

# Experts dispute value of checking kids' blood pressure

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Task force finds insufficient data to support testing, but others say it's essential.

(HealthDay)—Despite a worrisome increase in obese and hypertensive children and teens, not enough evidence exists to justify routinely screening young people for high blood pressure, a new report says.

The U.S. [Preventive Services](#) Task Force reviewed existing research and concluded that it's unclear whether treating high blood pressure in children and adolescents controls [hypertension](#) long-term or leads to better [heart health](#) in [adulthood](#).

Given the lack of convincing evidence either for or against screening, the panel has decided not to make any recommendation. However, it is calling for more research on the benefits and risks of screening.

The task force report, published online Feb. 25 in the journal *Pediatrics*, said doctors considering whether to screen or not should take into account "current scientific research, expert opinion, their own knowledge and experience, as well their patient's [health history](#) along with the preference of the patient and family."

In the United States, between 1 percent and 5 percent of children and teenagers have high blood pressure, and among obese youth, the rate is higher—11 percent, the task force said. The rise in childhood hypertension seen over the last few decades is probably a result of the [obesity epidemic](#), the task force added.

In light of this increase, the panel's stance concerns some doctors.

"I hope pediatricians when they read this don't think because there is no established direct correlation between screening for hypertension [in kids] and [cardiovascular risk factors](#) in adulthood that screening doesn't need to be done," said Dr. Ana Paredes, director of renal research at Miami Children's Hospital in Florida, who had no part in the report.

"It is extremely important to screen children and adolescents for hypertension," she said. "That's the official position of the American Academy of Pediatrics."

The academy also says that if high blood pressure persists, it can lead to [heart failure](#) or stroke in adulthood.

Paredes said she sees many young patients with high blood pressure today. "We are having an epidemic of hypertension, mainly in preteens and teenagers, related to overweight and obesity," she said.

However, Paredes doesn't believe most children with high blood pressure need to take medications to lower their pressure or to reduce cholesterol.

The first approach involves lifestyle changes, including a healthy diet and lots of exercise, which usually reduce blood pressure, she said.

Only a few children with special medical problems would need to take blood pressure or cholesterol medications, she added.

The task force statement applies only to children and teens with no signs or symptoms of a health problem such as kidney trouble or diabetes. In those cases, controlling high blood pressure could be part of the treatment.

Task force member Dr. Kirsten Bibbins-Domingo, said, "We are all concerned about preventing cardiovascular disease, and hypertension in adults is a very important risk factor that when we treat actually helps prevent cardiovascular disease."

However, "in children there is not enough solid evidence to suggest that identifying and treating hypertension in childhood actually helps in this prevention," she added. "There is not enough solid evidence to make a recommendation for or against identifying high blood pressure in childhood and treating it."

Bibbins-Domingo, who is an associate professor of medicine and epidemiology and biostatistics at the University of California, San Francisco, said it's up to individual doctors whether or not to screen children and teens.

Further research is needed to settle the issue, she suggested. This includes assessing any adverse effects of screening, including labeling and anxiety, the task force said.

Another expert believes screening children and teens for [high blood pressure](#) is worthwhile even without a lot of data to support it.

"Screening children and adolescents for elevated blood pressure allows for earlier detection and has the potential to allow effective lifestyle modification to begin earlier in life," said Dr. Gregg Fonarow, a spokesman for the American Heart Association and a professor of cardiology at the University of California, Los Angeles. This could reduce the risk of death and disability from cardiovascular disease in adulthood, he explained.

This review did not identify any studies directly evaluating the effects of blood pressure screening on health outcomes, Fonarow noted.

"However, a number of studies were identified that showed that when elevated [blood pressure](#) was identified it could be safely and effectively lowered in [children](#) and adolescents," he said.

The task force, an independent group of experts in prevention and evidence-based medicine working to improve Americans' health, welcomes public comment on this report until March 25.

**More information:** For more on high blood pressure in children, visit the [American Heart Association](#).

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