

## Correspondence

### Loss of body weight and changes of lipid profile

*To the Editor*

In an earlier issue of the Saudi Medical Journal, I read with great interest the article reported by Alnasir FA et al<sup>1</sup> entitled “The effect of loss of body weight on lipid profile in overweight individuals”. I appreciated the author’s work and efforts. However, I would like to make few comments on it.

First, the cholesterol balance, determined as the apoB/apoA-I ratio, has repeatedly been shown to be a better marker than lipids, lipoproteins and lipid ratios.<sup>2</sup> Also, it has been reported that using the conventional cholesterol ratios rather than the apoB/apoA-I ratio, can result in frequent and substantial error in the estimation of the lipoprotein-related risk of vascular disease.<sup>3</sup> Unfortunately, despite some advantages of the apoB/apoA ratio stated by the authors, but they did not measure it. Second, I would like to add some to the criteria for sample selection. One of the 3 criteria was that the subjects “should be willing to reduce their body weight”. It seems that this criteria has decreased the function of the applied educational program with regards to reducing body weight. Third, the authors

mentioned that the structured health education program included a low caloric diet and exercise. But how the results of the study were related with the changes in diet or physical activity is unstated.

I respectfully submit this comment for the benefit of the readers.

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### *Reply from the Author*

No reply was received from the Author.

### *References*

1. Alnasir FA, Masuadi EM. The effect of loss of body weight on lipid profile in overweight individuals. *Saudi Med J* 2006; 27: 687-692.
2. Walldius G, Jungner I. The apoB/apoA-I ratio: a strong, new risk factor for cardiovascular disease and a target for lipid-lowering therapy--a review of the evidence. *J Intern Med* 2006; 259: 493-519.
3. Sniderman AD, Junger I, Holme I, Aastveit A, Walldius G. Errors that result from using the TC/HDL C ratio rather than the apoB/apoA-I ratio to identify the lipoprotein-related risk of vascular disease. *J Intern Med* 2006; 259: 455-461.

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