•Association of body fat distribution and carotid intima media thicknesss with Vitamin D in obese premenopausal women

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OBJECTIVES

It has been demonstrated that there are differences in the effect of body mass index (BMI) on the serum 25-hydroxyvitamin D levels (25-OH D); differences appeared stronger in subjects with higher BMI. In this study we aimed to assess the association between 25-OH D status and body fat and media distribution caratid intima thickness.

METHODS

86 obese premenapousal women (aged 17-55 years) and 56 women Antropometric took part in this study. BMI with normal measurements including waist circumferences(WC) were done. Serum concentrations of fasting blood glucose, insulin, calcium, PTH, 25-OH D were measured. Body fat distrubution was evaluated by ultarsonography. Body fat thickness in four regions and carotid intima media thickness(CIMT) were measured. Total fat and fat ratio were also measured by Bioelectrical Impedance Analysis (BIA)

	Obesity (n=86)	Control (n56)	P
Visceral Fat Thickness (mm)	54,17	30,04	<0,001
Preperitoneal Fat Thickness(mm)	20,36	6,72	<0,001
Subcutaneous Fat Thickness(mm)	34,38	18,59	<0,001
Carotid Intima Media Thickness((mm)	1,37	0,53	<0,001
Epicardial fat Thickness (mm)	5,19	3,25	<0,001
PTH ((pg/mL)	55,51	60,46	0,698
25-OH D (ng/ml)	15,83	11,40	0,587
Fasting blood glucose (mg/dL)	90,23	96,98	<0,001

Table-1: Results of obesity and control groups

RESULTS

VFT, SFT, PFT and the CIMT were significantly higher in obese subjects (p < 0.01). 25-OH D were correlated negatively with waist circumference(p=0,025,r=-0,263) and VFT(p=0,002,r=-0,366). Whereas PTH levels were positively correlated with WC (p=0,042,r=+0,241). There wasn't any correlation with 25-OH D and SFT and PFT. Total fat mass was also negatively correlated wtih 25-OH D. CIMT was negatively correlated with 25-OH D (p=0,028,r=-0,269) and positively correlated with PTH (p=0,018,r=+0;291). Results are shown in Table-1.

CONCLUSIONS

In a study conducted in Shanghai in 2014;. 25 (OH) D was negatively correlated with BMI, waist circumference, fat%, fat mass, VF and SCF. After adjustment for age and BMI, while fat mass, fat%, VF and triglycerides has continued to be inversely proportional with 25 (OH) D3. In regression analysis, waist circumference and VF are independently correlated with 25 (OH) D3. (1) We found a negative correlation between vitamin D and FBG, waist circumference and VF. Vitamin D had a positive correlation between whole body impedance. In a study conducted in 2006 in Italy; type 2 DM patients and controls were compared and evaluated by ultrasonography KIMT as in our study. Decreased 25 (OH) D is predicted regression analysis with risk factors for KIMT . (2) While in our study KİMT was negatively correlated with vitamin D.

References

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