

# Dyslipidemie (of beter: “Lipids, lipoproteins and metabolism”)

F.L.J. Visseren

28 maart 2023

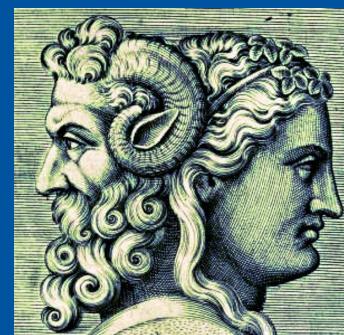
NVHV - CNE



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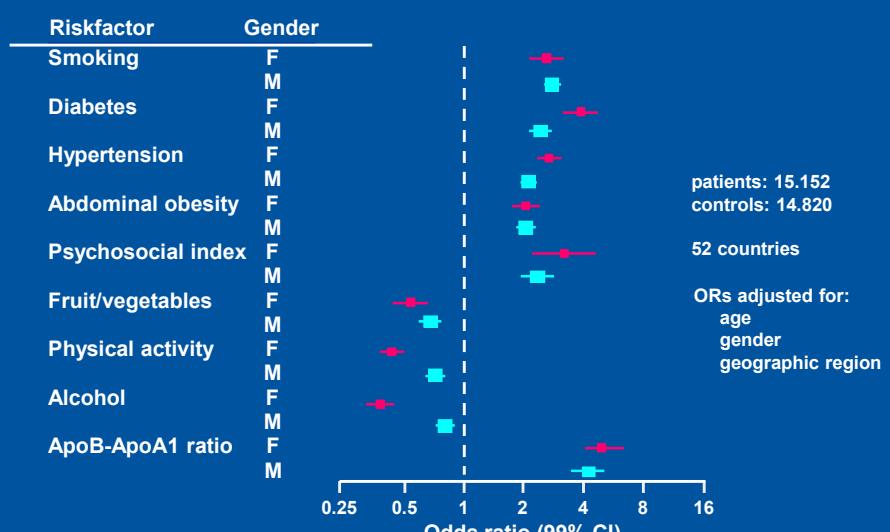


“.... Cholesterol is a Janusfaced molecule. The very property that makes it useful in cell membranes, namely its absolute insolubility in water, also makes it lethal. ”



## Most important risk factors for MI (INTERHEART study)

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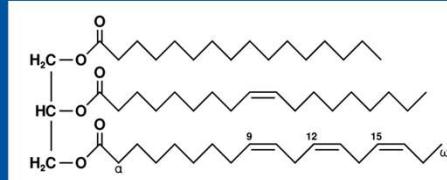
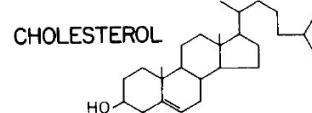


Yusuf S et al. Lancet. 2004;364:937-52.

## Lipids

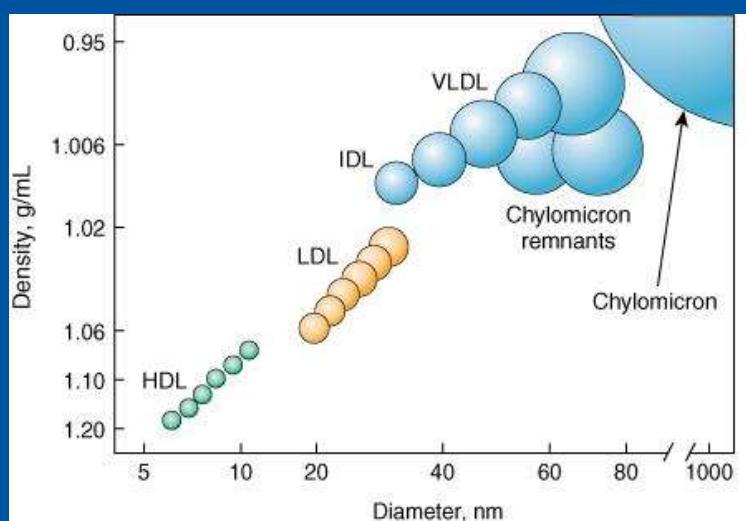
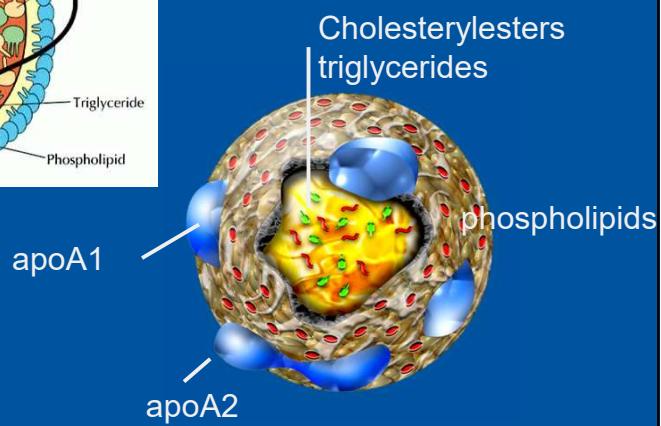
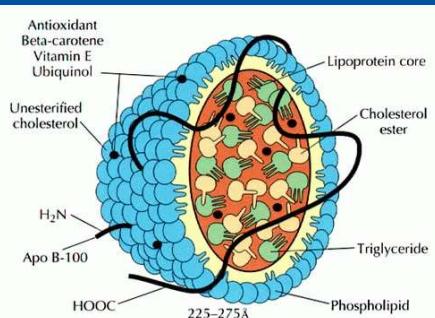
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- Cholesterol
- Triglyceride

