



# ESTIMATION OF TOTAL CHOLESTEROL

## CLINICAL BIOCHEMISTRY

### Lab: 6

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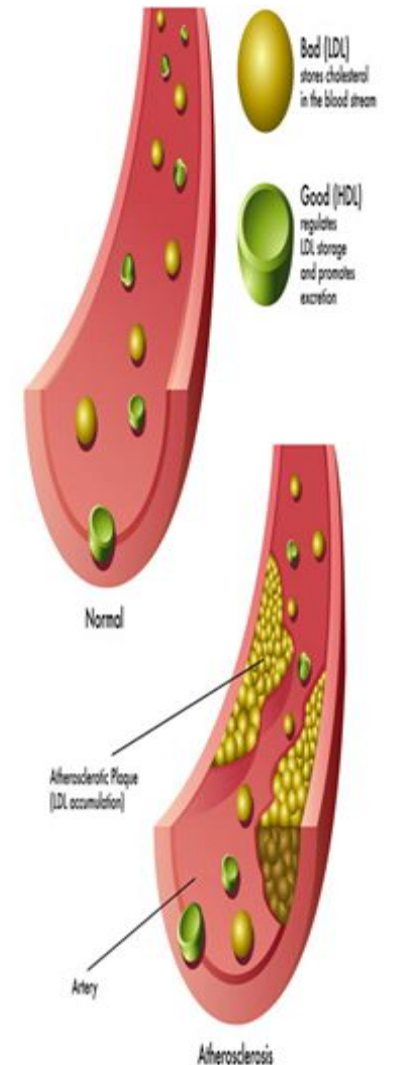
Fall Semester (2024-2025)

# Outlines

- ✓ Clinical importance of cholesterol
- ✓ Principle
- ✓ Calculation
- ✓ Hypercholesterolemia
- ✓ Hypocholesterolemia



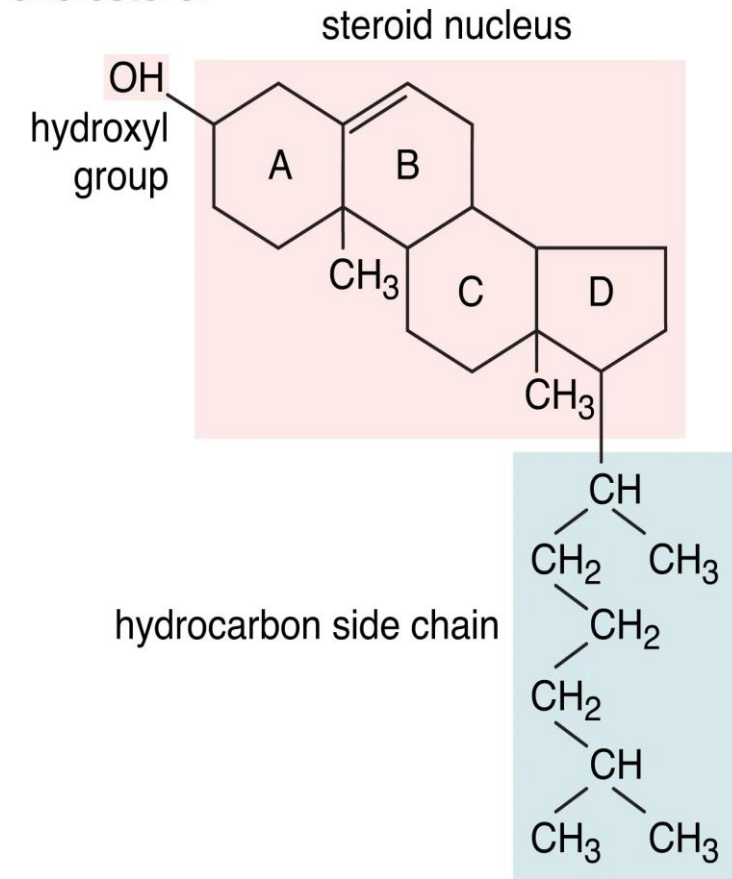
## Bad vs. Good Cholesterol



# Cholesterol

- Cholesterol is a steroid alcohol, synthesized in all body cells , **mainly in the liver**.
- Cholesterol is the precursor to steroid hormones, bile acids, and vitamin D.

