"Metabolic Syndrome"

Endocrine Block, PBL; Case 3



Done by:

Majed Alomar

Fahad Alqahtani

Reviewed by:

Mohammed Alghammass

Color Guide:

- Red: Relatively important & mentioned in case tutorials.
- Black: Questions.
- Blue: Answers (mentioned in case tutorials).
- Green: Additional answers/notes.
- Orange: Explanation.

Learning Objectives

- 1- Hormones involved in metabolism of carbohydrates and fats and their role in maintaining normal blood glucose.
- 2- Biochemical and physiological interactions between the different components of metabolic symptoms (such obesity, dyslipidaemia, high blood pressure and impaired blood glucose tolerance).
- 3- The mechanisms by which obesity causes insulin-resistance and the development of diabetes type 2.
- 4- Interpretation of the clinical manifestation and investigation results obtained from a patient with metabolic syndrome.
- 5- Differences between HDL and LDL.
- 6- Role of changing life style (including weight loss, low calorie diet and stopping smoking) in managing metabolic syndrome.

Definition:

Metabolic syndrome is a cluster of conditions (increased blood pressure, a high blood sugar level, excess body fat around the waist and abnormal cholesterol levels) that occur together, increasing the risk of heart disease, stroke and diabetes.

Sings and Symptoms:

- Hypertension
- Hyperglycemia
- Hypertriglyceridemia
- Reduced high-density lipoprotein cholesterol (HDL-C)
- Abdominal obesity
- Chest pains or shortness of breath

Risk Factors:

- Obesity
- Sedentary lifestyle
- Aging
- Smoking

Diagnosis:

Metabolic syndrome occurs when a person has three or more of the following measurements:

- Abdominal obesity
- Triglyceride level of 150 (mg/dL) or greater
- HDL cholesterol of < 40 mg/dL in men, < 50 mg/dL in women
- Systolic blood pressure of 130 (mm Hg) or greater
- Diastolic blood pressure of 85 mm Hg or greater
- Fasting glucose of 100 mg/dL or greater
- Insulin resistance or glucose intolerance

Investigations:

Blood biochemistry:

High: Low:

Fasting blood glucose HDL

Total cholesterol Blood triglycerides

LDL

Treatment:

• Life style modification:

Physical activities, Healthy diet, Stop smoking

- Reduce BMI to 23-25
- Enalapril (ACE inhibitor) for high blood pressure

Notes:

BMI: is a measure for human body shape based on an individual's mass and height

• BMI =
$$\frac{\text{mass(kg)}}{(\text{height(m)})^2}$$

- Fatty liver is enlarged and show
 - 1) increased echogenicity in ultrasound
 - 2) elevation in liver function test
- Hypertension may cause left ventricular hypertrophy

Questions

Before answering the questions below, please read tutorials 1 and 2.

- Q1- Name risk factors for metabolic syndrome
 Obesity, Sedentary lifestyle, Aging, Smoking
- Q2- What do you expect the fasting blood glucose level in metabolic syndrome patient?

 100 mg/dL or greater
- Q3- What do you expect the BP level in metabolic syndrome patient?

 130/85 (mm Hg) or more
- Q4- What is the first line of treatment to manage metabolic syndrome?

Life style modification

- Q5- What is the effect and mechanism of Enalapril?

 Lowers blood pressure, ACE inhibitor
- Q6- What is the benefit of measuring BMI?

 Measure human body shape based on an individual's mass and height
- Q7- If your patient height 175 cm and his weight 100Kg, what is his BMI?

 $100/(1.75^2) = 32.3$

- Q8- Name one of hypertension complications

 Left ventricular hypertrophy
- Q9- What do you expect to see in the ultrasound of a fatty liver?

 Increased echogenicity
- Q10- Name 3 of the most common clinical finding in a metabolic syndrome patient

Hypertension, Hyperglycemia, Hypertriglyceridemia

Q11- What is the (good) cholesterol and (bad) cholesterol?

High-density lipoprotein HDL is the good cholesterol

Low-density lipoprotein LDL is the bad cholesterol

Q12- What is the clinical significance of those 2 cholesterol?

In metabolic syndrome HDL will decrease while LDL will increase