

Fibrates in CKD

林柏松

童綜合醫院腎臟科

CKD causes profound dysregulation of lipoprotein metabolism, resulting in multiple lipoprotein abnormalities. Depressed high density lipoprotein (HDL) levels and increased triglyceride-rich lipoproteins are the major lipid abnormalities. Mechanism and management of this atherogenic profile in CKD remains largely unclear. In recent years, most epidemiologic data suggested that elevated triglyceride levels are independently associated with CV risk. Accordingly, these patients were treated as recommended by NCEP. Fibrates have been used for the treatment of hypertriglyceridemia, with or without concomitant low levels of HDL cholesterol (HDL-C), for and their efficacy has been well defined. However, there are only limited data regarding the management of atherogenic dyslipidemia in CKD patients. Fibrates, particularly fenofibrate, are safe and appear effective for the long-term management of CKD patients with high CVD risk, particularly when this increased CVD risk is due to the presence of atherogenic dyslipidemia. This presentation will discuss the impact of the problem and available data we have so far.