

Anti-Hyperlipidemia Activity on Neonates and Perinatal

Hemant Swaroop U*

Department of Pharmacology, JNTU University, Telangana, India

*Corresponding author: Hemant Swaroop U, Department of Pharmacology, JNTU University, Telangana, India; Phone: +91 9160548770; E-mail: hemanth_s@outlook.com

Received date: April 04, 2016, Accepted date: June 14, 2016, Published date: June 21, 2016

Copyright: © 2016 Hemant Swaroop U. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Abstract

The review is to show the pharmacological activity of lipid lowering drugs on the perinatal hyperlipidemia in type-1 diabetes mellitus pregnant woman takes high amount of anti hyperlipidemic drugs during the gestation.

Keywords: Pharmacological; Anti-hyperlipidemia activity

Hyperlipidemia

The disease condition where the increased levels of unsaturated lipids in the blood. Lipids are fats they help the body to produce hormones and acts as an energy sources when proper diet is not available.

There are different types of lipids available in the body like fats,

Like hypertension, there is a scope of diabetics that happens in pregnancy including prior type 1 and type 2 diabetes mellitus (DM) and gestational diabetes [32-39].

Pregnant women will have the metabolic risk factors like obesity, hypertension, and poor glycemic levels. In type 1 DM the increase in the triglycerides level and decrease in the HDL levels in the first trimester shows physical changes in, then after the pregnancy the TG levels decrease.

There are unpretentious contrasts in type 1 DM and unusual states of unclear clinical conditions [40-47]. For instance, renal brokenness and type 1 DM is connected with higher TC and LDL portions while

22. Rimm EB, Williams P, Fosher K, Criqui M, Stampfer MJ (1999) Moderate alcohol intake and lower risk of coronary heart disease: meta-analysis of effects on lipids and haemostatic factors. *BMJ* 319: 1523-1528
23. Malloy MJ, Kane JP (2001) A risk factor for atherosclerosis: triglyceride-rich lipoproteins. *Adv Intern Med* 47: 111-136
24. Kamshoushy A, Mahdy N (2012) Evaluation of the Efficacy of Injection Lipolysis using Phosphatidylcholine/Deoxycholate Versus Deoxycholate Alone in Treatment of Localized Fat Deposits. *Journal of Clinical & Experimental Dermatology Research*.
25. Jansen EH, Beekhof PK, Schenk E (2014) Long term stability of parameters of lipid metabolism in frozen human serum: Triglycerides, free fatty acids, total-, HDL- and LDL-cholesterol, apolipoprotein-A1 and B. *Journal of Molecular Biomarkers & Diagnosis*.
26. Yang S, Liu M, Wu T (2015) Magnitude of the Difference between Fasting and Non-fasting Triglycerides, and Its Dependent Factors. *J Community Med Health Educ* 5: 2161-0711.
27. Zayed MA, Harring SD, Abendschein DR, Venuri C, Lu D, et al. (2016) Natriuretic Peptide Receptor-C is Up-Regulated in the Intima of Advanced Carotid Artery Atherosclerosis. *Journal of medical & surgical pathology* 1: 3
28. Alam MA (2016) Editorial: Misguided Macrophage and Risk of Coronary Atherosclerosis. *J Vasc Med Surg* 4: e118
29. Merlo S (2016) Polymorphisms rs669 and rs4762 of the Angiotensinogen Gene and Progression of Carotid Atherosclerosis in Patients with Type 2 Diabetes Mellitus. *J Diabetic Complications Med* 1: 107.
30. Afroz R, Tanvir EM, Little PJ (2016) Honey-derived Flavonoids: Natural Products for the Prevention of Atherosclerosis and Cardiovascular Diseases. *Clin Exp Pharmacol* 6: 208
31. Domenico PEM, Marta V, Luca N, Fabio B, Antonella A (2016) T e

