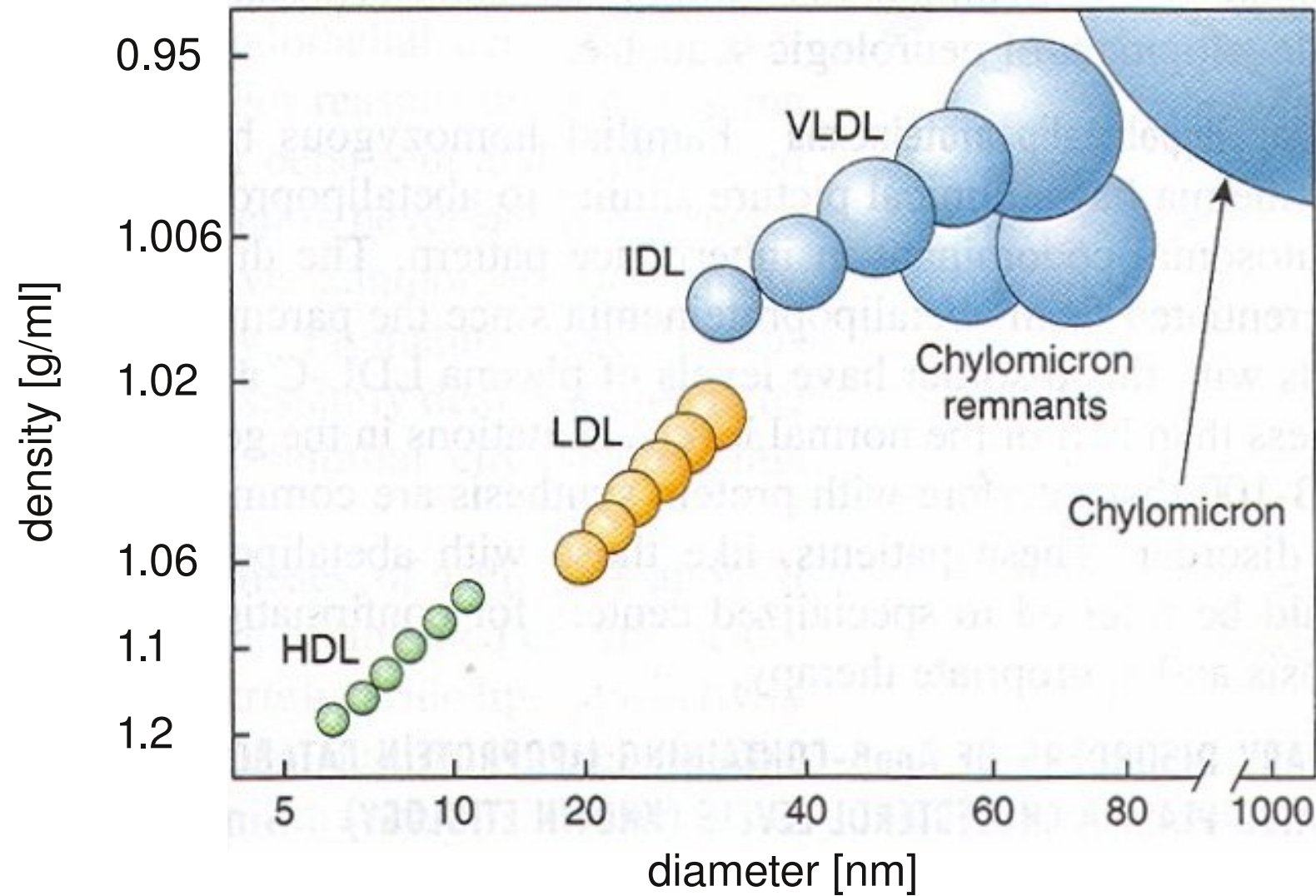


**Laboratory diagnosis of lipid metabolism,  
risk factors of atherosclerosis**

