

Implications of Lipid Profile Dosages in Fasting and Postprandial Status

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digestion and absorption of lipids through lipoprotein secretion and clearance [7,8].

As can be observed, the determination of the lipid status in fasting or without fasting can bring us more information, which goes beyond the classification of dyslipidemias, as well as in the diagnosis and

VLDL calculated: 2, 3 and 4 h (35.9 ± 53.5 mg/dL, $p=0.000$, 35.2 ± 53.6 mg/dL, $p=0.001$, and 34.0 ± 53.6 mg/dL, $p=0.000$) (Figure 1).

All variables presented according with a GLM Repeated Measures. 95% CI Intervals among time points that not intersect, report a $p < .05$. Triglycerides presents $p=0.002$, partial $\eta^2=0.03$ with 12 h fasting time from all other time points (pooled Cohen $d=-0.78$). C-LDL presents $p=0.042$, partial $\eta^2=0.02$ with 2 h-3 h from 4 h (Cohen $d=0.5$) and 12 h (Cohen $d=0.38$). VLDL presents $p=.001$, partial $\eta^2=0.08$ with 12 h fasting with all other time points (Pooled Cohen $d=1.01$).

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Discussion

Several factors influence the TG response to a fat-containing meal, including the amount of fat consumed, the consumption of alcohol before or during the meal, fiber content, contents of other macronutrients and physical activity [12,13]. Another important factor