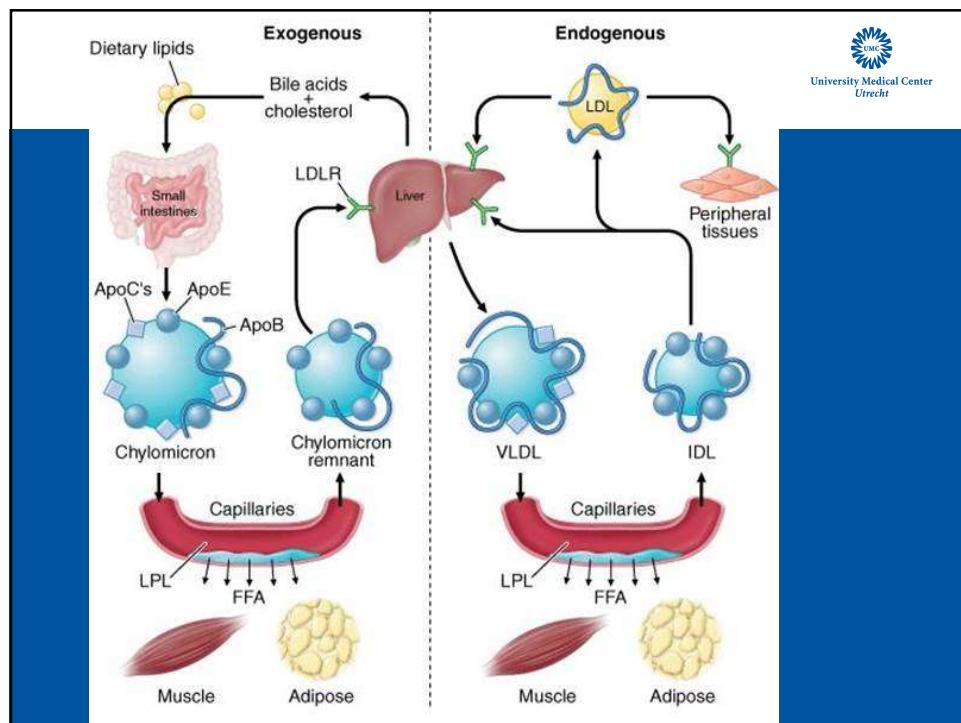
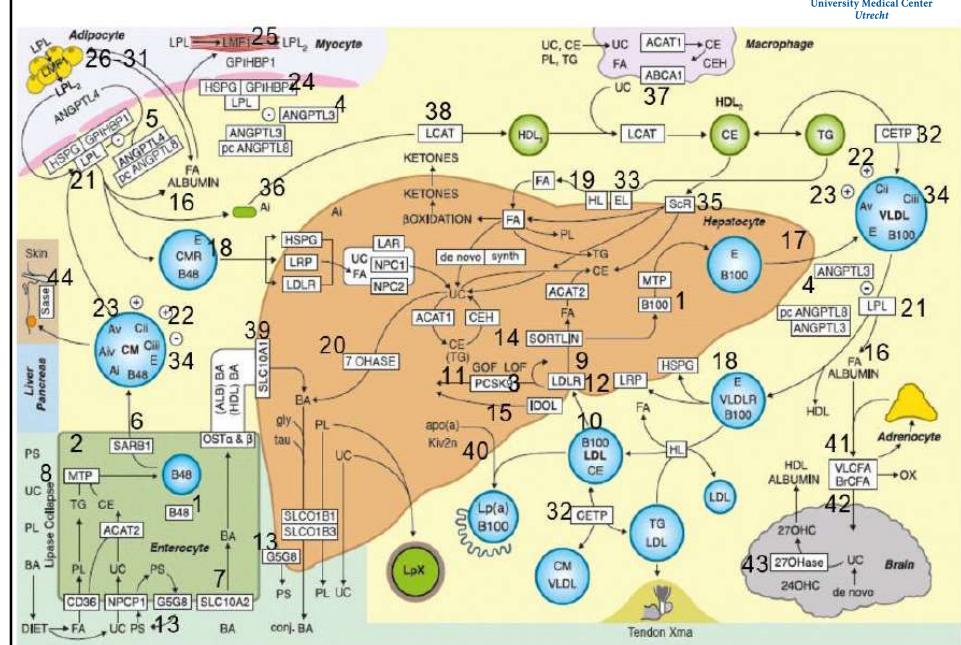


## Het draait om lipoproteinen

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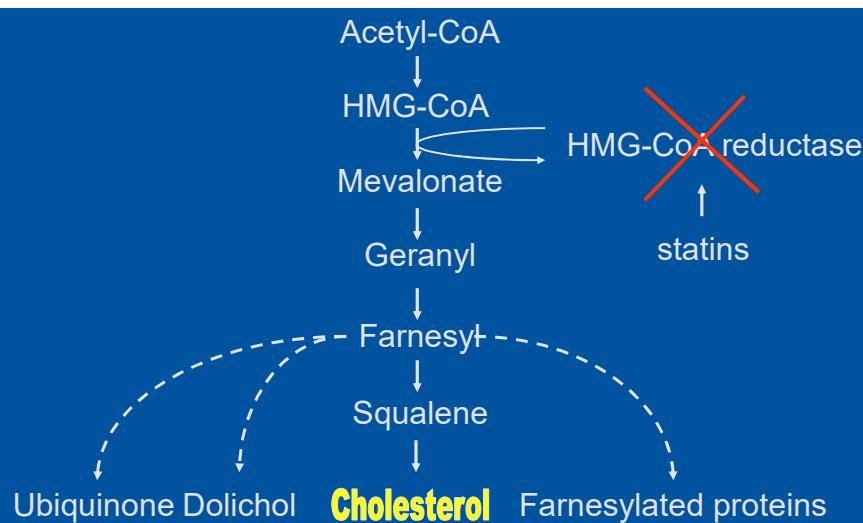
## Hoe denkt een internist over cholesterol?



