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What Is Hyperlipidemia?

You call it high cholesterol. Your doctor calls it hyperlipidemia. Either way, it's a common problem.

The term covers several disorders that result in extra fats, also known as lipids, in your blood. You can control some of its causes; but not all of them.

Hyperlipidemia is treatable, but it's often a life-long condition. You'll need to watch what you eat and also exercise regularly. You might need to take a prescription medication, too.

The goal is to lower the harmful cholesterol levels. Doing so reduces your risk of heart disease, heart attack, stroke, and other problems.

Causes

Cholesterol, a waxy substance, is a type of fat your body makes. It can also come from what you eat.

Foods that have cholesterol, saturated fat, and trans fats can raise your blood cholesterol level. These include:

- Cheese
- Egg yolks
- Fried and processed foods
- Ice cream
- Pastries
- Red meat

Don't exercise much? That can lead to putting on extra pounds, which can raise your cholesterol.

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As you get older, your cholesterol levels often creep up, too.

Hyperlipidemia can run in families. People who inherit the condition can get very high cholesterol. That means they have a much greater chance of having a heart attack, even when they're young.

Symptoms and Risks

Most people with hyperlipidemia can't tell that they have it at first. It's not something you can feel, but you'll notice the effects of it someday.

Cholesterol, along with triglycerides and other fats, can build up inside your arteries. This makes the blood vessels narrower and makes it more difficult for blood to get through. Your blood pressure could go up.

The buildup can also cause a blood clot to form. If a blood clot breaks off and travels to your heart, it causes a heart attack. If it goes to your brain, it can cause a stroke.

How It's Diagnosed

Your doctor should check your lipid levels regularly. It takes a blood test called a lipoprotein panel. The results show the levels of:

LDL cholesterol : The "bad" cholesterol that builds up inside your arteries

HDL cholesterol : The "good" cholesterol that lowers your risk for heart disease

Triglycerides : Another type of fat in your blood

Total cholesterol: A combination of the other three numbers

The American Heart Association recommends that adults 20 and older have their cholesterol checked every 4 to 6 years. You may have to fast 9 to 12 hours before the test.

Total cholesterol of 200 mg/dL or more is out of the normal range. Your doctor will consider things like your age, whether you smoke, and whether a close family member has heart problems to decide whether your specific test numbers are high and what to do about them.

Treatment

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Lifestyle changes that can lower your cholesterol include a healthy diet, weight loss, and exercise. You should:

- Choose foods low in trans fats
- Eat more fiber-rich foods, such as oatmeal, apples, bananas, pears, prunes, kidney beans, chickpeas, lentils, and lima beans
- Have fish twice a week

Limit your alcohol, too. That means no more than one drink a day if you're a woman or two if you're a man.

Step up your exercise habits. Aim for about 30 minutes of moderate-intensity activity, like a brisk walk, most days of the week. You don't have to do it all at once. Even 10 to 15 minutes at a time can make a difference.

Medications

For some people, diet and lifestyle changes may be enough to bring their cholesterol levels into a healthy range. Other people may need more help.

Drugs that prevent your liver from making cholesterol are known as statins. They're a popular choice to lower the amount of cholesterol in your blood.

Nicotinic acid also affects how your liver makes fats. It lowers your LDL cholesterol and triglycerides and raises your HDL cholesterol. Fibrates are another kind of drug that work on your liver. They lower triglycerides and may boost HDL, but they aren't as good for bringing down your LDL.

A newer type of drug blocks cholesterol that you've eaten from being taken into your body by your intestine. The drug is called a selective cholesterol absorption inhibitor.

Resins, another type of medication, trick your body into using up cholesterol. They bind to bile, an acid involved in digestion, so it can't do its job. Your liver has to make more bile, and for that, it needs cholesterol. That leaves less cholesterol in your bloodstream.

If your doctor prescribes a drug to control your cholesterol, you'll likely have to take it long-term to keep your levels in check.

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