



Original/Deporte y ejercicio

Blood lipid profile and glucose of university students (China)

Wei Liang, Linghong Wang, Daoxia Guo, Zhonghua Nie, Yan Chen, Yuelong Jin, Lianping He and Yingshui Yao

School of Public Health, Wannan Medical College. Wuhu, Anhui 241002. China.*

Abstract

Objective: The main objective of this study was to estimate the blood glucose and blood lipid profile of students in a university in China.

Methods: This descriptive study was based on the health screening data for university students in 2013. The blood glucose (GLU), lipid profiles (total cholesterol (TC), triglyceride (TG), and high density lipoprotein (HDL-C)) was measured by using Hitachi model 747 automatic analyzer. The LDL cholesterol values were calculated according to the formula: $LDL-C = TC - HDL-C - TG/5$.

Results: The mean of HDL was 51.31 and 56.30 mg/dL for male and female, respectively ($p < 0.05$). The majority of students have normal level of GLU (65-110mg/dL). Elevated TC and LDL were observed in 6.92% and 5.82% of male, similarly, 5.91% and 3.57% of female. High levels of TC, LDL and TG in male university students were 1.02%, 0.71% and 1.41%, respectively; in female university students were 1.26%, 1.04 and 0.68%, respectively. Reduced levels of HDL were observed in 5.59% of male and 2.62% of female.

Conclusion: The study shows that the prevalence of blood glucose and blood lipid in university students, especially reduced levels of HDL and elevated TC and LDL in university students has become a critical health issue. Relevant department of school and government should pay more attention to students' physical health.

(Nutr Hosp. 2015;31:2182-2186)

DOI:10.3305/nh.2015.31.5.8600

Key words: Blood. Lipid, glucose. University students.

PERFIL DE LÍPIDOS Y GLUCOSA EN LA SANGRE DE LOS ESTUDIANTES UNIVERSITARIOS (CHINA)

Resumen

Objetivo: El objetivo principal de este estudio fue estimar la glucosa de la sangre y el perfil lipídico de la sangre de estudio en una universidad en China.

Métodos: Estudio descriptivo basado en la revisión de salud; datos para estudiantes universitarios en 2013. La glucosa en la sangre (GLU), perfiles de lípidos (colesterol total (CT), triglicéridos (Tg) y lipoproteína de alta densidad (HDL - c) se midió utilizando Hitachi modelo 747 Analizador automático. Los valores de colesterol LDL se calculan según la fórmula: $C - LDL - HDL - C = TC - HDL - C - TG/5$.

Resultados: La media de HDL fueron 51,31 y 56,30 mg / dl para varón y mujer, respectivamente ($p < 0,05$) y LDL ($p < 0,05$). La mayoría de los estudiantes tienen nivel normal de Glu (65-110mg / dl). TC y LDL elevados fueron observados en 6,92% y el 5,82% de varones, asimismo, 5,91% y el 3,57% de mujeres. Altos niveles de TC, LDL y TG fueron detectados en estudiantes universitarios masculinos; 1,02% 0,71% y un 1,41%, respectivamente; en mujeres estudiantes de la Universidad were 1,26%, 1,04 y 0,68%, respectivamente. La reducción de los niveles de HDL fueron observados en 5,59% de hombres y el 2,62% de mujeres.

Conclusión: El estudio demostró que la prevalencia de la glucosa de la sangre y de lípidos en sangre en los estudiantes universitarios, especialmente la reducción de los niveles de HDL y LDL elevados de TC y en estudiantes universitarios, se ha convertido en un problema de salud crítico. Colegios, escuelas y el Gobierno deben prestar más atención a la salud física de los estudiantes.

(Nutr Hosp. 2015;31:2182-2186)

DOI:10.3305/nh.2015.31.5.8600

Palabras clave: Sangre. Lípidos. Glucosa. Estudiantes universitarios.

Correspondence: Lianping He,
School of Public Health, Wannan Medical College,
No.22 Road wenchangxi,
Yijiang district. Wuhu, Anhui. 241002 China.
E-mail: 1983helianping@163.com
Yingshui Yao.