## Why do we need cholesterol and lipoproteins?

- Component of cell membranes
  - *Physical and biological properties*
  - *Myelin structure*
- Synthesis of steroid hormones
  - *Cortisol*
  - *Aldosteron*
  - *Sex hormones: estrogen, testosterone*
- Synthesis of bile acids
  - *Formation of bile*
  - *Digestion of fatty foods*
- Transport of fat-soluble vitamins

## Mevalonate pathway



Goldstein et al., Nature 1990

## Stel een diagnose!!!



Hypercholesterolemie of  
hypertensie is geen diagnose!!

Hoofdpijn is ook geen diagnose!

## Lipids



*LDL-cholesterol*

The LDL particle is the most  
abundant atherogenic lipoprotein

## Lipiden



*Friedewald formule* (Clin Chem 1972;18:499-502):

$$\text{LDL-c} = \text{TC} - \text{HDL-c} - (0,45 \times \text{TG})$$

## Nuchter meten is meestal niet nodig



### INVITED COMMENTARY

## Fasting for Lipid Testing

*Is It Worth the Trouble?*

### EDITORIAL

## Should We Fast Before We Measure Our Lipids?

Arch Intern Med 2012;172:1705-1706

Arch Intern Med 2012;172:1710-1712

## Differentialdiagnosis of hypercholesterolemia (elevated LDL-c)



- Familial Hypercholesterolemia (FH) **DLCN criteria**
- Hypothyroidism **TSH en vrij T4**
- Nefrotic syndrome **albumine/creat in urine**
- Liverfunction abnormalities **Laat maar zitten .....**
- Polygenic hypercholesterolemia

## Stel een diagnose!!!



- cholesterol ziekte: behandel de ziekte
- cholesterol als risicofactor: behandel het risico

## FH: Experiment of nature



### Familial hypercholesterolemia (FH)

- *Mutation in LDL receptor*
- *Autosomal dominant (1:250)*
- *High plasma LDL levels*
- *High risk of coronary heart disease*
- *Fat deposits (xanthomata) on tendons*



Lancet 362:717, 2003



NEJM 341:490, 1999

## Familial Hypercholesterolemia



arcus lipoides



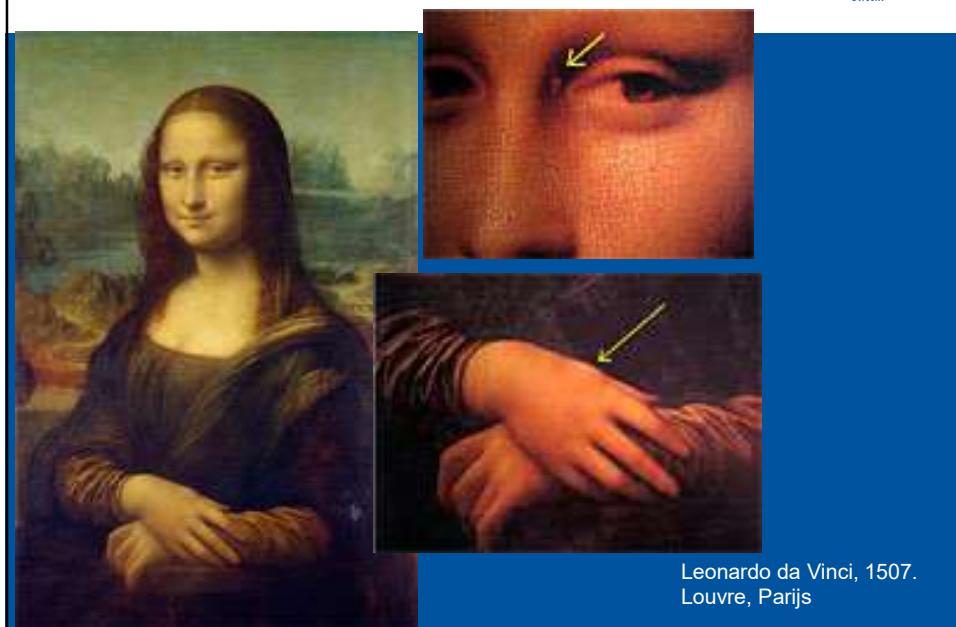
Xanthelasma

## Familial Hypercholesterolemia



Frans Hals, 1633.  
Nat Art Gallery, Washington DC, USA

## Familial Hypercholesterolemia



Leonardo da Vinci, 1507.  
Louvre, Parijs

The Nobel Prize in Physiology or Medicine 1985

"for their discoveries concerning the regulation of cholesterol metabolism"



