

prophylaxis. Because compliance is a major concern in long-term drug therapy, every effort is made to encourage adherence to the therapeutic plan (see [Compliance, Chapter 20](#)). When compliance is poor, monthly injections may be substituted for daily oral administration of antibiotics, and children need preparation for this often-dreaded procedure.

Interventions for ARF are primarily concerned with providing rest, adequate nutrition, and management of cardiac symptoms or chorea. One of the most disturbing manifestations of ARF is **chorea**. The onset is gradual and may occur weeks to months after the illness. Sometimes mistaken for nervousness, clumsiness, or inattentiveness, it is usually a source of great frustration to the child because the movements, incoordination, and weakness severely limit physical ability. It is important that parents and teachers are aware of the involuntary, sudden nature of the movements and that the movements are transitory and will eventually disappear.

Children with RHD will need lifelong follow-up, education, and management of HF and monitoring for progressive valve disease. If surgery is required, preparation for the procedure is provided. An important aspect of postoperative care is education about anticoagulation medications and follow-up.

Hyperlipidemia (Hypercholesterolemia)

Hyperlipidemia is a general term for excessive lipids (fat and fatlike substances); **hypercholesterolemia** refers to excessive cholesterol in the blood. **Dyslipidemia** is a term used to describe all abnormalities in lipid metabolism, including low levels of high-density lipoprotein (HDL) or “good” cholesterol, high low-density lipoprotein (LDL) or “lousy” cholesterol or high triglycerides. Abnormal lipid or cholesterol levels play an important role in producing atherosclerosis (fatty plaque on the arteries), which eventually can lead to coronary artery disease, which is a primary cause of morbidity and mortality in the adult population. A presymptomatic phase of atherosclerosis begins in childhood/adolescence, providing the template for later clinical disease. Preventive cardiology focuses on the identification of high risk patients and management of lipid levels in childhood/adolescence.