



Epidemiologic Evidence on Serum Adiponectin Level and Lipid Profile

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ABSTRACT

The concentration of adiponectin, a hormone which is secreted from adipose tissue, is inversely correlated with body fat mass. This hormone has anti inflammatory and anti atherogenic properties. Its concentration reduces in metabolic syndrome and cardiovascular diseases. This study reviews the evidence on the relationship between serum adiponectin concentration and lipid profile. In this study former clinical trials, cross sectional and prospective studies have been reviewed. The PubMed search engine has been used to find related research for the topic by considering dyslipidemia, total cholesterol (TC), high and low density protein (HDL and LDL), triglyceride (TG), lipid profile (LP) and adiponectin as the key words. Finally, 25 articles were recruited to review in the present article. Serum adiponectin level was positively correlated with plasma HDL cholestrol concentrations. There was a significant inverse relationship between plasma triglyceride and serum adiponectin. An inverse correlation between very low density lipoprotein (VLDL) and LDL levels and adiponectin was reported from the studies. So, Adiponectin has an important role in the metabolism of lipid profile including HDLc.

Keywords: Adiponectin, HDL, LDL, Lipid profile, TG, VLDL

INTRODUCTION

Obesity, as a major health problem in all countries,^[1] is influenced by environmental and genetic factors.^[2] Obesity leads to insulin resistance, dyslipidemia and metabolic syndrome.^[3] Furthermore, inflammatory markers are increased in metabolic syndrome.^[4] Systemic inflammation is also associated with type 2 diabetes, atherosclerosis and cardiovascular disease (CVD).^[5] On the other hand, as energy density increases, the risk of CVD^[6] and metabolic syndrome^[7] elevates. Increased waist circumference in obese patients is associated with increased levels of TG and inflammatory factors.^[8] Adiponectin levels, as an anti inflammatory hormone, are reduced in obese subjects.^[3]

Adiponectin is a cytokine which is mainly secreted from adipose tissue,^[9] and its concentration is inversely associated with body fat mass.^[10] This hormone constitutes 10% of total plasma proteins.^[11] The major form of this hormone in plasma is the oligomers with high molecular weight (HMW).^[12]

Adiponectin receptors exist in two forms (AdipoR1 and AdipoR2), and both receptors expression is associated with insulin sensitivity.^[13] The plasma adiponectin concentration is inversely associated with inflammation, serum glucose levels, atherosclerosis, hyperlipidemia, diabetes, CVD and hypertension.^[14-20] It is shown that less than 4 µg/ml concentration of adiponectin is related to early incidence of coronary heart disease (CHD).^[21] Consuming different diets could affect on adiponectin s concentrations. Weight loss diets,^[22] healthy dietary patterns,^[23] more consumption of marine protein^[24] and eggs^[25] are effective in increasing plasma adiponectin levels. Healthy eating patterns can also be effective in improving insulin resistance and metabolic syndrome.^[26] Soy protein also increases levels of this hormone^[27] and improves blood lipids.^[28] Studies have shown that difference the prevalence of low HDL C and high TG in middle income countries and other countries is due to differences between their diets.^[29]

Several studies have shown the relationship between adiponectin and plasma lipid levels.^[15-20] In most studies, the level of this hormone indicates an inverse relationship with the low density lipoprotein (LDL), triglycerides (TG) serum cholesterol; and a positive correlation with high density lipoprotein (HDL).^[15,20,30-32] Adiponectin level is associated with HDL, independent of abdominal fat and body mass index (BMI) and insulin sensitivity.^[33] Dyslipidemia which is characterized by low concentrations of apolipoprotein A_r and high concentrations of TG-rich lipoproteins^[31] has an inverse relationship with serum adiponectin concentrations.^[20] It is also shown that plasma adiponectin regulates TG rich lipoprotein metabolism^[34] and lipid metabolism regulatory enzymes.^[35] According to a survey, elevation of serum TG/HDL, TC/HDL and LDL/HDL ratios reduces the plasma log of adiponectin level^[32]. TG/HDL, TC/HDL and LDL/HDL ratios are predictive of insulin resistance,[36] CVD[37] and CHD,^[38] respectively. Serum TG and HDL levels are two important constituents of metabolic syndrome^[32] which are effective in incidence of CVD.^[39] Because of the fundamental role of serum adiponectin level in chronic diseases and also the importance of dyslipidemia in cardiovascular disease and metabolic syndrome, the aim of present study is an overview of the relationship between serum adiponectin level and plasma lipid profile (LP).