School of Public Health, Wannan Medical College,
No.22 Road Wenchangxi,
Yijiang district. Wuhu, Anhui. 241002 China.
E-mail:yingshuiaoyao@163.com

Recibido: 27-I-2015.

Aceptado: 10-II-2015.

*Wei Liang, Linghong Wang and Daoxia Guo are equal contribute to the work.

Introduction

Due to the economic growth, reducing physical work and increasing popularity of western foods, dietary pattern of people in China is at the stage of rapid transformation. The prevalence of dyslipidaemia and pathoglycemia were obvious rising in the urban and rural residents. Cardiovascular diseases (CVD), especially coronary heart disease (CHD), are the leading causes of death in many countries. In Europe, higher death rates of CHD have been demonstrated among South Asians in the UK¹. High serum cholesterol is generally regarded as being one of the most important causes of coronary atherosclerosis¹. The age standardized death rate of coronary heart diseases has been increasing slowly in Taiwan, but steadily in the past two decades². Cardiovascular disease is combined with hypertension, heart disease, and stroke is the leading cause of mortality and morbidity in the US³. Elevated serum lipids is a vital, potentially risk factor for cardiovascular chronic diseases in adults⁴. Many factors such as smoking, alcohol consumption and physical activity have a significant impact on blood lipid levels⁵⁻⁷. However, elevated blood lipids is qualifiable and can be reduced by healthy lifestyle and rational medical intervention. There is also large amount of evidence to support screening for hypertension, blood glucose and lipid abnormalities in women. Many women died each year due to CVDs than from all types of cancers combined⁸. However, of those sudden cardiac deaths among women, approximately two-thirds (64 %) have no previous symptoms⁹. High total cholesterol (TC) and low density lipoprotein cholesterol (LDL-C), and low high density lipoprotein cholesterol (HDL-C), are associated with vascular death¹⁰, and high level of triglyceride (TG) is an important and independent predictor of cardiovascular disease^{11,12}. Therefore, rational level of blood lipid and blood glucose are crucial to preventing cardiovascular disease.

According to what we know, there were plenty of researches have assessed the prevalence of blood lipid and blood glucose in adults who were engaged in all kinds of jobs, but few studies have done in university students. This study can complete the main object that is to describe the prevalence of blood lipid and blood glucose among university students in China.

Methods

Subjects and Methods

Participants

A school-based cross-sectional study was preceded in a university student who admitted routine health screening in 2013. This study contains a total of 3484 subjects (1270 male and 2214 female) was recruited in 2013, aged 15-26 years. All subjects agreed to provide

their personal information regarding the objective and the procedures of our study, and all signed informed consent. This study was approved by local ethics committee.

Blood samples

The data used in this study was from health screening in 2013. The blood samples were extracted in the fasting state. Before the test, the subjects fasted for 10–12 h. The blood glucose (GLU), TC, TG and HDL-C was measured by using Hitachi model 747 automatic analyzer. The LDL cholesterol values was calculated according to a formula which Friedewald etc¹³ proposed: $LDL-C = TC - HDL-C - TG/5$.

Definitions

The level of blood glucose were classified into three subgroups ① <65mg/dL, ② 65-110mg/dL, ③ >110mg/dL. The levels of blood lipid were classified according to the Third Report of the National Cholesterol Education Program Expert Panel¹⁴. TC concentrations are classified into 3 categories: Desirable (<200 mg/dL), borderline (200–239 mg/dL), and "high" (>239 mg/dL). It has been suggested that HDL cholesterol concentrations defined as "low" (<40 mg/dL), "desirable" (40–59 mg/dL), and "optimal" (>59 mg/dL). LDL cholesterol levels were classified as "optimal" (<100 mg/dL), "desirable" (100–129 mg/dL), "borderline" (130–159 mg/dL), "high (160–189) and "very high" (>189 mg/dL). TG levels were defined as "desirable" (<150 mg/dL), "borderline" (150–199 mg/dL), "high" (200–499 mg/dL) and "very high" (>499 mg/dL).

