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Prevalence of dyslipidemia and atherogenic risk among type-2 diabetic outpatients in teaching hospital

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Dyslipidemia is major risk factor of cardiovascular diseases and concurrently, CVDs are responsible for 68% cause of mortality among type-2 diabetes. The study aimed to determine dyslipidemia and atherogenic index, among type-2 diabetic outpatients. A cross sectional study was conducted. The waist circumference, fasting blood glucose, HbA1c, serum total cholesterol, triglyceride, high density lipoprotein, low-density lipoprotein, coronary risk and atherogenic index were determined. Sociodemographic data were collected with questionnaire. Data were analyzed using SPSS version 23. Out of 152 subjects, 37 (24.3%) were males and 115 (75.7%) were females. The prevalence of hyperglycemia was 74.3%. The prevalence of single dyslipidemia, combined dyslipidemia and mixed dyslipidemia were 63.8%, 15.8% and 1.3%, respectively. Also, 35.3% of subjects had high coronary risk and 5.3% had high atherosclerosis risk. Coronary risk was strongly associated with TC, (r=0.690, p<0.0001) and LDL-C, (r=0.783, p<0.0001). Additionally, atherosclerosis risk was strongly associated with TG, (r=0.817, p<0.0001) and VLDL-C, (r=0.817, p<0.0001). Logistic regression showed TC, TG, LDL-C had significant effects on coronary risk for cardiovascular diseases (TC: OR=2.640, 95% CI=1.879-3.708, p<0.0001, TG: OR=2.549, 95% CI=1.342-4.841, p=0.004, LDL-C: OR=4.858, 95% CI=2.902-8.135, p<0.0001, respectively). Atherogenic dyslipidemia was high among type-2 diabetics and was significantly associated with high coronary and atherosclerosis risk. Atherogenic dyslipidemia is predisposing factor of CVDs among type-2 diabetics, putting them to high risk of mortality.

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