extension Services of Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin. Robert M. Anderson, Jr., director, Cooperative Extension Service, Iowa State University of Science and Technology, Ames, Iowa 50011.