Diabetic Dyslipidemia a Neglected Cardiovascular Risk in the Kenyan Diabetic Population

Beatrice Kiage Mokua

Department of Human Nutritional Sciences, Jomo kenyatta University of Agriculture and Technology, Kenya.

Abstract:

 $\mathbf{D}_{yslipidemia}$ is common in diabetes, characterized by elevated blood triglycerides, low high-density lipoproteins and small dense low-density lipoprotein particles. This combination of abnormal lipoproteins is called the 'lipid triad', an important cardiovascular risk factor in Type 2 Diabetes patients (T2DM), yet neglected among these patient population. Elevated triglycerides are most common in type 2 diabetes mellitus. Partly, because in T2DM, there is overproduction of very lowdensity lipoproteins (VLDL) as a response to increased levels of free fatty acids (FFA) and glucose. In most patients, this overproduction of VLDL is a consequence of obesity and insulin resistance (Most common in T2DM patients), but a decrease in the secretion of insulin in T2DM may further synthesis of VLDL triglycerides. enhance the Hypertriglyceridemia may also be as a result of reduced breakdown of VLDL triglycerides due to reduced lipoprotein lipase (LPL) activity. Cardiovascular disease (CVD) is an overarching term that refers to a group of diseases involving the heart or blood vessels. There are many diseases in this classification. Among people with CVDs, over 82% of the mortality is caused by ischemic or coronary heart disease (IHD), stroke (both hemorrhagic and ischemic), hypertensive heart disease or congestive heart failure (CHF), peripheral disease and cardiomyopathy. Cardiovascular arterial complications are now the leading causes of diabetes-related morbidity and mortality in Kenya.

Conclusion: The public health impact of CVDs is already enormous and has been increasingly reported among diabetes patients in Kenya. The problem was initially very rare but is becoming increasingly reported due to the adoption of western lifestyle behaviors and/or increase of diabetes mellitus in population both in urban and rural areas. Therefore, the problem of dyslipidemia should be taken very seriously and especially in the diabetic population.

Biography:

Beatrice Nyanchama Kiage Mokua completed her PhD at the age of 37 years from Christian Albrechts University (CAU), German. She is a Senior Nutrition Lecturer at Jomo kenyatta University of Agriculture and Technology at the Department of Human Nutritional Sciences.



She published several papers in reputed peer refereed journals. She has presented scientific papers both in the local and international conferences.

Speaker Publications:

- Beatrice Kiage Mokua; Partial substitution of soy protein isolates with cricket flour during extrusion affects firmness and in vitro protein digestibility, Dec 2019.
- Beatrice Kiage Mokua; The relationship between patient characteristics and glycemic control (hba1c) in type 2 diabetes patients attending Thika level five hospital, Kenya, Nov 2019.
- Beatrice Kiage Mokua; Effect of paternal education about complementary feeding of infants in Kisumu County, Kenya, Dec 2018
- Beatrice Kiage Mokua; The participation of fathers in breastfeeding process: knowledge, beliefs, and practices in Kisumu, Kenya, Dec 2018
- Beatrice Kiage Mokua; Father-targeted nutrition education improves early initiation and breastfeeding exclusivity: The case of Kisumu county, Kenya, Jan 2018



Healthcare and Pediatric Nutrition 2020 Dubai, UAE- June 22-23, 2020.

Abstract Citation:

Beatrice Kiage Mokua; Diabetic Dyslipidemia a Neglected Cardiovascular Risk in the Kenyan Diabetic Population; Healthcare & Nutrition 2020; June 22-23, 2020; Dubai, UAE.