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Opinion

The frequency of and contributing elements to dyslipidemia

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INTRODUCTION

In both men and women, dyslipidemia is a major contributor to cardiovascular conditions that increase mortality and morbidity (Castelli, 1988). Cardiovascular diseases, which are currently the leading cause of female mortality, are becoming more common in menopausal women due to an increase in life expectancy as well as the emergence of new risk factors like smoking, obesity, sedentary lifestyles, hypercholesterolemia, and eating habits (Solimene, 2010).

Menopause is the condition in which ovarian follicular activity has decreased and menstruation has ceased at the end of the reproductive age. The effects of menopause-related hormonal alterations on blood lipids have a significant impact on the cardiovascular illnesses linked to menopause. Menopausal women have a higher prevalence of cardiovascular illnesses (Kanwar et al., 2014).

Numerous recent, reliable research points to an increase in cardiovascular risk during menopause that is substantially correlated with the evolution of lipid markers.

Menopausal women actually have higher amounts of LDL cholesterol, total cholesterol, and apolipoprotein B than premenopausal women do (Bonithon-Kopp et al., 1990). The Framingham research found a rise in cholesterol levels that coincided with menopause, indicating that menopause influences changes in lipid characteristics (Hjortland et al., 1976). Therefore, menopause marks the change from a low-risk to a high-risk state for atheromatosis. In the West and Asia, information about dyslipidemia during menopause is available, but little is known about the condition in Africa, and Benin in particular. The purpose of this study was to identify the prevalence and risk factors for dyslipidemia in menopausal women residing in the town of Parakou.

In our study, excessive alcohol use was substantially correlated with HDL hypocholesterolemia (p=0.00) and atherogenic dyslipidemia (p=0.03). Fan et al. (2006) discovered a connection between alcohol use and HDL hypocholesterolemia in the United States of America (p=0.00). In contrast, (Chaudhuri et al., 2015) found no evidence of a connection between alcohol consumption and addiction and the various kinds of dyslipidemia in India. Our study found a link between excessive alcohol use, HDL hypocholesterolemia, and atherogenic dyslipidemia that raises the risk of cardiovascular disease. Therefore, it is essential to adopt preventative measures in order to decrease consumption of alcoholic beverages.

Hypertriglyceridemia was substantially correlated with a history of diabetes mellitus (p=0.00). It was discovered that diabetic people in Nigeria had substantially higher levels of hypercholesterolemia and hypertriglyceridemia (p = 0.003). Those diabetic people nevertheless have a very significant residual risk for cardiovascular disease. In the age categories of [55-90] years, the prevalences of hypercholesterolemia and LDL hypercholesterolemia were considerably higher (p = 0.00 and 0.01). These observations are in line with research findings that indicate menopause alters blood lipids by decreasing HDL cholesterol and increasing total cholesterol, triglycerides, and LDL cholesterol. These results might be the result of the menopausal women's decreased levels of circulating estrogens. These modifications in lipid profile contribute to the explanation of why menopausal women have a higher prevalence of cardiovascular disease than women who engage in vaginal sexual activity.

CONCLUSION

The frequency of the various forms of dyslipidemia is very high among menopausal women in Parakou.

LDL hypercholesterolemia, hypertension, and Hypertriglyceridemia are the most common form of dyslipidemia. Alcohol, abdominal obesity, and obesity heavy drinking, the age at which menopause begins, and HBP history and type 2 diabetes are substantially connected to several forms of dyslipidemia. Consequently, this research demonstrates that menopause alters the lipid parameters' levels, therefore magnifying occurrence of atheromatosis Preventative actions Implementation is required to limit the abnormalities of parameters for lipids.

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