

Endocrinological diseases and related expression of the HDL phenotype

*Dullaart RPF*

Department of Endocrinology, University Hospital Groningen, Groningen

It is increasingly becoming clear that the risk for cardiovascular diseases is elevated in many endocrine diseases, including growth hormone deficiency, acromegaly, Cushing syndrome and hypothyroidism. With the exception of hypothyroidism where HDL cholesterol is in the high-normal range, low levels of HDL cholesterol in conjunction with moderate hypertriglyceridemia, resembling the lipid abnormalities observed in insulin resistant states, are key features of this dyslipidemia. Although it is likely that abnormalities in HDL metabolism contribute to this increased cardiovascular risk, both the mechanisms responsible for altered HDL metabolism and the consequences for HDL function in terms of reverse cholesterol transport and antioxidative properties are still incompletely understood. In this paper the processes involved in HDL metabolism and remodelling as well as the abnormalities documented thus far in endocrine diseases which are in part elucidated by our group in Groningen will be outlined. Furthermore, new treatment modalities aimed to raise HDL cholesterol will be discussed.

Future perspectives of cardiovascular endocrinology: It is expected that insight in hormonal mechanisms responsible for cardiovascular disease will rapidly increase in the next 10 years, replacing endocrinology in the center of internal medicine. Moreover, insight in pathophysiology of disease in combination with genetics and epidemiology will lead to improved and individualized patient care.

R.P.F. Dullaart, Department of Endocrinology, University Hospital Groningen, Groningen, The Netherlands, e-mail [r.p.f.dullaart@int.azg.nl](mailto:r.p.f.dullaart@int.azg.nl)

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