Statistical analysis

Excel software was performed to describe the prevalence of blood lipid and glucose abnormal among university students. Bar charts were draw for the prevalence of blood lipid and glucose among university students by sex.

Results

In this study a total of 3484 subjects (1270 male and 2214 female) were recruited in 2013, aged 15-26 years. The mean values (\pm SD) of GLU, TG, TC, HDL and LDL are shown in table I. The mean of HDL were 51.31 and 56.30 mg/dL for male and female, respectively ($p = 0.00$). The normal level of GLU (65-110mg/dL) was observed in 98.78% of male and 98.50% female. Elevated TC and LDL were observed in 6.92% and 5.82 % male, similarly, 5.91% and 3.57% female. High levels of TC, LDL and TG in male university

Table I
Mean (\pm SD) of GLU, TG, TC, HDL and LDL of university students according to sex

Item	Male	Female	t	P
GLU(mg/dL)	84.80 \pm 9.01	84.72 \pm 8.03	0.26	0.80
TG(mg/dL)	80.79 \pm 35.25	78.57 \pm 32.01	1.90	0.06
TC(mg/dL)	159.12 \pm 28.38	160.77 \pm 27.45	1.69	0.09
HDL(mg/dL)	51.31 \pm 7.92	56.30 \pm 9.43	15.91	0.00
LDL(mg/dL)	91.78 \pm 24.67	88.88 \pm 23.10	3.49	0.00

students were 1.02%, 0.71% and 1.41%, respectively; in female university students were 1.26%, 1.04% and 0.68%, respectively. Reduced levels of HDL were observed in 5.59% male and 2.62% female.

Discussion

The impact of dyslipidaemia and pathoglycemia on cardiac function and its economic consequences makes it a major public health concern in worldwide. As far as I know, this study was the first time to investigate the prevalence of blood lipid and glucose in university students in China. This study finds that the high levels of TC, LDL and TG in male university students were 1.02%, 0.71% and 1.41%, respectively; in female university students were 1.26%, 1.04% and 0.68%, respectively. The prevalence of these high levels in university students is lower than people in other position such as bus drivers¹⁵, farmers¹⁶. This indicates the levels of these index are normal as a whole. However, elevated TC and LDL were observed in 6.92% and 5.82% of male, similarly, 5.91% and 3.57% of female. These values indicate that university students are surrounded by many risks and they are in borderline. They are likely to turn into hyperlipidemia without any measures be taken for them.

The mean of TC level was 159.12 mg/dL and 160.77 mg/dL for male and female. This was similar with a study conducted in 1993 by Swai et al.¹⁷ Tanzania, also found that female participants had a higher mean TC levels than that of male participants. There are lots of factors affect the level of TC. Generally, the female university students are protected by estrogen, so they would have a relatively low risk to cardiovascular diseases. However, previous studies demonstrated that the female advantage is decreased in women when other risk factors including high blood glucose and hyperlipidemia presented¹⁸. Values of triglycerides have also been associated with obesity and alcoholism in Singapore with multi-ethnic populations¹⁹. Thus, the level of TC have a significant effect on health of students.

Reduced levels of HDL was observed in 5.59% male and 2.62% female. This may be contacted with

smoking habits, current smoking was always associated with low HDL-cholesterol, high triglycerides. On the other hand, smoking cessation leads to weight gain, and increases the risk factor changes noted in the metabolic syndrome²⁰. Equally, high alcohol intake was associated with low total and LDL-cholesterol, as well as with high triglycerides and high HDL-cholesterol^{21,22}, however, the relation between alcohol intake and LDL-C has been unclear²³.

The normal level of GLU (65-110mg/dL) was observed in 98.78% male and 98.50% female. The values of GLU in Chinese university students present a favourable trend. There are 4.5% (159/3483) of students were divided into hypoglycemia and only 0.34% (12/3484) of students were classified into hyperglycemia. The pattern of this blood glucose is better than other's as a whole.

