

CONFERINȚA ȘTIINȚIFICĂ ANUALĂ

CERCETAREA ÎN BIOMEDICINĂ ȘI SĂNĂTATE: CALITATE, EXCELENȚĂ ȘI PERFORMANȚĂ





DIAGNOSIS OF FAMILY HYPERCHOLESTEROLEMIA-LDL receptor deficiency

Andrușca Diana, Țurcan Larisa, Chiriac Maria, Veselovskaia Ana, Vișnevschi Anatolie Department of Laboratory Medicine, "Nicolae Testemitanu" State University of Medicine and Pharmacy, Chisinau, Republic of Moldova

Introduction

Family hypercholesterolemia (FH) is an autosomal dominant genetic desease. Despite the scientific progress made in recent years, FH tends to remain a challenge in terms of obtaining a clear diagnosis, a complete and lasting response to treatment.

Purpose

We studied the role of the gene involved and the consequences of its mutations.

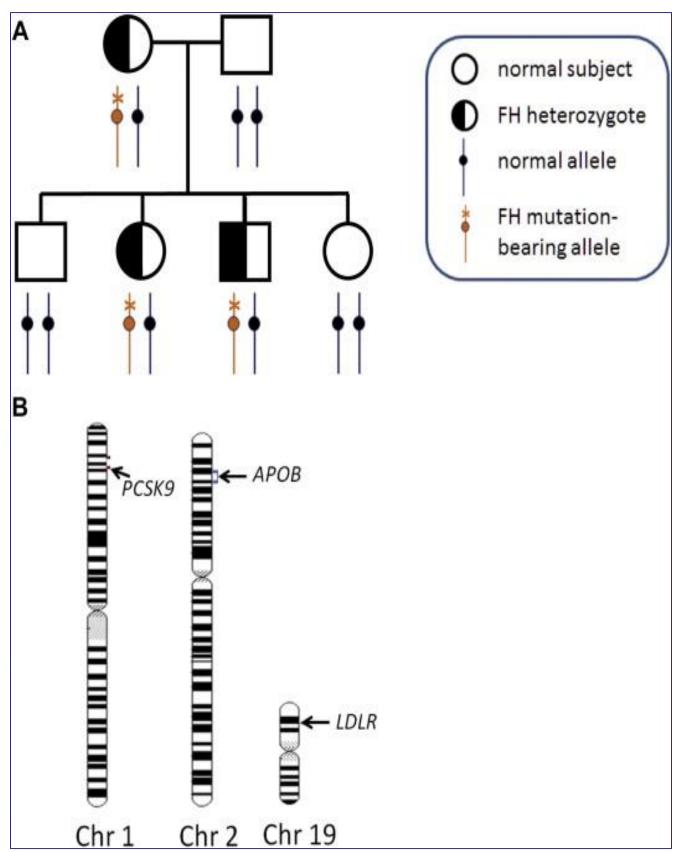


Figure 1 Genetics of FH.

(A) Familial inheritance of heterozygous FH (HeFH).

(B) Main genes causing FH.