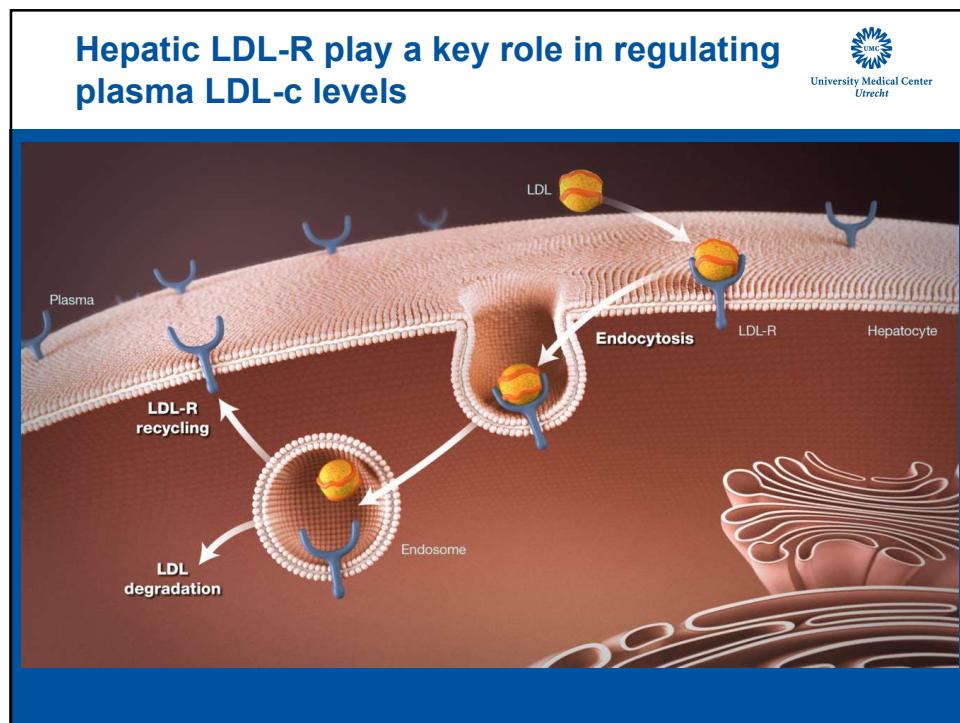
Michael S. Brown      Joseph L. Goldstein

A RECEPTOR-MEDIATED PATHWAY FOR CHOLESTEROL HOMEOSTASIS

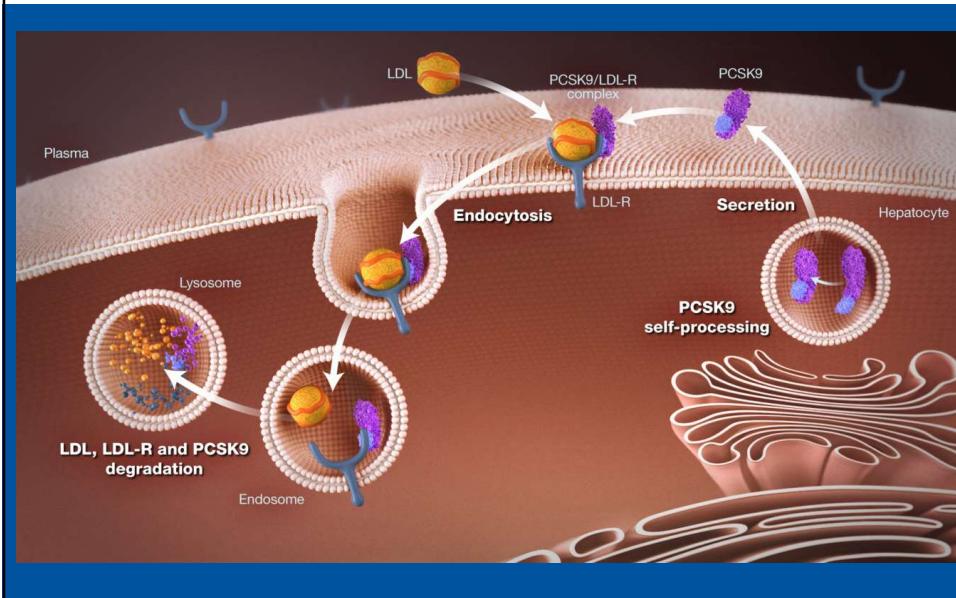
Nobel lecture, 9 December, 1985  
by  
MICHAEL S. BROWN AND JOSEPH L. GOLDSTEIN  
Department of Molecular Genetics, University of Texas Health Science Center, Southwestern Medical School, 5323 Harry Hines Blvd. Dallas, Texas, U.S.A.

[nobelprize.org](http://nobelprize.org)