cholesterol



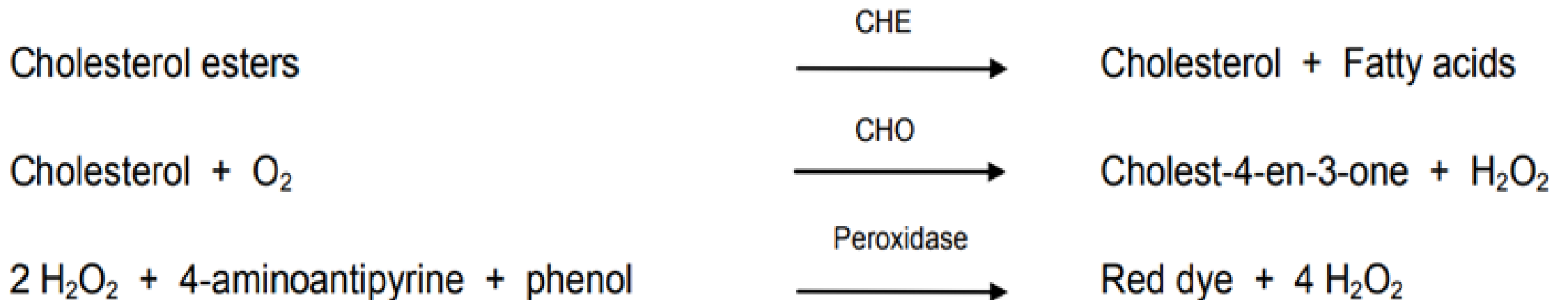
# Clinical importance of cholesterol

- The determination of serum cholesterol is one of the important tools in the diagnosis and classification of lipemia.
- Elevated cholesterol levels are a major component in the hereditary Hyperlipoproteinemias, which is related to CHD and atherosclerosis.
- Cholesterol determinations are also frequently a part of thyroid function, liver function, renal function, and diabetes mellitus studies.
- It is also used to monitor effectiveness of diet, medications, lifestyle changes (e.g., exercise), and stress management.

|                      |       |       |
|----------------------|-------|-------|
| Glucose              |       |       |
| <b>Lipid Profile</b> |       |       |
| - Cholesterol        | 320 H |       |
| - Triglyceride       | 265 H | mg    |
| - HDL-C              | 72 H  | mg/dL |
| - LDL-C              | 220 H | mg/dL |

# Principle

- This method for the measurement of **total cholesterol** in serum involves the use of three enzymes: cholesterol esterase (CE), cholesterol oxidase (CO) and peroxidase (POD)
- The intensity of the color formed is proportional to the cholesterol concentration in the sample



# Procedure

1. Adjust the instrument to zero with distilled water.
2. Pipette into a cuvette:

| Pipet into Tubes | Blank       | Standard    | Sample      |
|------------------|-------------|-------------|-------------|
| Reagent          | 500 $\mu$ L | 500 $\mu$ L | 500 $\mu$ L |
| D.W              | 5 $\mu$ L   |             |             |
| Standard         |             | 5 $\mu$ L   |             |
| Test sample      |             |             | 5 $\mu$ L   |

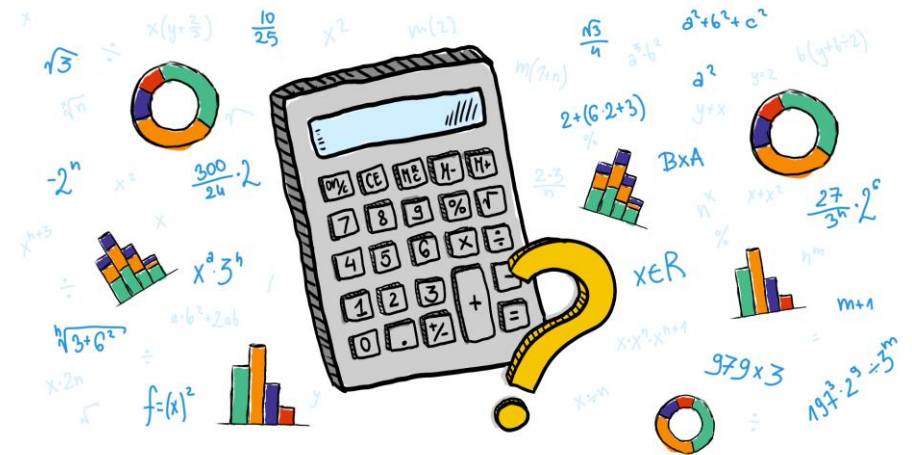
3. Mix and incubate for 5 min at 37 C<sup>o</sup> or 10 min at room temperature (15-25 C<sup>o</sup>).
4. Read the absorbance (A) of the samples and standard, against the Blank. The color is stable for at least 60 minutes.