METHODS

For assessing the association between adiponectin level and lipid profile, PubMed was searched from 2002 to October 2011, by using the following key words for the topic: Dyslipidemia, lipid profile, triglyceride, high or low density lipoprotein, total cholesterol and adiponectin. All 153 articles with design of clinical trials, cross sectional and prospective studies have been reviewed. 25 articles were recruited in this review and other duplicated and studies with no free access full text were excluded. We included any articles which mentioned about the association between serum/plasma adiponectin (total adiponectin and/ or any type of HMW, MMW and/or receptors of adiponectin) with lipid profile (such as triglyceride, very low, low and high density lipoprotein and total cholesterol) among healthy/patients 'men and/ or women. We also included the articles which have been discussed about the relationship between adiponectin with size of lipoproteins. Finally, the most relevant articles were included and others were excluded. Studies that investigated the association between levels of adiponectin and lipid profile are presented in [Table 1].

RESULTS

Relationship between serum adiponectin and plasma lipid levels

Various studies have shown a strong positive correlation between plasma adiponectin and HDL levels.^[15,30,31,33,40-43] Correlation coefficients based on association between adiponectin and HDL resulted from the studies are shown in Graph 1.

In a study of 158 patients with familial hyperlipidemia, every 25% reduction in serum adiponectin, led to 7.3% reduction in HDL-c. Low level of the hormone was shown in patients with familial hyperlipidemia, which is associated with an increase in atherogenic lipids such as low HDL and high LDL and high TG.^[17] The study investigated 1174 patients in the age range of 30-70 years, who were suffered from coronary heart disease (CHD). 31% of participants had features of metabolic syndrome. Serum adiponectin level had



Graph 1: Correction coefficient based on association between adiponection and HDL. 30. Matsubara M, *et al.* 19. Mantzoros CS, *et al.* 15. Geloneze B, *et al.* 20. Eynatten MV, *et al.* 3. Licenciature NH, *et al.* 1. Alitinova AE, *et al.*

possitive association with HDL-c, after adjustment for possible confounding (r = 0.21, P < 0.0001).^[20] In a cohort study on 138 obese children, there was a direct relationship between serum adiponectin and HDL (r = 0.26, P = 0.002).^[3] This relationship elevated by an increasing the rate of obesity in adolescents.^[44] Positive and significant association was observed between HDL cholesterol and plasma adiponectin level, after adjusting the effect of body fat mass, sexual maturation, waist circumference,^[18] and BMI.^[12,18] This relationship also was observed in overweight and obese adults (r = 0.27, P < 0.009).^[1] According to a study on 925 diabetic women, in the age range of 30-55 years, increasing of 10 µg/ml in circulating adiponectin level elevated 4.11 µg/ml in plasma HDL levels (22%).^[19]

Findings from some investigations showed

Table 1: Studies that investigated about association of adiponectin level and lipid profile

