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Dr.SAMPLE REPORT TEST HEALTH CENTRE 123 TEST STREET BURWOOD VIC 3125

SAMPLE REPORT 09-May-1990 Female

16 HARKER STREET BURWOOD VIC 3125

LAB ID : UR NO. :

3814181

Collection Date : 09-May-2022 Received Date:09-May-2022



BIOCHEMISTRY

Result	Range	Units
<i>88.0</i> *H	0.0 - 75.0	nmol/L

BLOOD - SERUM Lipoprotein (a)

Lipid Profile Comment

LIPOPROTEIN(a) ELEVATED:

Consists of an LDL bound to Apolipoprotein component. Causes atherothrombogenesis and strongly associated with peripheral and coronary events.

Consider the following possible causes:

Genetic predisposition, Excessive intake of partially hydrogenated oils/fats, low-fibre, low vegetable-based diet, Hypothyroidism, Post-Menopausal elevation, Diabetes, particularly with central obesity, Chronic renal insufficiency, Simvistatin Therapy, Compounded likelihood of CVD if also high LDL and/or total Cholesterol.

Consider the following actions: Aerobic Exercise, Dietary modification, 1 g TID Niacin OR inositol hexaniacinate (non-flush if availalable), CoQ10, L-lysine, proline, HRT if indicated, Magnesium, Coronary vasodilator therapy - as elevated Lp(a) may impair normal vasodilation mechanisms. Vitamin C, L-Lysine and Vitamin E are also beneficial.

Increased HDL levels appear to reduce the threat posed by high levels of Lp(a).

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Lp(a) COMMENT: For Lp(a) levels > 75 nmol/L the relative risk of MI is 1.75 compared to patients with Lp(a) below this level. Lp(a) is an acute phase reactant and the level is elevated in acute illness.