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RESEARCH ARTICLE

POINT OF CARE TESTING FOR TRIGLYCERIDES IN BRAZIL: REGIONS, SEX AND AGE GROUPS

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ABSTRACT

Awareness of the prevalence of high triglycerides in an spontaneous survey in all of Brazilian regions. More recently, attention has increased to triglycerides, in particular, especially for its possible relation with remanescent chylomicrons and even Familial Hyperchylomicronemia Syndrome. Although triglycerides not being a major risk factor, it does relate to pro atherosclerotic markers. As to Brazilians controlling triglycerides levels, either by treatment or not spontaneously, in all sexes, age groups and regions, the results in Means are too abnormal. This fact points to preventive interventions and awareness actions by all sanitary politicians, medical and all other health professionals.

INTRODUCTION

Although Brazilian authors have already published results of surveys on samples of lipid profile per age and per region none of them can be characterized as the representative of the entire country's profile. Attention has been given mainly with priority to total cholesterol and its fractions. More recently, attention has increased to triglycerides, in particular, especially for its possible relation with remanescent chylomicrons and even Familial Hyperchylomicronemia Syndrome.

Objective

To evaluate how triglycerides are distributed in the five regions of Brazil, according to categories such as sex and age groups ranges, namely children, adults and elderlies in spontaneous and non-fasting conditions.

METHODS

The total sample analyzed consisted of 14.927 people, both sexes and ages starting at 20 yr old and over 80 yr, classified per two decades of life. The five regions were: Center West (CW), North East (NE), North (N), South Weast (SW) and South (S).

*Corresponding author: Bernardo Montesanti Machado de Almeida Nephrology Department, BP - A Beneficência Portuguesa de São Paulo, São Paulo, Brazil. The assay was done by Point of Care analysis (enzymatic, colorimetric) and sent to a databank using Internet of Things from where the results were extracted.

RESULTS

Sex: Female (F)=51.3%; Age Groups: 20 to 39-21(1)=55%, 40 to 59 (2)=32.32%, 60 to 79 (3)=22.80%, over 80 yr (4)=2.68% and not informed 20.65%. Triglycerides Mean of the total of sample: 272,11 mg/dl (Tg). Interpretation as to groups of results: concentration Less than 175(L), interval 175 to 400 - High (H) and over 400 as Very High (VH). As to participation in regions: CW=7.5%, NE=34.72%, N=14.88%, SE=23,65% and S=19.25%. By ranges in total by %: L=30.65, H=52.85 and VH=16.5. Means by sex: F=251.7 and male 292,16. Means by age group: 1-262,86, group 2: 296,19, group 3: 287,22 and group 4: 246,9. Tg 269,18. Means by region: CW: 269.16, NE: 283,18, N: 286,06, SE: 262 and S: 254,93.

DISCUSSION

Although triglycerides not being a major risk factor, it does relate to pro atherosclerotic markers^[1-8]. Considering that all data came from spontaneous assays, interpretation can be both for baseline values of values evaluating treatments, whether lifestyle or medication, all the mean numbers presented are worrisome.

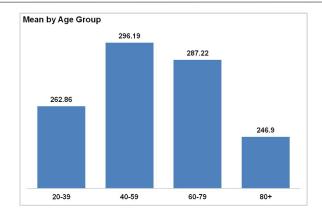


Figure 1. Triglycerides distribution by age group

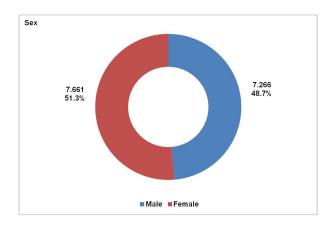


Figure 2. Triglycerides distribution by sex

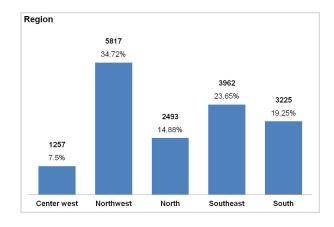


Figure 3. Triglycerides distribution by region

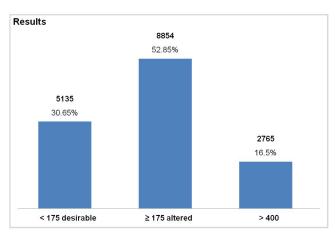


Figure 4. Triglycerides distribution in Total

CONCLUSION

As to Brazilians controlling triglycerides levels, either by treatment or not, spontaneously, in all sexes, age groups and regions, the results in Means are too abnormal. This fact points to preventive interventions and awareness actions by all sanitary politicians, medical and all other health professionals.

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