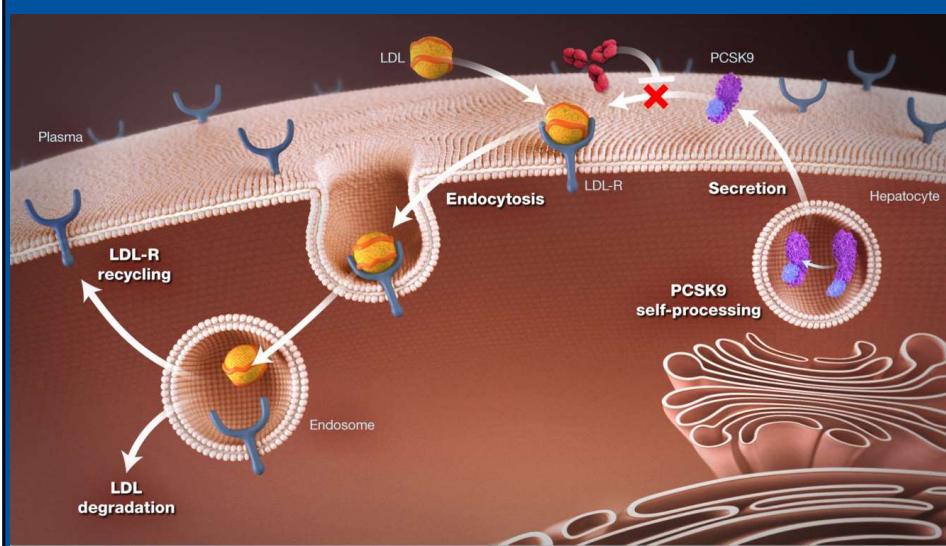
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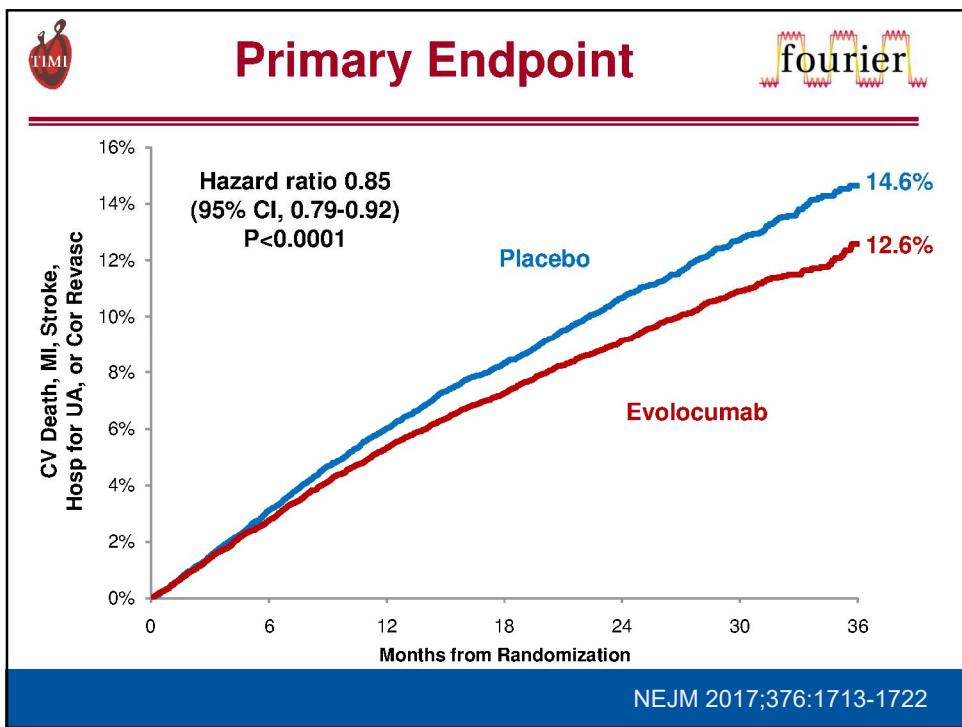
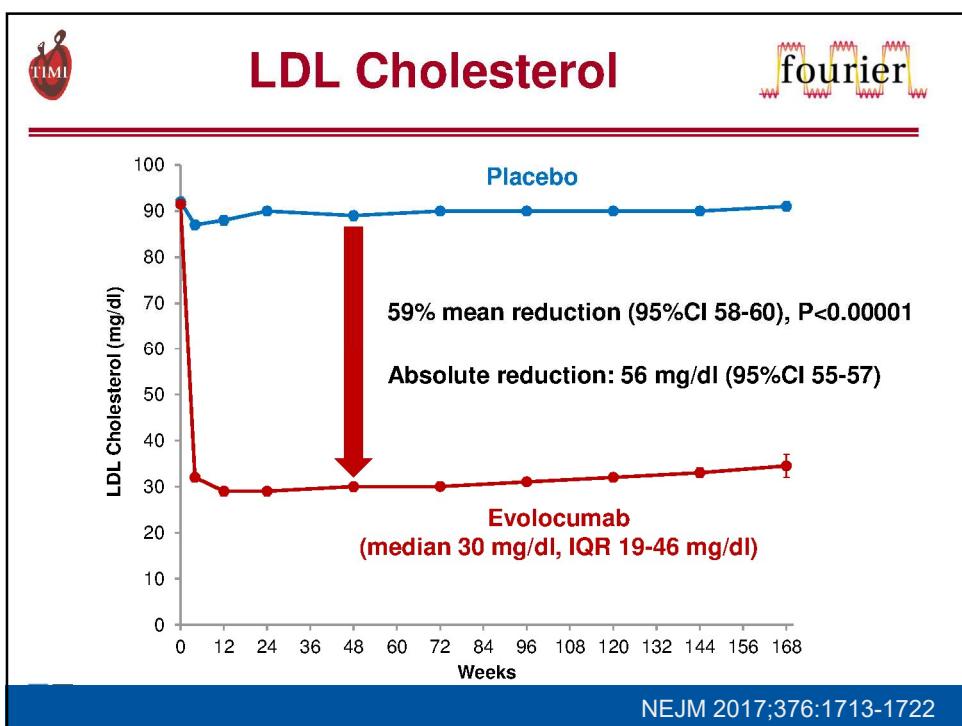


