

Submission No.: KKJS-9069

Session Title: KSN-KES Joint Symposium (Korean Endocrine Society)

Date & Time, Place: April 29 (Sat), 12:50 - 14:50, Room 5

Triglycerides - Does It Matter in CKD?

Sang Heon Suh

Chonnam National University Hospital, Korea, Republic of

Elevation of serum triglycerides (TG) levels is a characteristic feature of dyslipidemia in patients with chronic kidney disease (CKD). As TG is a main component of TG-rich lipoproteins, such as VLDL and CM, its plasma level reflects circulating quantity of TG-rich lipoproteins. It is believed that elevation in serum TG levels is primarily attributed to the delayed catabolism of TG-rich lipoproteins.

Hyperglyceridemia imposes a residual cardiovascular burden in patients with CKD as well as in general population. A meta-analysis including a total of 16,869 participants with CKD from randomized controlled trial assessed the effects of fibrate therapy compared with placebo in people with CKD, and reported that fibrates improve lipid profiles and prevent cardiovascular events in the subjects with estimated glomerular filtration rate < 60 ml/min/1.73m² as well as in the subjects with estimated glomerular filtration rate < 30 ml/min/1.73m². Moreover, there is compelling evidence that dyslipidemia is associated with CKD progression. The role of pharmacologic interventions other than statins, such as fibrates, on the CKD progression is largely undetermined yet. In this regard, targeting hypertriglyceridemia by fibrates may be promising to prevent CKD progression, while conclusive results are being awaited from randomized controlled trials.