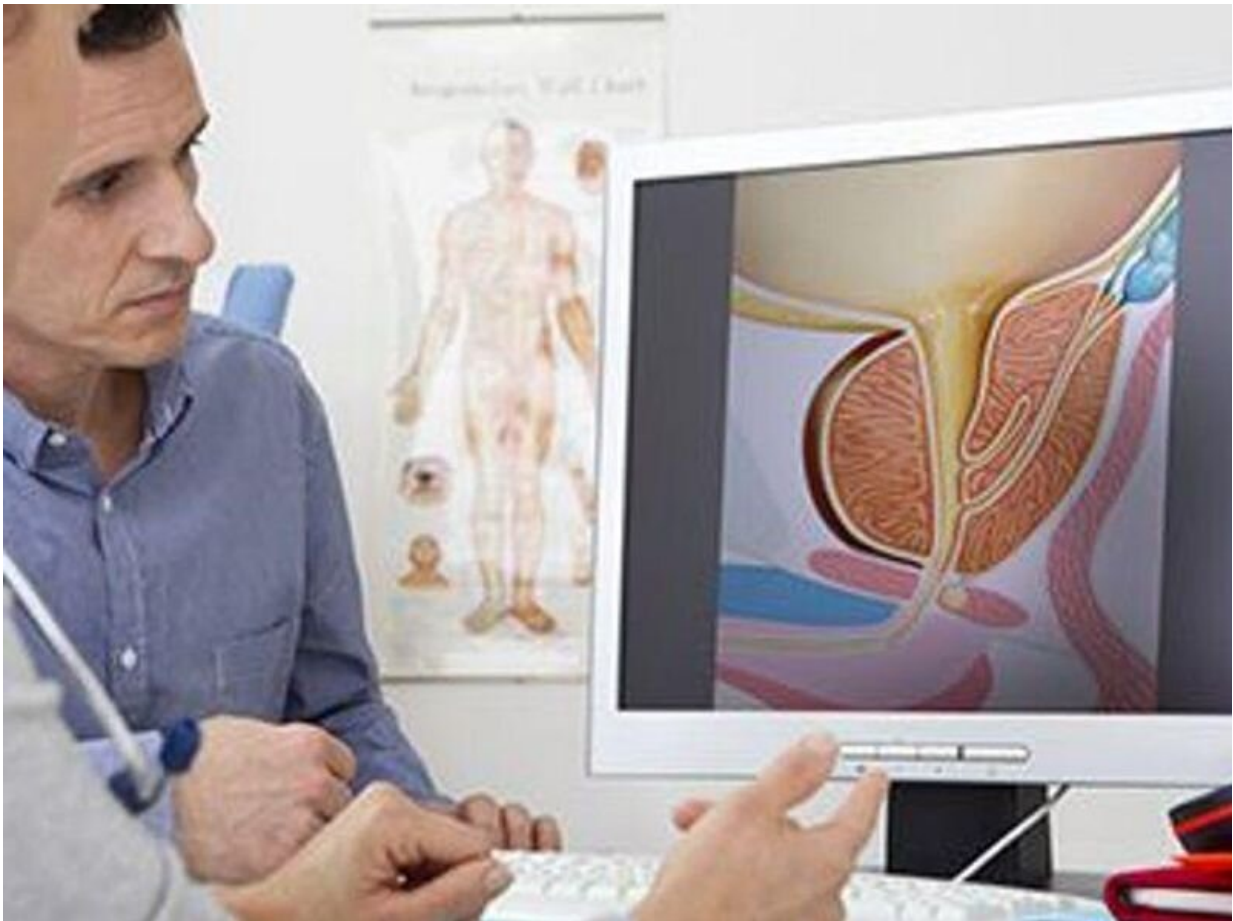


# Lipid ratios linked to benign prostatic hyperplasia risk

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In the Chinese population, the triglyceride to high-density lipoprotein

cholesterol (TG/HDL-C) ratio and the total cholesterol (TC)/HDL-C ratio are associated with an increased risk for benign prostatic hyperplasia (BPH), according to a study published online Oct. 3 in *Frontiers in Nutrition*.

Chen Zhu, from The First Affiliated Hospital with Nanjing Medical University in China, and colleagues examined the association between lipid ratios and the risk for BPH in Chinese men who underwent routine check-ups from January 2017 to December 2019. A total of 24,962 men were enrolled in the study.

The researchers found that 18.46 percent of the participants were ascertained as incident BPH cases after health examinations for more than two years. Significant associations with BPH risk were seen for higher age, body mass index, [prostate-specific antigen](#), TGs, low-density lipoprotein cholesterol, TG/HDL-C ratio, TC/HDL-C ratio, and lower HDL-C; the association for TC was not significant. In the multivariable model examining quartiles of TG/HDL-C and TC/HDL-C, higher TG/HDL-C and higher TC/HDL-C were associated with an increased risk for BPH (odds ratios, 2.11 and 1.67, respectively). Stratified analyses showed that the relationship between TG/HDL-C and BPH risk was dominantly positive with increasing age (35 years and older). A higher TG/HDL-C ratio may be a risk factor for BPH in those aged 35 years and older with normal TG and HDL-C.

"More attention should be paid to those with a higher TG/HDL-C in the health management process, and lifestyle modifications or lipid-lowering agents to help prevent BPH risk in middle-aged and [older adults](#)," the authors write.

**More information:** Chen Zhu et al, Triglyceride to high-density lipoprotein cholesterol ratio and total cholesterol to high-density lipoprotein cholesterol ratio and risk of benign prostatic hyperplasia in

Chinese male subjects, *Frontiers in Nutrition* (2022). DOI: [10.3389/fnut.2022.999995](https://doi.org/10.3389/fnut.2022.999995)

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