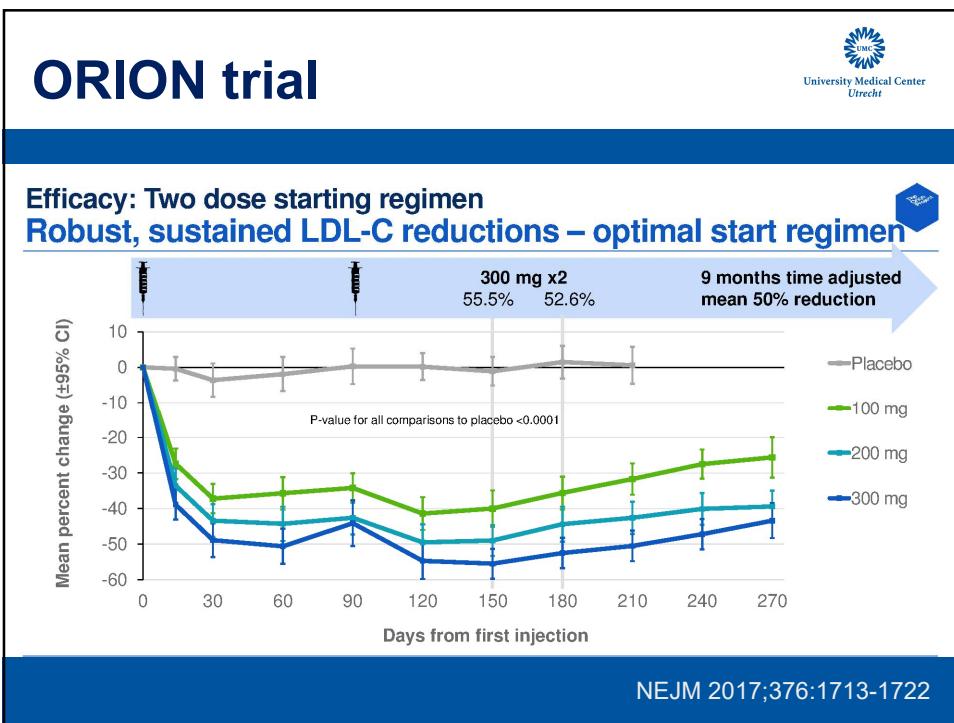
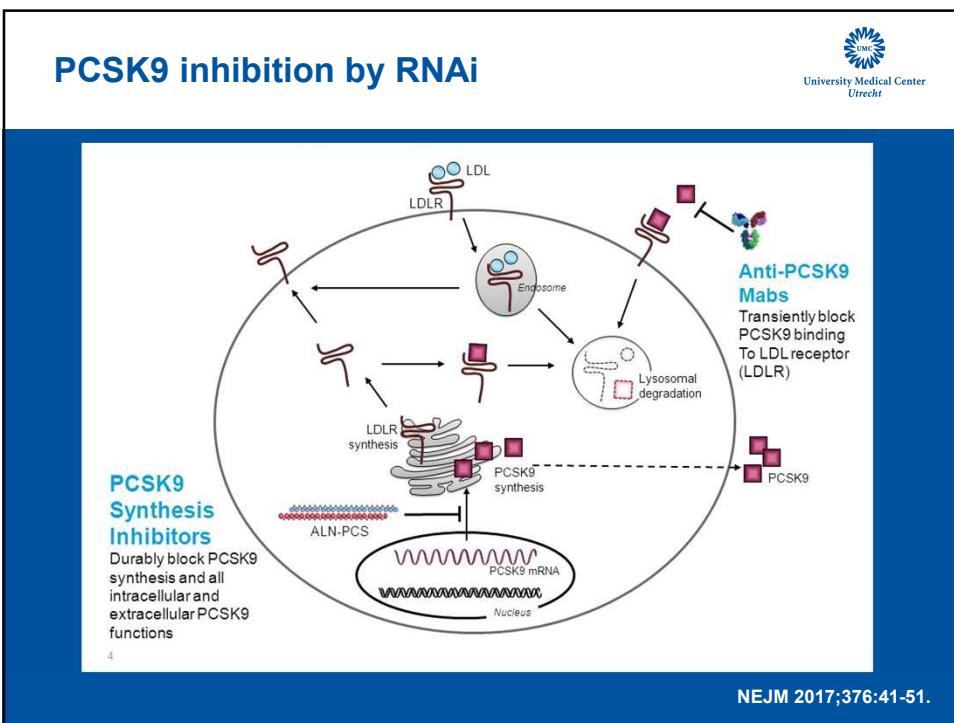
## PCSK9 regulates the surface expression of hepatic LDL-Rs