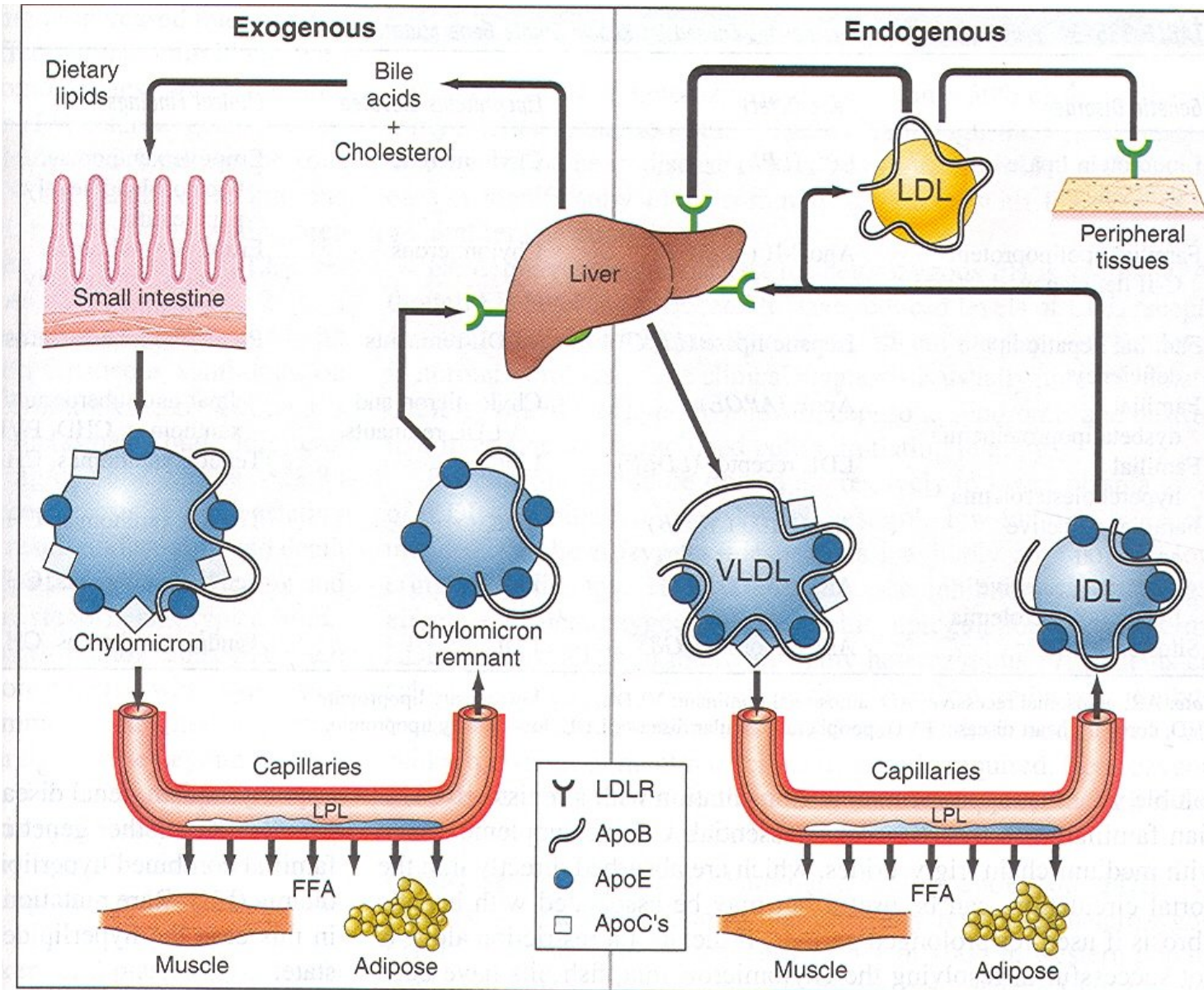
# Density and diameter of lipoprotein particles



