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Fax'd 1/4/891

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TWIN CITIES

Dear Ellen:

It is good to hear from you after such a long time, in respect to the Conference, Hyperlipidemia in Childhood. Clearly a great deal of thought has already been given to the Conference and you have a superb pair of organizers in Christine Williams and Ernst Wynder. It would be difficult to criticize the specific topics and presenters -- all are first rate and will certainly cover the waterfront.

A little distant from the issue, I would think that if the main purpose were recommendations, then the Conference should be more in a workshop format with many fewer participants. If the purpose (as it appears to be) is state-of-the-art, then the only thing we have to be concerned about in the program is redundance. To contribute to the redundance, there is a significant omission of the Minnesota Heart Health Project and its School programs. Of the four organized community research demonstrations, North Karelia, Pawtucket, Stanford and Minnesota, Minnesota has the most formal program addressed to youth and I enclose the appropriate publications for the Conference organizers to consider. Follow-up on the Class of 1989 project will be complete by 1990 and would be of interest.

I, of course, am flattered to see you have me as keynote speaker and I will be happy to respond to that challenge. Your session chairpersons are

excellent. I agree it would be marvelous to have Joe Stokes in Session II. though I'm not aware that he has any particular experience with risk factors in children.

There may be a problem of overlap between "screening for risk factors in school" and "cholesterol screening in children". It might be a bit more logical to first have the background of cholesterol and lipoproteins in children and then have next the screening and education in children, broken down into categories of medical office setting, school setting, and community setting. Now Section III seems a little out of place and Section II and Section IV are considerably overlapping. Section V is very appropriately placed but it's addressed entirely to the medical approach and totally omits the community approach. It would be good to have someone like Jack Farquhar or Cheryl Perry, along with Christine Williams, to talk about population-wide, school-wide, community-wide interventions whereas Section V now is entirely concentrated on the individual hyperlipidemic child. At any rate, there surely needs to be a section on intervention at the population level. Section VI is superb and is part of the community approach but is better left separate and highlighted as it is.

In summary, this is a first-class effort with excellent participants and appropriately timed. I have suggested that Section I stand as is, Section III become Section II, Section III be cholesterol screening in children or be broken down into two sections; one on the medical setting and one on the school and community setting. I am proposing that Section IV be the current Section V, the high risk intervention, Section VI be intervention at the school and population or community level and Section VII be the industry role in intervention. That's surely more advice than you need!

Henry Blackburn, MD Professor and Director

Enclosure

/nmf

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bpc: VR. Luepker

₩. Perry

C. Williams

Æ. Wynder