Overall, the relationships between life styles, environments, social economics, blood glucose and blood lipid profiles should be taken into consideration in developing prevention strategy for dyslipidemia and pathoglycemia. Government and schools also should pay more attention to university students' health, so that the risks can be reduced and students can be in a healthy condition.

Conclusions

The study shows that the prevalence of blood glucose and blood lipid in university students, especially reduced levels of HDL and elevated TC and LDL in university students has become a critical health issue. Relevant department of school and government should pay more attention to students' physical health.

Acknowledgments

This research was supported by the National Natural Science Foundation of China (81072367), the Anhui Provincial Natural Science Foundation (090413126 and 1308085MH135), the key Project University of Youth Talents fund of Anhui Province (2013SQRL-

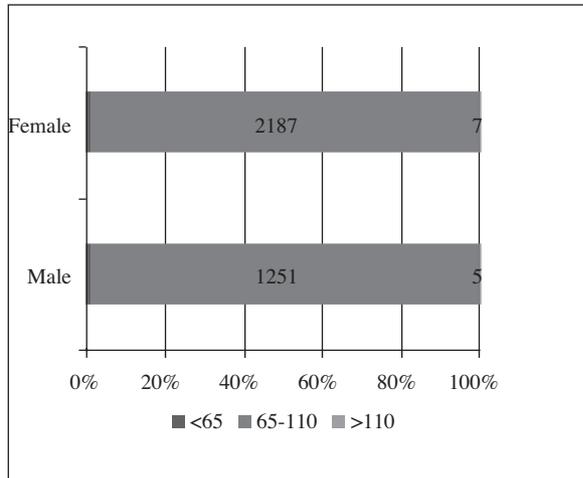


Fig. 1.—The distribution of GLU for university students according to sex.

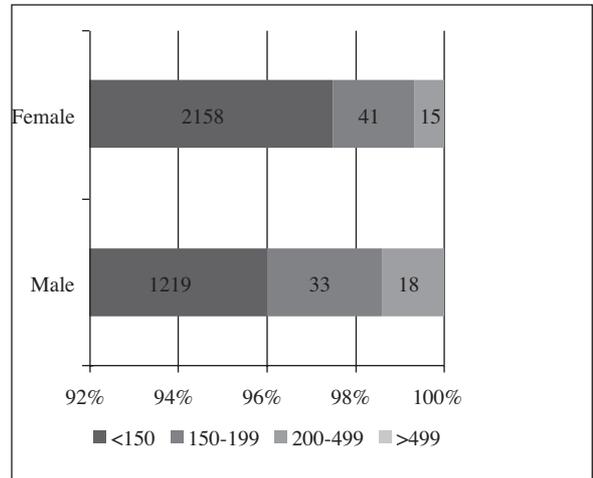


Fig. 2.—The distribution of TG for university students according to sex.

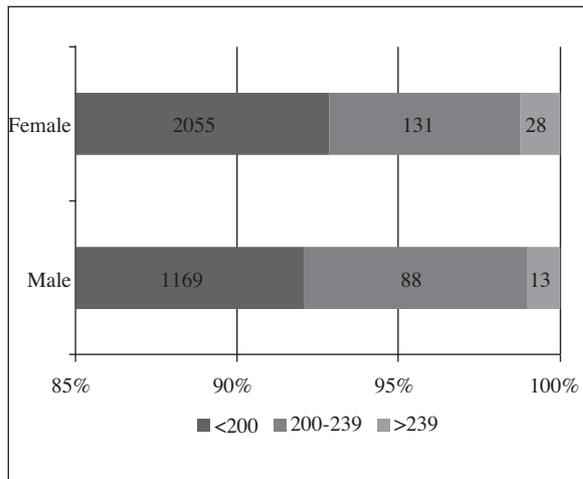


Fig. 3.—The distribution of TC for university students according to sex.