## Anti-PCSK9 monoclonal antibodies block PCSK9/LDL-R interaction and may lower LDL-C

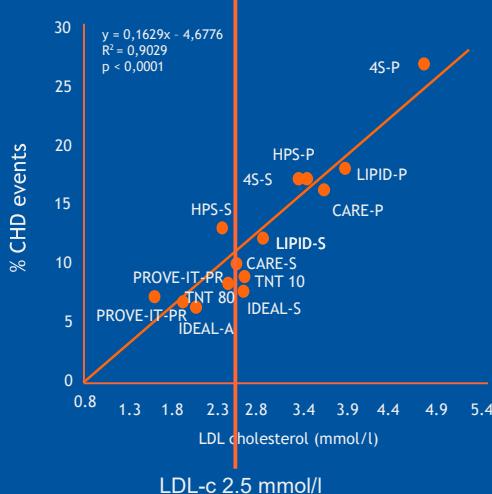






## Wat is the optimal LDL-c treatment goal?

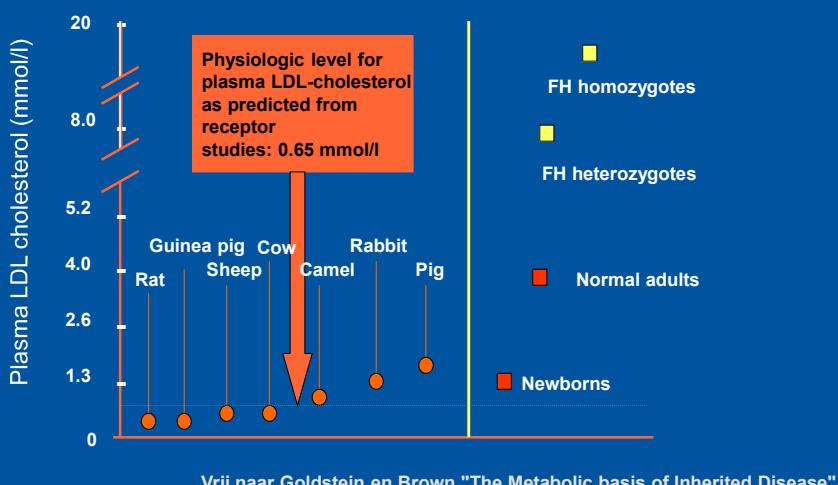
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Adapted from O'Keefe, Jr. et al. JACC 2004;11:2142-2146