Study	Type of study	Study comments	Results
Wagner <i>et al</i> . ^[18]	Cross-	647 overweight and obese	Direct association between serum adiponectin
	sectional	adolescents, aged 12 years	concentration and HDL, inverse correlation with TG
Geloneze B et al. ^[15]	Cross-	31 thin, overweight	Positive and strong correlation between adiponectin
	sectional	and obese subjects	and HDL/inverse association with TG
Mantzoros CS	Cross-	925 diabetic women,	Increasing 10 µg/ml of adiponectin lead to 22% elevation
<i>et al</i> . ^[19]	sectional	aged 30-55 years	of HDL/25% reduction of TG/6% reduction of ApoB ₁₀₀
Matsubara M	Cross-	352 women suffered	Positive correlation between adiponectin and HDL/
<i>et al</i> . ^[30]	sectional	form dislipidemia	and inverse association with TG and LDL
van der Vleuten GM	Cross-	647 hyperlipidemic	25% reduction of plasma adiponectin level lead to 6.2%
<i>et al</i> . ^[17]	sectional	and control subjects	elevation of TG and 3.7% reduction of HDL/no relationship
			between adiponectin and TC, LDL-C and ApoB
Eynatten MV	Cross-	1174 men with	Positive correlation between the hormone and HDL/
<i>et al</i> . ^[20]	sectional	CHD disease	and inverse association with TG and TC/HDL ratio
Chan DC <i>et al</i> . ^[31]	Cross-	50 obese men and 37	Positive correlation between the hormone and HDL and
	sectional	non-obese men	Apo A _l /and inverse association with VLDL ApoB
Nascimento H <i>et al.</i> ^[3]	Prospective	138 obese children	Positive correlation between the hormone and HDL/ and inverse association with TG and TC/HDL ratio
Broedl UC <i>et al</i> . ^[13]	Cross-	20 men and women	Inverse association between aAdipo R ₂ with
	sectional	with obesity and	VLDL-TG, VLDL-C and TG/positive relationship
		insulin resistance	between adiponectin with catabolism of ApoB
Maruyama C <i>et al</i> . ^[16]	Clinical	24 diabetic patients and	Subjects with higher level of HMW had
	trial	17 healthy subjects, aged	lower levels of TG and VLDL-C
		18-49 years, consuming of	
		2 meals including of toast	
		bread with or without butter	
		before blood screening	
Altinova AE <i>et al</i> . ^[1]	Cross-	46 overweight and obese	Positive correlation between adiponectin and HDL/no
	sectional	women and men	association with TC, LDL and TG

HDL=High density lipoprotein, TG=Triglyceride, CHD=Coronary heart disease, LDL=Low density lipoprotein, TC=Total cholesterol, VLDL=Very low density lipoprotein



Graph 2: Correction coefficient based on association between adiponection and TG. 19. Mantzoros CS, *et al.* 45. Chan DC, *et al.* 3. Licenciatura NH, *et al.* 30. Matsubara M, *et al.* 20. Eynatten MV, *et al.*

that adiponectin levels are inversely correlated with plasma TG concentration.^[33,44-46] Correlation coefficients based on association between adiponectin and TG resulted from the studies are shown in Graph 2.

In a study on 37 non-obese men, an inverse relationship was shown between plasma adiponectin concentration and plasma TG levels (r = 0.327).^[45] A 25% reduction in this hormone levels, increased TG concentration by 6.2%.^[17] In an analysis on 138 obese children, a significant inverse correlation was observed between TG level and hormone levels (r = -0.392, P < 0.001).^[3] A study on Japanese men and women, was shown that low concentration of HMW (less than 97.2 µg/ml) was associated with the TG/HDL cholesterol (r = 0.67, 95CI, 0.63-0.71).^[40] In another study of patients with type 1 diabetes, patients with the higher level of HMW had TG levels less than those with lower HMW (P < 0.01).^[16] In a study among 352 women with dyslipidemia, aged 18-86 years, plasma adiponectin concentrations were inversely associated with serum TG level (r = -0.33, P < 0.0001.^[30] In multiple linear regressions, after adjusting for confounding, elevation of 10 µg/ml circulating adiponectin level caused to 25% reduction in TG levels (47.4 mg/dl).^[19] In a cross-sectional study of 1174 patients with CHD, after adjustment for age and sex, there was an inverse relationship between serum adiponectin levels and plasma TG level (r = -0.21, P < 0.0001).^[20]