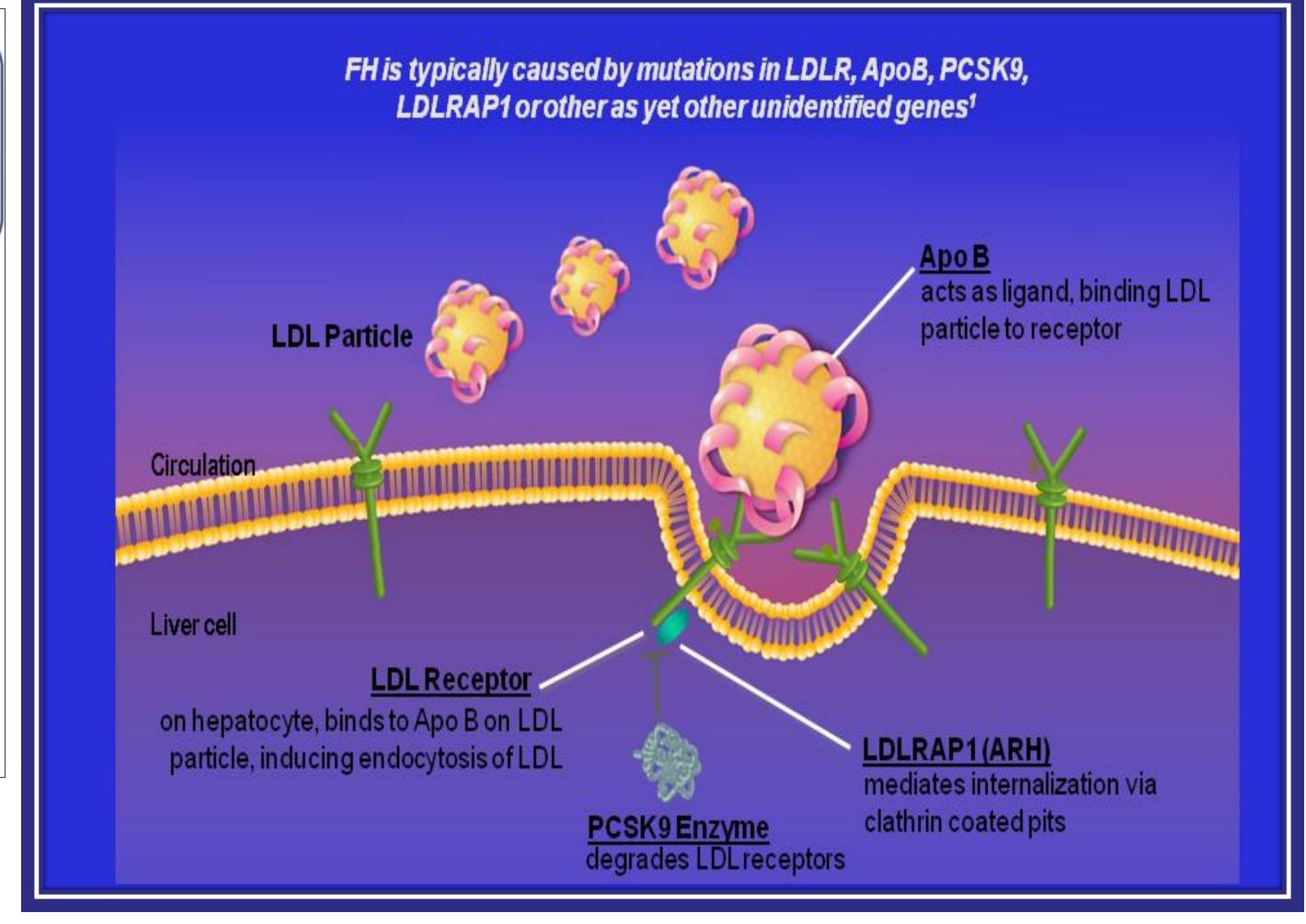


Figure 2 The most common genetic mutations associated with familial hypercholesterolemia

Keywords

family hypercholesterolemia, LDL-cholesterol, LDL-receptor.

Material and methods

The information was analyzed using the PubMed, Medscape and MEDLINE search engines.

Results

One of the causative mutations is located in the LDL-cholesterol receptor gene. Affected subjects, have high values of total serum cholesterol (> 7.8 mmol / L) and LDL-cholesterol (> 4.94 mmol /L).

FH is present from childhood, being asymptomatic, but if left untreated, 50% of men will suffer a heart attack by the age of 50 andwomen by the age of 60.

The gold standard for FH patients would be Real time PCR genotyping, using TaqMan probes or newgeneration sequencing. Diagnosis of early mutation is paramount because FH is associated with an increased risk for premature coronary heart disease.

Conclusions

Although difficult, the molecular diagnosis of FH has a positive impact leading to an increase in the proportion of patients who start or intensify cholesterol lowering therapy, thus preventing and slowing the progression of atherosclerosis.