# Calculations

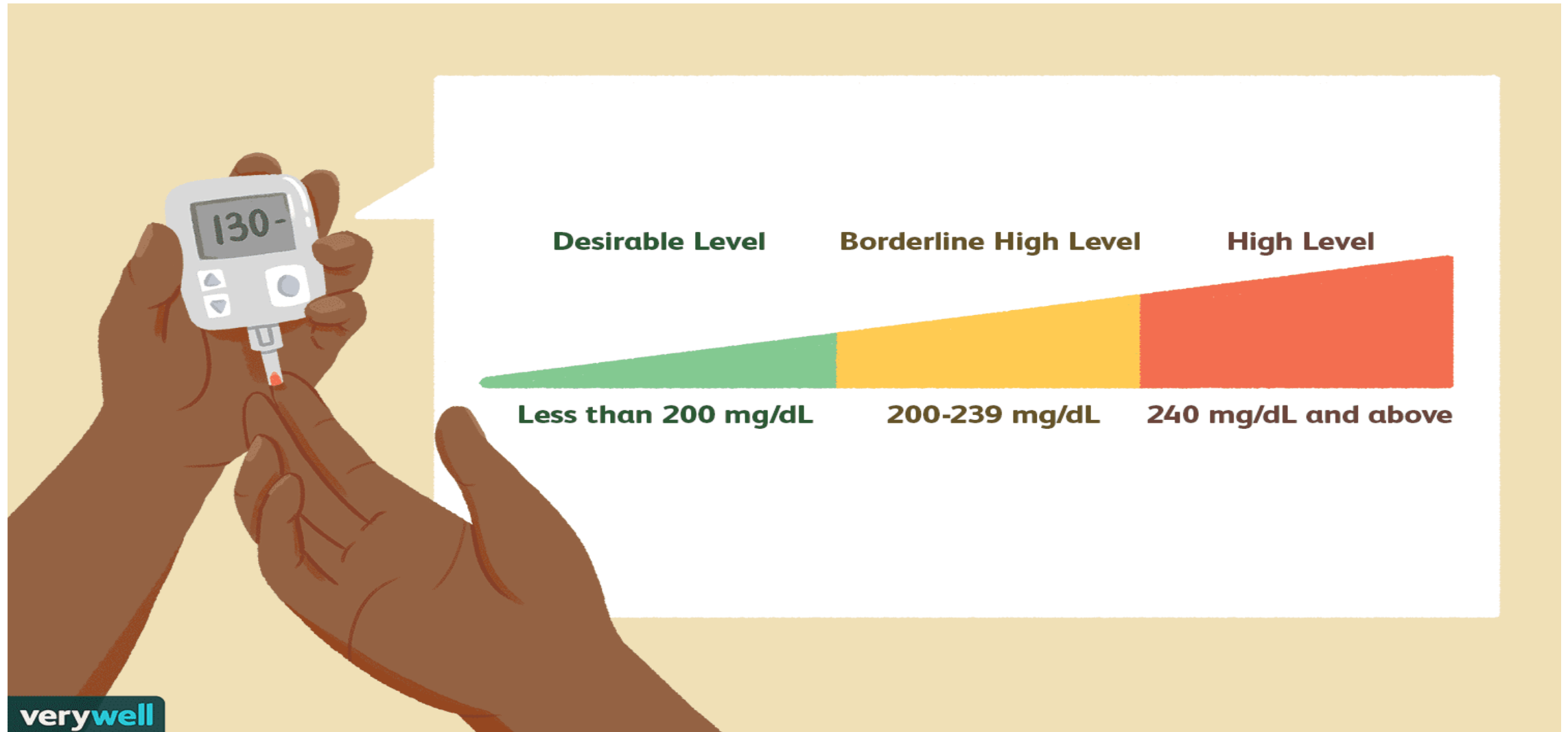
A (Sample) x 200 (Standard conc.) = mg/dL cholesterol

A (Standard)

Conversion factor: mg/dL x 0.0259= ..... mmol/L.