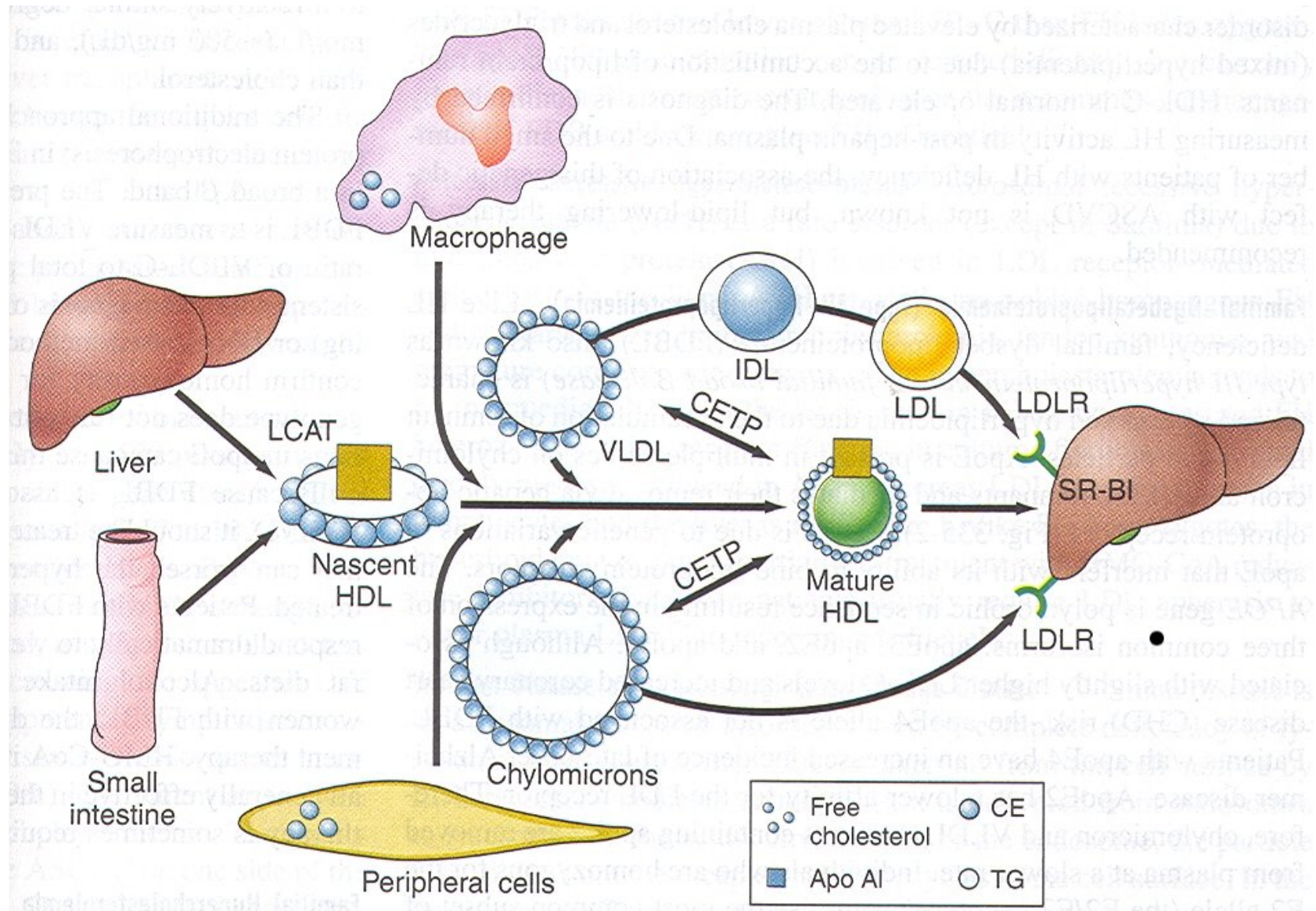
# Characteristics of lipoprotein classes

	Density [g/ml]	Size [nm]	Elfo mobility	Apolipoproteins
Chy	0.93	75–1200	start	B-48, A, C
Chy-remnant	0.93–1.006	30–80	slow pre-beta	B-48, E, A, C
VLDL	0.93–1.006	30–80	pre-beta	B-100, E, A, C
IDL	1.006–1.019	25–35	slow pre-beta	B-100, E, C
LDL	1.019–1.063	18–25	beta	B-100
HDL	1.063–1.21	5–12	alpha	A, E, C

# Metabolism of chylomicron and VLDL particles



# Metabolism of HDL particles, reverse cholesterol transport



# Frederickson classification of hyperlipoproteinemias

Type	I	IIa	IIb	III	IV	V
Increases	Chy	LDL	LDL+VLDL	Chy+IDL	VLDL	Chy+VLDL
TG	↑↑↑		↑↑	↑↑	↑↑	↑↑↑
Ch	↑	↑↑↑	↑↑	↑↑	↑	↑↑

# Most frequent causes of secondary hyperlipoproteinemias

- obesity
- diabetes mellitus
- hypothyreosis
- renal diseases (nephrosis, ESRD)
- cholestasis
- alcoholism
- estrogen treatment
- glycogen storage diseases

# Classic and new risk factors

- male sex
- high total Ch
- high LDL-C
- low HDL-C
- high TG
- hypertension
- IGT, DM
- LP(a)
- homocysteine
- CRP
- fibrinogen
- tissue plasminogen act. (t-PA)

