

HYPERLIPIDEMIA



BASIC INFORMATION

DESCRIPTION

Hyperlipidemia is the medical term used to describe having high amounts of lipids in the blood. Lipids, such as cholesterol and triglycerides, are fat or fat-like substances that maintain important body functions. They travel in the bloodstream attached to proteins. The lipid-protein combinations are called lipoproteins. Lipoproteins help the lipids get absorbed by the body's cells. Hyperlipidemia is called primary if it is inherited and secondary if it is caused by illness or other health problem. Subcategories of hyperlipidemia include:

- Hypercholesterolemia (high levels of cholesterol).
- Hypertriglyceridemia (high levels of triglycerides).
- Hyperlipoproteinemia (high levels of lipoproteins).

FREQUENT SIGNS AND SYMPTOMS

- There are usually no symptoms. It may be discovered on routine blood studies.
- There may be pinkish-yellow deposits of fat in the skin beneath eyes, elbows, and knees, and in tendons.

CAUSES

• There are five types of lipoproteins—defined by size and density. Two types carry cholesterol and the other three types carry triglycerides.

- Cholesterol is carried through the blood by high-density lipoproteins (HDL) and low-density lipoproteins (LDL). High levels of LDL and/or low levels of HDL can increase the risk of heart disease and stroke.

- Triglycerides are carried by three lipoproteins. These are very low-density lipoprotein (VLDL), intermediate density lipoproteins (IDL), and chylomicrons. High triglyceride levels may increase the risk of heart disease and stroke.

• Guidelines suggest that to reduce risks, HDL should be above 40, LDL should be below 130, and triglycerides should be below 150, for most people.

RISK INCREASES WITH

- Hereditary factors.
- A diet that is high in fat and cholesterol.
- Illness or medical problems, such as diabetes, hypothyroidism, nephrotic syndrome, alcoholism, or obstructive liver disease.
- Sedentary lifestyle (lack of physical activity).
- Age. Males over 40 and females over 55.

PREVENTIVE MEASURES

- Exercise daily. Maintain a healthy weight. Eat a healthy diet.
- Don't smoke or use excess amounts of alcohol.
- Get a medical test to check your blood levels of cholesterol and triglycerides.

EXPECTED OUTCOMES

Usually treatable or controllable with diet and drugs.

POSSIBLE COMPLICATIONS

Atherosclerosis (fatty deposits on artery walls). This is a major cause of coronary heart disease and stroke.



DIAGNOSIS & TREATMENT

GENERAL MEASURES

- Your health care provider may do a physical exam and ask questions about any symptoms. For diagnosis, a blood study will be done to measure blood lipids.
- Treatment will depend on the results of your blood studies, your health risks, and other medical problems.
- For some patients, an altered diet and lifestyle changes may be sufficient for treatment. Others may require drugs to reduce blood lipids.
- Emotional stress can increase the risk of heart disease. Look for ways to reduce stress in your life. Learn relaxation methods.
- Quit smoking. Find a way to stop that works for you.

MEDICATIONS

- Many different drugs are now prescribed to control blood lipids. Your health care provider will discuss the options, and their risks and benefits with you.
- Drugs to treat diseases, such as high blood pressure, diabetes, or thyroid conditions may be prescribed.

ACTIVITY

Regular exercise is helpful for reducing weight, staying fit, and controlling stress. It might help in increasing the body's ability to clear fat from the blood after meals.

DIET

- Eat a diet that is low in fat (particularly saturated fat). Eat a high fiber diet with plenty of fruits and vegetables. Medical advice on a proper diet may be helpful.
- Lose weight, if you are overweight. The more overweight you are, the more lipids your body produces.
- Reduce alcohol intake.



NOTIFY OUR OFFICE IF

- You or a family member has symptoms or a family history of hyperlipidemia.
- New, unexplained symptoms develop.

Special notes:

More notes on the back of this page