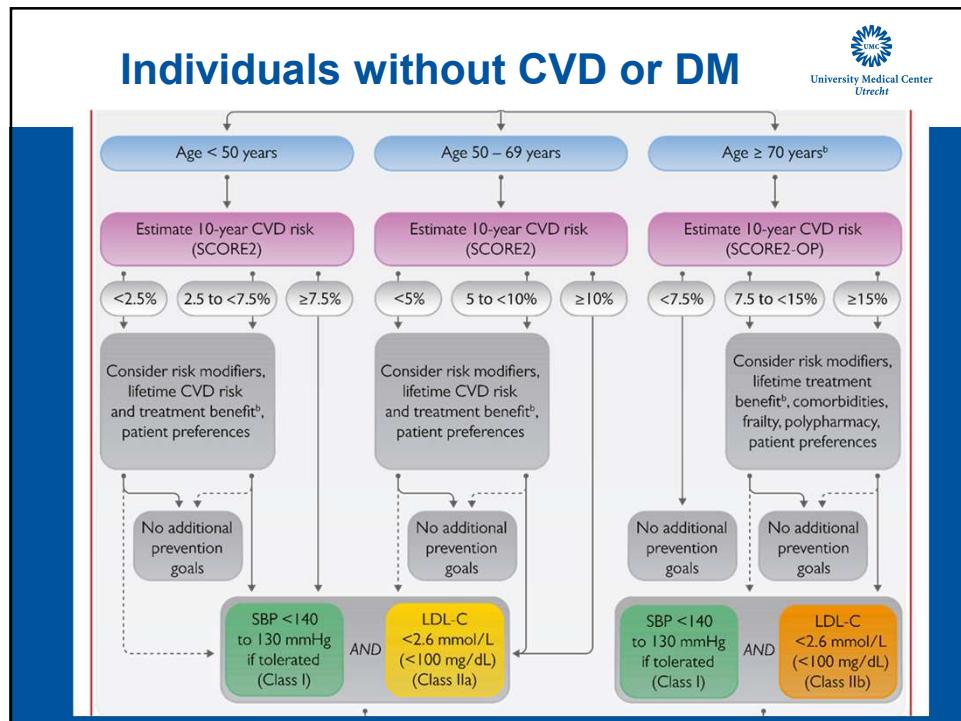
## “Normal” LDL-cholesterol

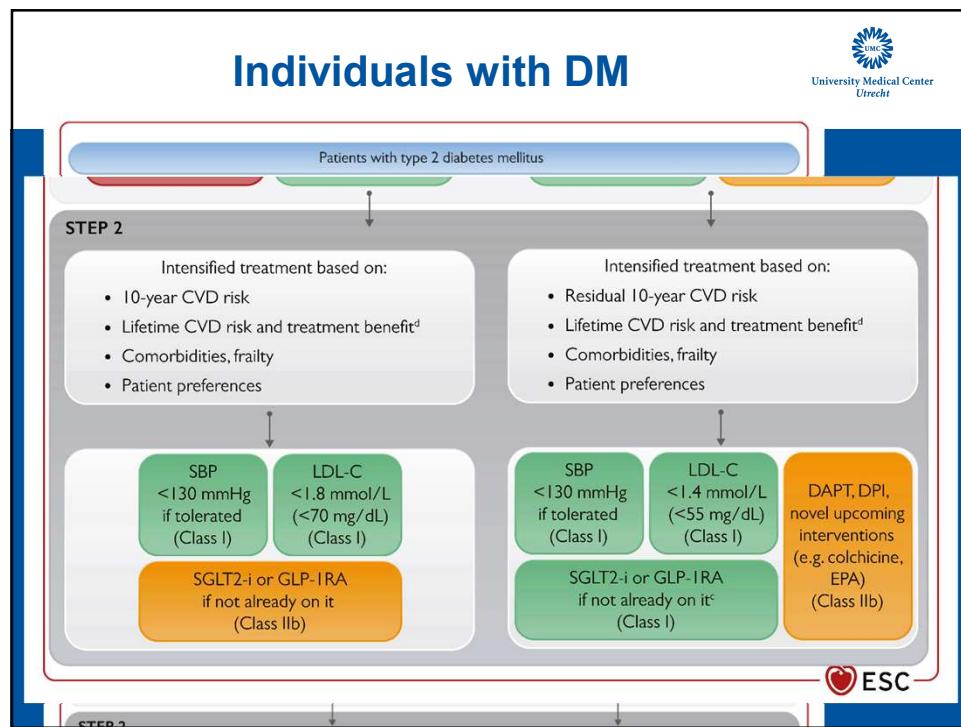
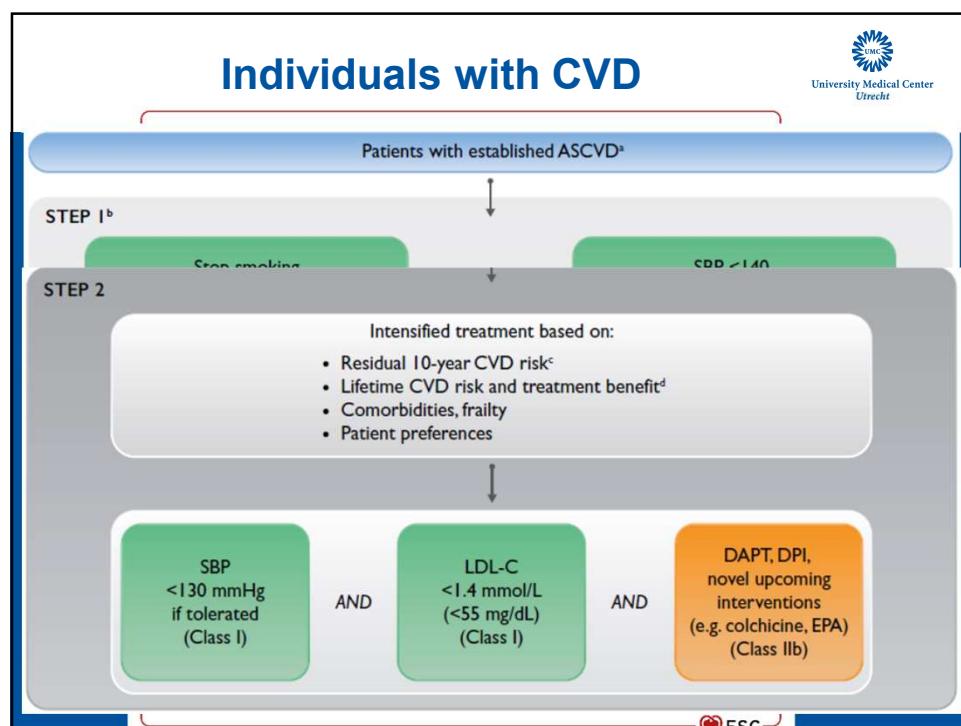
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**Individual 10-year CV risk (SCORE risk table)**

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**Instead of treatment goals, estimation of lifetime treatment benefit to guide treatment**



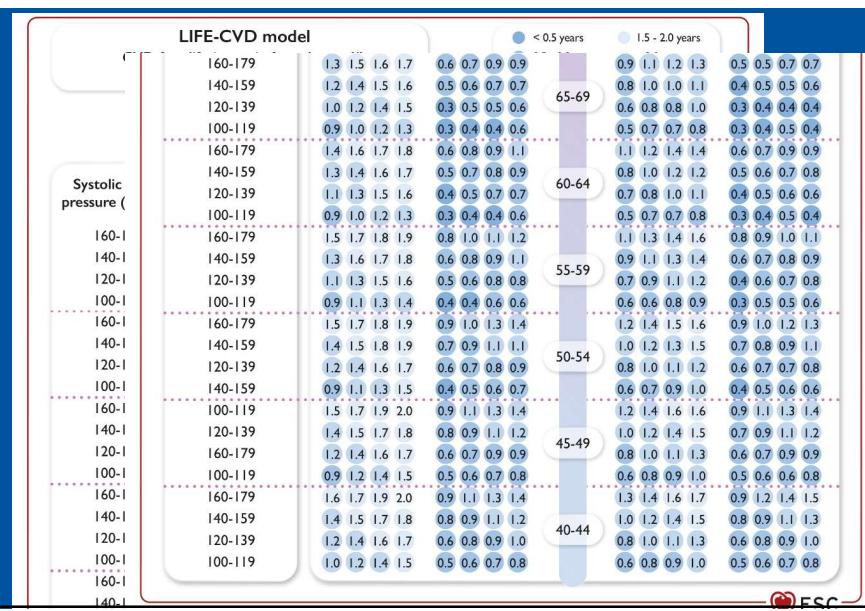
Treatment threshold/goal LDL-c <2,6, <1,8 (<1,4) mmol/l

Calculate lifetime benefit of lipid-lowering treatment



[www.U-Prevent.com](http://www.U-Prevent.com)

**Instead of treatment goals, estimation of lifetime treatment benefit to guide treatment**



## Treatment options for LDL-c lowering



Statins (simva, prava, fluva, atorva, rosuva)

Ezetimibe

PCSK9-mab or si-RNA (evo, ali, inclisiran)

Fibrates (bezafibraat)

Statins: safe, super effective, super cheap

Ezetimibe: safe, moderate effective, super cheap

PCSK9-i: safe, super effective, super expensive

Fibrates: few indications, specialized clinics

## Statine-geassocieerde klachten



- Komt voor, maar is vrij zeldzaam (2-4%?)
- Stoppen statine, herstarten (evt. lagere dosis, andere statine)
- Indien aanhoudende klachten, laagst verdraagbare dosis statine in combi met eze, evt PCSK9-i

