

# March 2009 – Dyslipidaemia

CPD questionnaires must be completed online via [www.cpdjournals.org.za](http://www.cpdjournals.org.za). After submission you can check the answers and print your certificate. Questions may be answered up to 6 months after publication of each issue.

## NEW THERAPEUTIC DEVELOPMENTS IN LIPIDOLOGY

- 1. True (A) or false (B) – fill in only block A or B:**  
Probucol commonly causes flushing and urticaria.
- 2. Please select the correct statement:**  
A. Nicotinic acid consistently raises Lp(a) and HDLC levels  
B. Rosuvastatin inhibits intestinal cholesterol uptake  
C. CETP inhibitors raise HDLC  
D. Probucol is a pro-oxidant  
E. The Apo AI Milano mutation is associated with high levels of HDLC and low levels of atherosclerosis.
- 3. Please select the incorrect statement:**  
A. Pitavastatin is not marketed in South Africa  
B. ACAT inhibitors lowered serum cholesterol in animal experiments  
C. Inhibition of squalene synthase lowers cholesterol  
D. The nicotinic acid flush is caused by the release of mast cell tryptase  
E. Rosuvastatin raises HDLC more than atorvastatin.

## A CLINICAL APPROACH TO DYSLIPIDAEMIA

- 4. True (A) or false (B) – fill in only block A or B:**  
Patients with homozygous FH have a very high LDLC and lipaemic serum.
- 5. Which one of the following statements is correct?**  
A. Cholesterol is an essential nutrient  
B. Serum cholesterol will rise markedly after eating a very fatty meal  
C. All lipoproteins contain some triglycerides  
D. Patients with severe hypertriglyceridaemia are best treated with statins  
E. Patients with hypertriglyceridaemia characteristically have high levels of HDLC as well.
- 6. Which one of the following statements is *not* correct?**  
A. Patients with FH may have tendon xanthomata  
B. Risk calculation underestimates the risk of CVD in patients with FH  
C. There are several founder effects for FH in South Africa  
D. Mutations in PCSK9 can cause FH  
E. Patients with heterozygous FH should start lipid-lowering medications in infancy.

## SECONDARY DYSLIPIDAEMIA

- 7. True (A) or false (B) – fill in only block A or B:**  
A diet low in saturated fat, cholesterol, refined carbohydrate and simple sugars coupled with physical activity, weight loss and stress management is considered adequate lifestyle modification for patients with dyslipidaemia.
- 8. The lipid profile associated with hyperinsulinaemia, as seen with type 2 diabetes, obesity and the metabolic syndrome, consists of (choose one):**  
A. A rise in free fatty acid levels  
B. Raised triglyceride levels  
C. Moderately raised low-density lipoprotein cholesterol (LDLC) levels  
D. A decrease in high-density lipoprotein cholesterol (HDLC) levels  
E. All of the above.

- 9. Which one of the following drugs does not contribute to dyslipidaemia:**  
A. Ritonavir  
B. Retinoids  
C. Paracetamol  
D. Beta blockers  
E. Steroids.

## NORMAL AND ABNORMAL LIPID AND LIPOPROTEIN METABOLISM

- 10. True (A) or false (B) – fill in only block A or B:**  
Lipids are poorly soluble in water but dissolve readily in plasma.
- 11. Which one of the following lipoproteins does not contain apoB?**  
A. LDL  
B. Lp(a)  
C. VLDL  
D. HDL  
E. IDL.
- 12. Identify the incorrect statement:**  
A. Chylomicrons are assembled in the intestine  
B. VLDL is assembled in the liver  
C. Chylomicrons are ultimately metabolised to LDL  
D. HDL exchanges lipids with apoB-containing lipoproteins  
E. Lipoprotein lipase (LPL) binds to endothelial cells.

## LIPID-MODIFYING THERAPY

- 13. True (A) or false (B) – fill in only block A or B:**  
The best drug in treating hypercholesterolaemia is a statin.
- 14. True (A) or false (B) – fill in only block A or B:**  
Pancreatitis is a serious complication of severe hypercholesterolaemia.
- 15. True (A) or false (B) – fill in only block A or B:**  
Resins such as cholestyramine can be used in patients with hypertriglyceridaemia.

## RATIONAL USE OF LIPID INVESTIGATIONS

- 16. True (A) or false (B) – fill in only block A or B:**  
A full fasting lipogram should be the initial investigation in patients with existing cardiac disease.
- 17. True (A) or false (B) – fill in only block A or B:**  
Secondary causes for hypercholesterolaemia should always be considered.

## ATHEROSCLEROSIS IMAGING – HOW AND WHOM?

- 18. True (A) or false (B) – fill in only block A or B:**  
It is not possible to identify early atherosclerosis or vulnerable plaque on an angiogram.
- 19. True (A) or false (B) – fill in only block A or B:**  
Doppler may be used for evaluating the asymptomatic bruit.

## GETTING THE DIET RIGHT

- 20. True (A) or false (B) – fill in only block A or B:**  
Plant sterols lower triglyceride levels.

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