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Clinical scenario of primary dyslipidemia in the pediatric age group: An Egyptian experience

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Objectives: To study the frequency of occurrence of the different forms of primary dyslipidemia and to display their various clinical presentations and their lipid profile before and six months after therapy.

Methods: Prospective study was conducted in the Cairo University Children's Hospital-20 primary dyslipidemic cases were included with history taking, clinical examination, electrocardiography and echocardiography. Investigations included: Total cholesterol, total triglycerides, LDL-C and HDL-C using enzymatic colorimetric methods, ApoA1, Apo B100 were evaluated using a Behring nephelometer. Different therapeutic modalities were offered and reassessment of laboratory tests was done every three months.

Results: Parents were consanguineous in 75% cases. Eleven cases had hypercholesterolemia; eight had xanthoma, one had xanthelasma, two had hypo-pigmentation, three had corneal arcus, one had lipaemia retinalis and six had cardiac manifestations among which one case had myocardial infarction and one case died. Three cases had hypertriglyceridemia; three had milky plasma, two had xanthoma, two had lipaemia retinalis, one case had pancreatitis and none had cardiac manifestations. Six cases had mixed hyperlipidaemia; five had xanthoma, three had lipaemia retinalis and two had cardiac manifestations. After six months of multi-drug use, the laboratory lipid profile was unsatisfactory in majority of the cases.

Conclusion: Primary dyslipidemia may present in early and pediatricians should have high index of suspicion. These children should be put on early strict lipid reduction protocols to prevent complications.

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