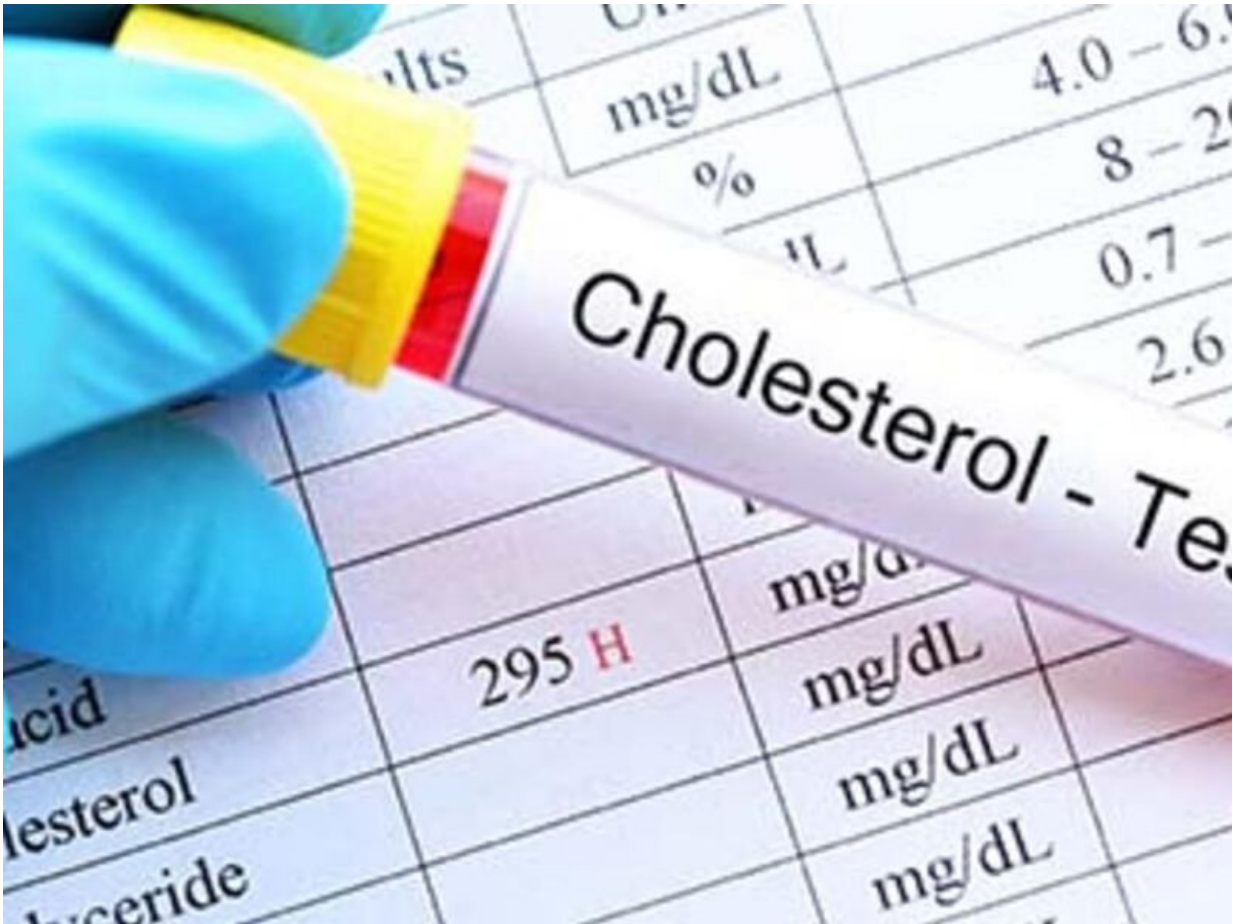


Understanding your cholesterol numbers

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You might not think about your cholesterol very often, if ever, but it's important to know your numbers.

It's even helpful to get it checked at a young age, according to one heart expert.

"People in their 20s may never consider getting their cholesterol checked, but they should because it may uncover a [genetic predisposition](#) to [high cholesterol](#) that they didn't know about," said Dr. Michael Farbaniec, a cardiologist at Penn State Health Milton S. Hershey Medical Center in Hershey, Pa. "The sooner it's treated, the more damage you can prevent."

People 40 and up should get a lipid panel every year, asking to have it added to their annual blood work if their primary care physician doesn't order it, Farbaniec said.

The U.S. National Heart, Blood, and Lung Institute recommends initial testing between ages of 9 and 11, with repeat testing every five years.

Cholesterol is a waxy substance made in the liver. It's found in the blood and all of the body's cells.

The substance is necessary for making cell walls, creating hormones and serving as protectants for cells and more. To get energy to muscles and cells, cholesterol is transported in the [low-density lipoprotein](#) (LDL), commonly called "bad cholesterol," and the [high-density lipoprotein](#) (HDL), or "good cholesterol."

A lipid panel measures these lipoproteins, along with total cholesterol and triglycerides, [fatty acids](#) in the blood that the body uses for energy. High levels of triglycerides combined with low HDL cholesterol or high LDL cholesterol levels can increase the risk for plaque buildup, [fatty liver disease](#), [heart attack](#) and stroke. They are directly affected by diet and exercise.

The recommended threshold for total cholesterol is under 200 mg/dL, but it's also important to note non-HDL cholesterol. That's the number when you subtract your HDL number from your total cholesterol.

"We have shifted our thinking away from that total value because we know we were underestimating people's risk, and they were dying of heart disease," Farbaniec said in a center news release. "If your total cholesterol is under 200, but your HDL is 25 and your LDL is 170, that's not good."

It's important to treat the risk, not the numbers.

Ideally, non-HDL cholesterol will be less than 130 mg/dL for people without risk factors, according to Penn State.

The LDL value should be less than 70 mg/dL for those with elevated heart disease risk because of family or personal history of heart or blood vessel disease; other [health issues](#); or those with a type of inherited high cholesterol that isn't affected by a change in diet or exercise, Farbaniec said. Triglyceride values should be less than 150 mg/dL. A value above 200 is considered high.

Individualized treatment can also be important.

"I had a patient with normal cholesterol, but she had a family history of heart disease at very early ages, and she was very concerned," Farbaniec said. "I did a coronary artery calcium scan, and it showed a lot of calcified plaque buildup. That told me she was someone at risk, despite her good numbers, but we could do something now to prevent more plaque buildup."

Having [high blood pressure](#), obesity, diabetes, premature [heart disease](#), vascular disease and familial hypercholesterolemia can boost a person's

risk.

You can estimate your odds for atherosclerotic cardiovascular disease using a [risk calculator](#) offered by the American College of Cardiology.

Typical treatment for high cholesterol is with prescription statins. Many other options exist, Farbaniec said.

"The most important thing is to get a lipid panel done," he said. "No one can feel if they have high [cholesterol](#), but the results of a test can help us treat preventatively for a healthier future."

More information: The American Heart Association has more on [cholesterol](#).

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