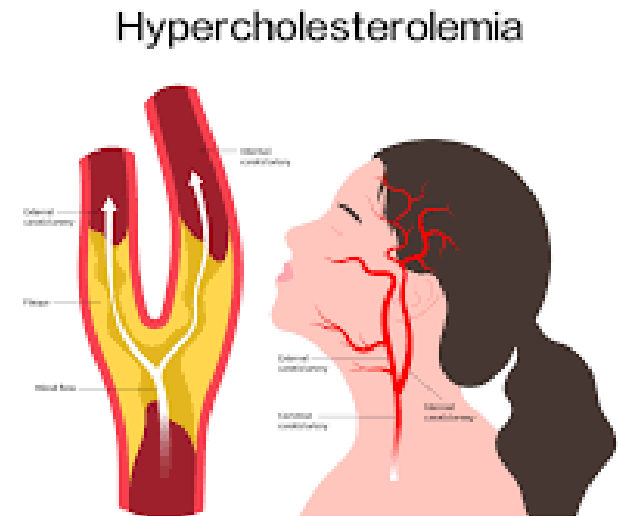


# Total cholesterol level



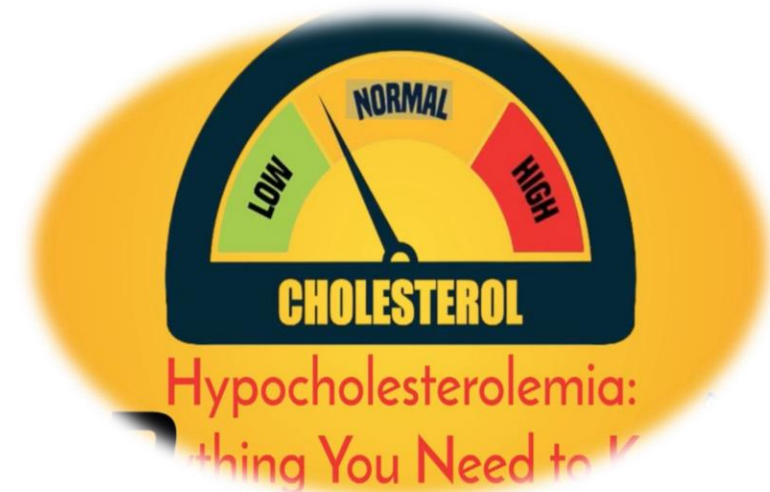
# What causes hypercholesterolemia?

- Genetics: familial hypercholesterolemia
- Nephrotic syndrome (Impaired clearance of **LOW** density lipoproteins)
- Chronic kidney failure
- HYPOTHYROIDISM
- Obstructive liver diseases
- Cushing's syndrome
- Medications (bile acid sequestrants)
- Starvation
- Obesity
- Diet rich in saturated fat
- Idiopathic



# Hypocholesterolemia

- Hypocholesterolemia is a condition where total blood cholesterol level is less than 160 mg/dL
- Hypolipidemia is a common disorder affecting about 2–3% of apparently healthy individuals and up to 6% of hospitalized patients.



# What causes hypocholesterolemia?

## Primary disorders

Abetalipoproteinemia

Hypobetalipoproteinemia

Chylomicron retention disease

## Secondary disorders

Infection (acute or chronic)

Malabsorption and undernutrition

Anemia

Chronic inflammation

Critical illnesses

Malignancies

Hyperthyroidism

Chronic liver disease

Gaucher disease

Drug induced: statins

# References

- H. Varley , A.H. Gowenlock and M. Bell, Practical Clinical Biochemistry Vol.2 Fifth Ed.(whitefriars press Ltd, Tonbridge, Great Britain, 1984)
- Marshall WJ, Bangert SK, Lapsley M. Clinical Chemistry. 7th ed. Mosby Elsevier; 2012. Accessed October 17, 2024.