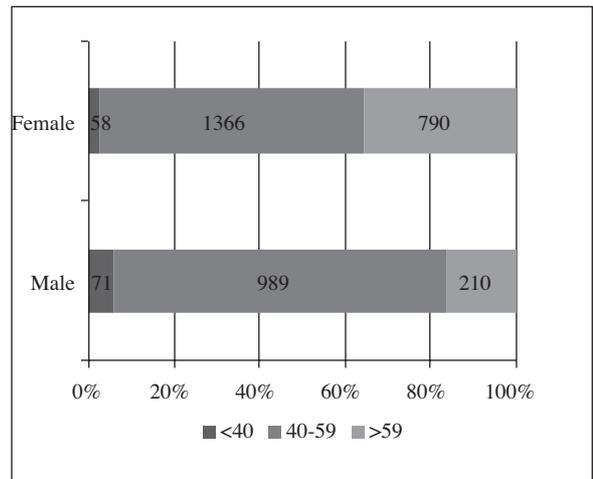


Fig. 4.—The distribution of HDL for university students according to sex.

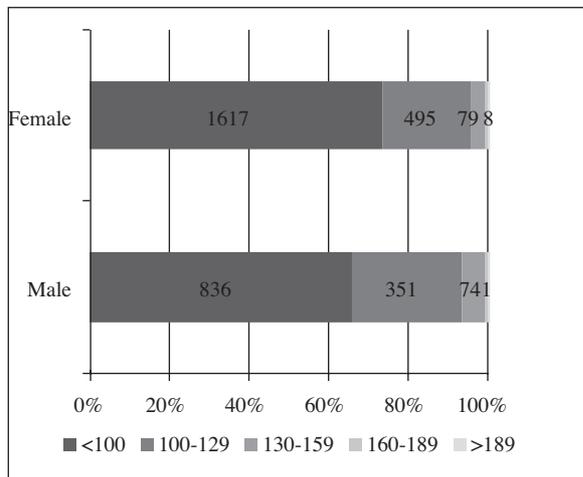


Fig. 5.—The distribution of LDL for university students according to sex.

056ZD), and Wannan Medical key scientific research projects Engagement Fund (WK2013Z01).

References

1. Gotto, A.M., Jr., Triglyceride as a risk factor for coronary artery disease. *Am J Cardiol* 1998. 82(9A): 22Q-25Q.
2. Chang, C.C. and C.J. Chen, Secular trend of mortality from cerebral infarction and cerebral hemorrhage in Taiwan, 1974-1988. *Stroke* 1993. 24(2): 212-8.
3. Lauer, M.S. and S. Skarlatos, Translational research for cardiovascular diseases at the National Heart, Lung, and Blood Institute: moving from bench to bedside and from bedside to community. *Circulation* 2010. 121(7): 929-33.
4. Trichopoulos, A. and P. Lagiou, Worldwide patterns of dietary lipids intake and health implications. *Am J Clin Nutr* 1997. 66(4 Suppl): 961S-64S.
5. Freeman, D.J., M.J. Caslake, B.A. Griffin, J. Hinnie, C.E. Tan, T.D. Watson, et al., The effect of smoking on post-heparin lipoprotein and hepatic lipase, cholesteryl ester transfer protein

