THE FEATURES OF LIPID PROFILE IN PATIENTS WITH CHRONIC NONCALCULOUS CHOLECYSTITIS AND TYPE 2 DIABETUS MELLITUS

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Chronic noncalculeously cholecystitis (CNC) in patients with type 2 diabetes mellitus (DM-2) occurs more frequently than in the general population. DM-2 is accompanied by disturbances of carbohydrate and lipid metabolism.

The aim: to investigate changes of lipid profile in patients with combined course of CNC and DM-2.

Materials and methods. The study was performed on 40 patients (22 females, 18 males): group 1 (n = 20) - with combined course of CNC and DM-2, group 2 (n = 20) – with isolated CNC. The average age was 47.9 ± 3.7 years, the mean duration of DM-2 was 9.8 ± 1.4 years, the level of HbA1C < 7.5% in all patients. The survey plan included: carbohydrate metabolism (insulin, glucose, HbA1C, HOMA-IR), lipid profile (total cholesterol (TC), triglycerides (TG), low density lipoprotein (LDL), high density lipoproteins (HDL).

Results. Dyslipidemia were significantly more frequent in group 1 than in group 2 (89.4% vs 46.3% respectively, p < 0.05). Hypertriglyceridemia was detected more frequently in patients group 1 compared with patients group 2 (78.2% vs 39.1% respectively, p < 0.05); the levels of TC and LDL in patients group 1 were higher than in group 2 (on average 79.5% and 37.2%; 62.8% and 27.1% respectively, p < 0.05). The level of HDL was lower in patients group 1 than in group 2 (on average 19% and 13% respectively, p < 0.05). The levels of LDL correlated with TC levels (r = 0.68; p < 0.05), with HOMA-IR (r = 0.52; p < 0.05).

Conclusions. It is determined that in patients with CNC and DM-2 dyslipidemia occurs more pronounced than in patients with isolated pathology. The correlation between impaired lipid metabolism and severity of DM-2 is revealed in patients with CNC.