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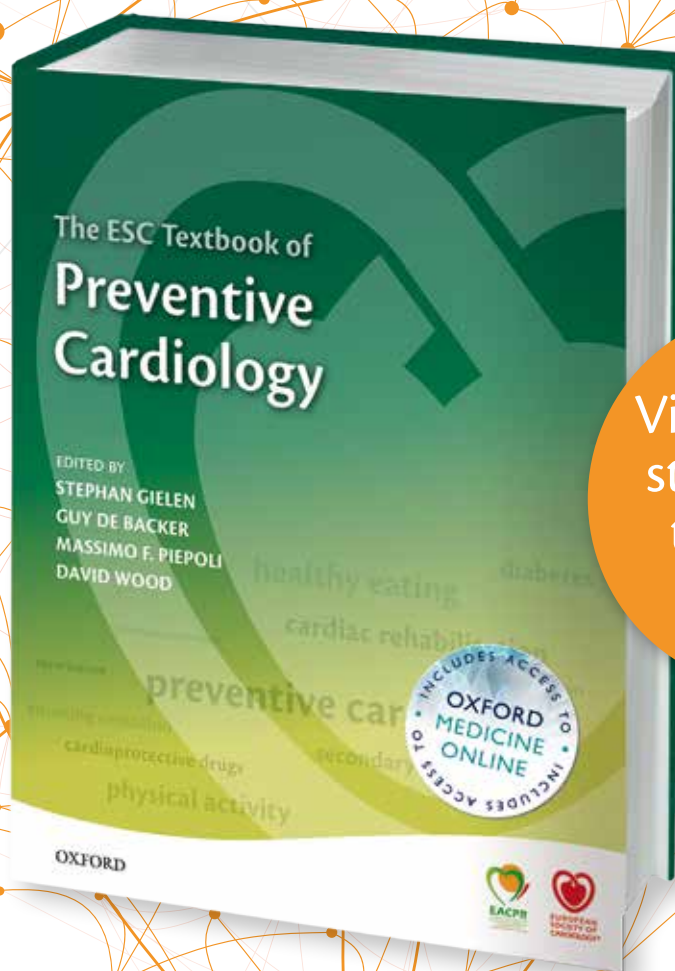
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MAY 2015
978-0-19-965665-3
368 PAGES

Comprehensive, practical, and the official textbook
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OXFORD
UNIVERSITY PRESS

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EFFECT OF PREVENTIVE MEASURES FOR MAJOR METABOLIC PARAMETERS IN PATIENTS WITH NON-ALCOHOLIC FATTY LIVER DISEASE AND CARDIOVASCULAR RISK

Kolesnikova O. V.¹, Nemtsova V.D.²

¹ National Institute of Therapy named by L.T. Malaya NAMS of Ukraine, Kharkov, Ukraine

² Kharkov National Medical University, Kharkov, Ukraine

The purpose - the dynamic assessment of the preventive measures impact on the main metabolic parameters in patients with nonalcoholic fatty liver disease (NAFLD) in combination with obesity with low and moderate cardiovascular risk (CVR).

Materials and methods. In 184 patients aged 40-62 years with NAFLD and obesity with low and moderate CVR was studied the effect of a personalized diet with a gradual reduction of daily energy intake (400 kcal every 2 weeks) and with the dose of physical activity to 250 minutes or more per week in combination with strength training 90 minutes a week on the main of basic anthropometric, metabolic (lipid profile) and hormonal (adiponectin, resistin) parameters and the relative value of CVR. In addition, ursodeoxycholic acid (UDCA) at a dose of 1000 mg/day was recommended to all patients. Evaluation of the data was performed directly before treatment and after 12 months. Adiponectin, resistin, insulin, tumor necrosis factor- (TNF-), C-reactive protein (CRP) in serum were determined by enzyme immunoassay. Assessment of the hepatic steatosis degree and the measurement of the thickness of carotid intima-media complex (IMT) were performed by ultrasound scanner.

Results. Under the influence of the lifestyle modification in NAFLD patients with low and moderate CVR was obtained significant improvement of basic anthropometric parameters: body mass index and waist circumference reduction ($p = 0.0000$), levels of systolic and diastolic blood pressure ($p = 0.005$ and $p = 0.004$, respectively). A significant improvement of the hormonal (increase of the adiponectin level, decrease of the resistin, TNF- , CRP levels, $p < 0.005$) and metabolic (increased cholesterol of HDL and decreased triglycerides ($p=0,05$), a significant reduction in insulin levels ($p = 0.0002$) parameters was shown. Moreover, 50% of studied patients that have reduced body weight at 10% of the initial, showed optimal results of these indicators. There was a significant tendency in the decreasing of IMT values ($p = 0.02$). Clinically significant result in the dynamics of 12 months observation was a redistribution in groups of studied patients the level of CRV - increase the part of patients with low CVR (54.76%) compared to the moderate CVR (45.23%), $p = 0.01$, a significant decrease in median relative CVR ($p = 0.03$).

Conclusions. Timely individual prevention of cardiovascular diseases in patients with NAFLD significantly improves the basic metabolic indexes and reduces the degree of CVR, which is essential in prevention of the complications development and improve life quality.

