

PREVENTIVE CARE RECOMMENDATIONS PEDIATRIC AGES 0-10

CLINICAL CRITERIA FOR DIAGNOSING FAMILIAL HYPERCHOLESTEROLEMIA (FH)

CLASSIFICATION

1. Probable heterozygote - (meets one of the following):
 - Isolated case age <20 with a total cholesterol \geq 310 mg/dl
 - Isolated case meets “100% probability” criterion for LDL cholesterol (\geq 240) [see criteria chart below]
 - Isolated case meets “general population” criterion for LDL cholesterol (\geq 200), and has strong family history of early CAD or has first, second or third degree relatives with appropriate criteria for total or LDL cholesterol

2. Definite heterozygote - (meets one of the following):
 - Pediatric patient meets either total or LDL cholesterol criteria for first, second or third degree relative, and that relative has a previous diagnosis of FH
 - LDL cholesterol \geq 260 mg/dl
 - 2 or more first degree relatives meet “general population” criterion for LDL cholesterol (\geq 200)
 - Patient meets “100% probability” criterion for FH (LDL \geq 240), and an adult relative meets appropriate first, second or third degree criterion for LDL or a pediatric first, second or third degree relative meets appropriate total or LDL cholesterol criteria for their degree of relation to the patient. Both the patient and the relative will be FH positive

3. Definite homozygote (meets the following):
 - Total cholesterol > 650 in non-jaundiced patient age < 20 with triglycerides < 200 mg/dl and both parents meet criteria for definite heterozygote

CRITERIA

Population	Total Cholesterol	LDL Cholesterol
First Degree Relative	220	155
Second Degree Relative	230	165
Third Degree Relative	240	170
General Population	270	200
“100% Probability”	-----	240

Excerpts from “Clinical Criteria for Diagnosing Familial Hypercholesterolemia (FH) in MedPed” April 27, 1998