Findings from some studies suggest an inverse relationship between serum adiponectin concentration and the concentration of TC,^[33] VLDL^[16,47] and LDL.^[30,33,48,49] However some previous studies have reported contradictory findings.^[1,19]

A study on 352 adult women with dyslipidemia, showed a significant inverse relationship between plasma adiponectin level and LDL cholesterol concentration, after adjusting for the effect of BMI (P = 0.082).^[30] Adiponectin concentrations were inversely associated with LDL cholesterol level among girls.^[50] In another study on 925 women with diabetes, no significant correlation between circulating adiponectin concentration, LDL cholesterol and TC was observed. While in the multiple linear regression, for each 10 µg/ml increase in adiponectin, the level of apo B_{100} decreased by 5.68 ng/dl (equivalent to 6%).^[19] An inverse relationship between adiponectin and LDLox levels (LDL oxidized) was observed in people with diabetes, CAD and those with coronary heart failure (CHF).^[51,52] While there was a positive relationship between hormone concentrations in pregnant women and LDLox,^[53] no relationship were reported between hormone levels, TC and LDL apo B in the study of patients with familial hyperlipidemia^[17] and overweight subjects.^[1]

In studies on type 1 diabetic patients, people with higher levels of HMW had lower VLDL cholesterol levels than in healthy subjects and diabetic patients with low HMW.^[16] On the other hand, adiponectin has been suggested as an independent predictive in apo B-VLDL catabolism.^[47] Hormone R2 receptors are also linked directly with apo B-VLDL catabolism.^[13] Based on the findings of a recent study, plasma adiponectin participates to change VLDL-apo B₁₀₀ by regulating Apo A_{II} transfer.^[45]

DISCUSSION

In general, adiponectin correlates with HDL independent of BMI and insulin resistance,^[15] and this shows that the plasma concentration of adiponectin in obese patients, regulates plasma HDL cholesterol levels independently of BMI and insulin resistance.^[1,15] Based on findings from several previous studies, adiponectin stimulates the activity of peroxisome proliferation activated receptor α ligand (PPAR α) in both skeletal muscle and liver. Thus a possible reason for the positive association between increased concentrations of HDL serum and adiponectin concentrations is the effect of the related PPAR α gene to the metabolism of HDL.^[12,54] Adiponectin also acts as an important

component in the catabolism of apo A₁, independent of insulin sensitivity.^[55] Increasing the concentration of adiponectin during a weight loss program is significantly related to reducing the catabolism of apo A_r.^[56] On the other hand, HDL plays an intermediate role in the relationship between serum adiponectin and CHD. Thus treatment with PPAR α agonists such as rosiglitazone increases adiponectin gene expression and levels of HDL can be improved.^[10] Thus, the relationship between serum adiponectin and HDL probably is controlled physiological/pathological mechanisms. by Adiponectin regulates HDL concentration by reducing HDL catabolism and inhibiting hepatic lipase activity.^[57]

According to studies, adiponectin may increase TG plasma concentrations through elevating skeletal muscle LPL and VLDL receptor expression and thus reduce VLDL catabolism.^[58] Adiponectin reduces TG storage in skeletal muscle by increasing fatty acid oxidation through AMP kinase activity.^[59] On the other hand, HMW is also able to increase the activity of TG metabolism.^[16] The Adiponectin R2 receptor also plays an important role in the metabolism of VLDL and TG. Increasing of the R2 receptor is associated with reduced plasma TG.^[13] The findings of a study on macrophage foam cells showed that cholesterol and TG accumulation in these cells is reduced by reduction of LDL_{or} and elevation of the HDL-cholesterol flow by expression of adiponectin in macrophage foam cells.^[60]

