## **Editor's comment**

## **Lipids in context**

In a recent case in the United States, fortunately thrown out by the courts, a mother tried to sue fast-food manufacturer McDonalds for her teenage son's obesity and disturbed lipid profile. This child had apparently eaten the largest combination of hamburger and chips available at the outlet every day from an early age. Needless to say, he was not an active child, and compounded this unhealthy lifestyle with hours spent in front of the television. This is an extreme example of an increasing trend — a high-fat diet and a sedentary lifestyle.



This is not confined to the Western world. The developing world is also starting to see an increase in the diseases of lifestyle as westernisation creeps in, bringing convenient but potentially dangerous lifestyle changes.

At the extreme of the scale, a high-fat diet and the sedentary Western lifestyle bring with it disturbed lipid profiles, type 2 diabetes and obesity, leading to premature death and disability usually through cardiovascular disease. Disturbances in lipid profile are often the first indication that something is wrong and understanding the assessment and management of these issues is vital for any GP.

Lipid metabolism is interesting but highly complex. I certainly found the biochemistry a struggle during my undergraduate years. Dyslipidaemia, by its nature, is even more complex, making understanding vital to successful management.

Managing any condition depends on a combination of an understanding of biochemical and physiological mechanisms which underlie it, its pathology and aetiology and exactly how this makes an impact on each individual patient. The careful choice of topics and the clarity with which they are explained, will help the increasingly overstretched GP to successfully manage this diverse group of disorders and contribute to the health of their practice population.

I found all these articles enjoyable and informative. I am sure that you will too.

## **Bridget Farham**







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