

Poster presentation

Impact of fasting bloods on hypertriglyceridemia

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Purpose of the study

Abnormalities of lipid metabolism are common in HIV-infected patients and are accentuated in those receiving antiretroviral therapy, particularly with ritonavir. The measurement of non-fasting triglyceride levels is not currently common place as no standard values have been developed. The purpose of this study is to identify whether routine non-fasting bloods obtained in clinic are representative of lipid levels when compared to fasting levels.

Methods

Patients identified as having triglyceride levels above 3.0 mmol/l were requested to return for fasted sampling prior to consideration for potential intervention.

Summary of results

- 34 patients with elevated triglyceride levels were included
- All were males with a mean age of 47(± 8.6) years

See Table 1.

76% of patients had a reduction in their triglyceride levels with repeated fasting. 81% of patients had a reduction in their HDL:Cholesterol ratio when bloods were repeated fasting. Both these results were statistically significant at a confidence interval of 95%.

Conclusion

All individuals should routinely have their bloods taken in the fasting state. Failure to do so may result in the inap-

propriate initiation of lipid-lowering agents or potential treatment changes.

Table 1: Results of lipid levels when fasted.

Biochemical marker	n of group	Mean routine lipid levels (mmol/l)	Mean percentage reduction with fasted bloods	95% CI
Cholesterol	34	6.04(± 1.2)	-4.6%	-10.27%, 1.00%
HDL:Cholesterol ratio	11	7.11(± 1.92)	-35.4%	-56.27%, -14.57%
Triglyceride level	34	5.29(± 2.9)	-29.5%	-41.33%, -17.64%

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