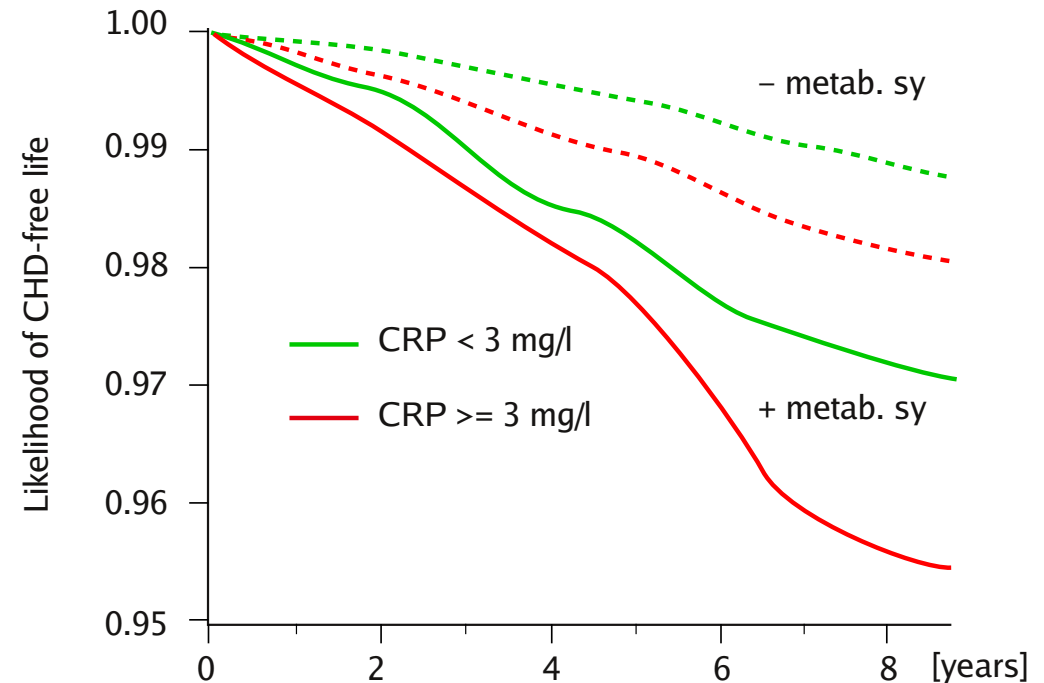
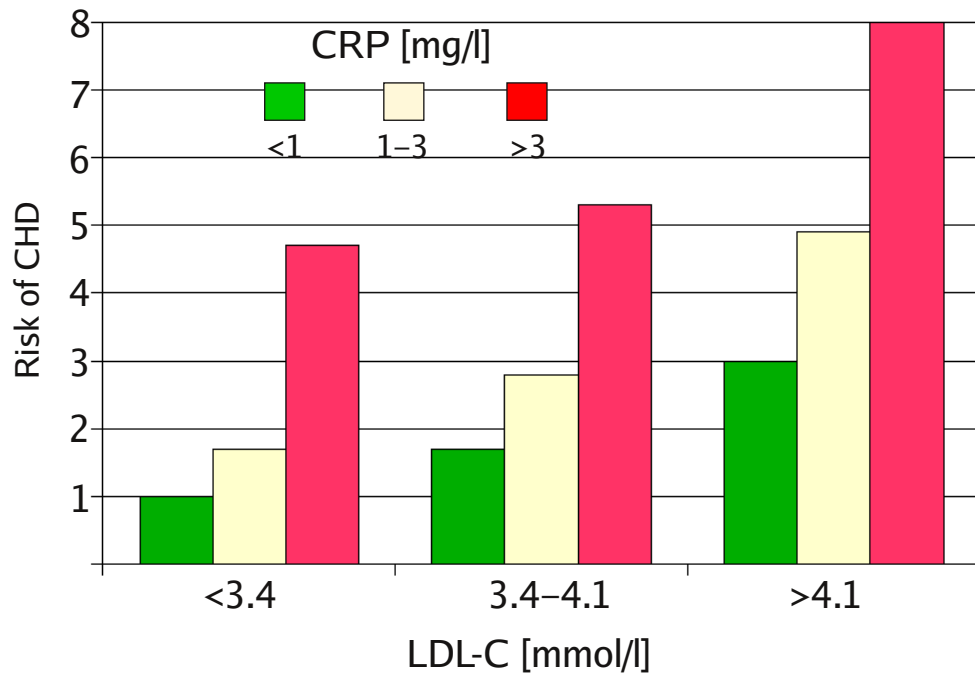


# Metabolic syndrome

is diagnosed if any 3 holds of the following:

- androgenous obesity (waist > 102/88cm male/female)
- high TG (>1.7mmol/l)
- low HDL-C (<1/1.3 mmol/l male/female)
- high BP ( $\geq 140/90$  mmHg)
- insulin resistance (IFG, IGT, DM)

# CRP is an independent risk factor



This is the CRP concentration measured when there is no inflammation. CRP levels increase to very high values during inflammatory reactions.