- and lecithin:cholesterol acyl transferase activities in human plasma. *Eur J Clin Invest* 1998. 28(7): 584-91.
6. LaPorte, R.E., J.L. Cresanta and L.H. Kuller, The relationship of alcohol consumption to atherosclerotic heart disease. *Prev Med* 1980. 9(1): 22-40.
 7. Campaigne, B.N., R.N. Fontaine, M.S. Park and Z.J. Rymaszewski, Reverse cholesterol transport with acute exercise. *Med Sci Sports Exerc* 1993. 25(12): 1346-51.
 8. Mosca, L., C.L. Banka, E.J. Benjamin, K. Berra, C. Bushnell, R.J. Dolor, et al., Evidence-based guidelines for cardiovascular disease prevention in women: 2007 update. *J Am Coll Cardiol* 2007. 49(11): 1230-50.
 9. Roger, V.L., A.S. Go, D.M. Lloyd-Jones, E.J. Benjamin, J.D. Berry, W.B. Borden, et al., Heart disease and stroke statistics--2012 update: a report from the American Heart Association. *Circulation* 2012. 125(1): e2-e220.
 10. Prospective Studies, C., S. Lewington, G. Whitlock, R. Clarke, P. Sherliker, J. Emberson, et al., Blood cholesterol and vascular mortality by age, sex, and blood pressure: a meta-analysis of individual data from 61 prospective studies with 55,000 vascular deaths. *Lancet* 2007. 370(9602): 1829-39.
 11. Hokanson, J.E. and M.A. Austin, Plasma triglyceride level is a risk factor for cardiovascular disease independent of high-density lipoprotein cholesterol level: a meta-analysis of population-based prospective studies. *J Cardiovasc Risk* 1996. 3(2): 213-9.
 12. Patel, A., F. Barzi, K. Jamrozik, T.H. Lam, H. Ueshima, G. Whitlock, et al., Serum triglycerides as a risk factor for cardiovascular diseases in the Asia-Pacific region. *Circulation* 2004. 110(17): 2678-86.
 13. Friedewald, W.T., R.I. Levy and D.S. Fredrickson, Estimation of the concentration of low-density lipoprotein cholesterol in plasma, without use of the preparative ultracentrifuge. *Clin Chem* 1972. 18(6): 499-502.
 14. National Cholesterol Education Program Expert Panel on Detection, E. and A. Treatment of High Blood Cholesterol in, Third Report of the National Cholesterol Education Program (NCEP) Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults (Adult Treatment Panel III) final report. *Circulation* 2002. 106(25): 3143-421.
 15. Xiao-ling, Z., W. Dong-lan, C. Wei-qiang, L. Shu-tian, H. Yue, H. Yan, et al., Investigation on blood pressure, blood glucose, cholesterol and triglyceride in bus drivers in Tianjin city. *Chin Occup Med* 2011. 38(6): 523-24.
 16. Lingtai, W., L. Baolin, L. Xiaoqing and M. jingzhuang, Blood pressure, blood glucose, blood lipid among the agricultural population ages 35-59 in Shunde Guizhou. *South China Journal of Cardiology* 2000. 6(3): 188-90.
 17. Swai, E.S., A. Kapaga, F. Kivaria, D. Tinuga, G. Joshua and P. Sanka, Prevalence and distribution of Peste des petits ruminants virus antibodies in various districts of Tanzania. *Vet Res Commun* 2009. 33(8): 927-36.
 18. Ghobadzadeh, M., E.W. Demerath and Y. Tura, Prevalence of Blood Pressure, Blood Glucose and Serum Lipids Abnormalities Among Ethiopian Immigrants: A Community-Based Cross-Sectional Study. *J Immigr Minor Health* 2014.
 19. Deurenberg-Yap, M., T. Li, W.L. Tan, W.A. van Staveren, S.K. Chew and P. Deurenberg, Can dietary factors explain differences in serum cholesterol profiles among different ethnic groups (Chinese, Malays and Indians) in Singapore? *Asia Pac J Clin Nutr* 2001. 10(1): 39-45.
 20. Wandell, P.E., G. Bolinder, U. de Faire and M.L. Hellenius, Association between metabolic effects and tobacco use in 60-year-old Swedish men. *Eur J Epidemiol* 2008. 23(6): 431-4.
 21. Kato, I., Y. Kiyohara, M. Kubo, Y. Tanizaki, H. Arima, H. Iwamoto, et al., Insulin-mediated effects of alcohol intake on serum lipid levels in a general population: the Hisayama Study. *J Clin Epidemiol* 2003. 56(2): 196-204.
 22. Lamon-Fava, S., High-density lipoproteins: effects of alcohol, estrogen, and phytoestrogens. *Nutr Rev* 2002. 60(1): 1-7.
 23. Corella, D., K. Tucker, C. Lahoz, O. Coltell, L.A. Cupples, P.W. Wilson, et al., Alcohol drinking determines the effect of the APOE locus on LDL-cholesterol concentrations in men: the Framingham Offspring Study. *Am J Clin Nutr* 2001. 73(4): 736-45.