Observations suggest that adiponectin has been effective on pathology of lipid metabolism.^[19] Based on the findings adiponectin reduces the secretion of hepatic apoE and apoB from the liver. The effect of ApoE on blood lipid levels is influenced by the BMI and adiponectin levels.^[3] Adiponectin can increase the insulin activities, improve the glucose tolerance and plays an important role on fatty acid oxidation. It may also affect on lipid metabolism.^[61, 62] On the other hand, adiponectin is significantly associated with both LDL and HDL size, so that it has an inverse relationship with small LDL cholesterol (P < 0.006) and is correlated with large LDL cholesterol (P < 0.001).^[63]

According to the important role of adiponectin in preventing dyslipidemia and its inverse relationship of the hormone with the concentration of LDL cholesterol, TC and TG levels and also the positive relationship between circulating adiponectin and HDL cholesterol levels, the use of nutritional strategies such as diet and weight loss^[16,22,64] and use of healthy eating patterns^[23,65] to improve adiponectin levels is recommended.

CONCLUSION

Findings from various studies indicate a positive correlation between circulating adiponectin levels and HDL cholesterol concentrations.^[30,31] It is possible that adiponectin regulates HDL cholesterol concentration, independent of BMI and insulin resistance.^[15] There is an inverse relationship between hormone levels and TG levels.^[33,44] TG is able to reduce adiponectin plasma concentrations.^[58] R2 adiponectin receptors also play an important role in the metabolism of VLDL cholesterol and TG.^[13] Our findings suggest that there is an inverse relationship between VLDL cholesterol, LDL cholesterol, TC, LDL_{OX} concentrations and serum adiponectin levels.^[16,30,33]

REFERENCES

- 1. Alitinova AE, Tourneur F, Bukan N, Yasar DG, Akturk M, Cakir N, *et al*. Decreased plasma adiponectin associated with insulin resistanse and HDL cholesterol in overweight subjects. Endocr J 2007; 54:221-6.
- 2. Esmaillzadeh A, Azadbakht L. Major dietary patterns in relation to general obesity and central adiposity among Iranian women. J Nutr 2008; 138:358-63.
- 3. Licenciatura NH, Silva L, Lourenc P, Weinfurterova' R, Castro E, Rego C, *et al*. Lipid profile in portuguese qbese children and adolescents. Arch Pediatr Adolesc Med 2009;163:1030-6.
- 4. Azadbakht L, Esmaillzadeh A. Red meat intake is associated with metabolic syndrome and the plasma C-ireactive protein concentration in women. J Nutr 2009;139:335-9.
- 5. Esmaillzadeh A, Azadbakht L. Home use of vegetable oils, markers of systemic inflammation, and endothelial dysfunction among women. Am J Clin Nutr 2008;88:913-21.
- Esmaillzadeh A, Boroujeni KH, Azadbakht L. Consumption of energy-dense diets in relation to cardiometabolic abnormalities among Iranian women. Public Health Nutr 2012;15:868-75.
- 7. Esmaillzadeh A, Azadbakht L. Dietary energy density

and the metabolic syndrome among Iranian women. Eur J Clin Nutr 2011;65:598-605.

- 8. Esmaillzadeh A, Azadbakht L. Increased levels of inflammation among women with enlarged waist and elevated triglyceride concentrations. Ann Nutr Metab 2010;57:77-84.
- 9. Basati G, Pourfarzam M, Movahedian A, Samsamshariat SZ, Sarrafzadegan N. Reduced plasma adiponectin levels relative to oxidized low density lipoprotein and nitric oxide in coronary artery disease patients. Clinics (Sao Paulo) 2011;66:1129-35.
- 10. Toth PP. Adiponectin and high-density lipoprotein: A metabolic association through thick and thin. Eur Heart J 2005;26;1579-81.
- Xu A, Yin S, Wong L, Chan KW, Lam KS. Adiponectin Ameliorates Dyslipidemia Induced by the Human Immunodeficiency Virus Protease Inhibitor Ritonavir in Mice. Endocrinology 2004;145:487-94.
- Ong KK, Frystyk J, Flyvbjerg A, Petry CJ, Ness A, Dunger DB. Sex-Discordant associations with adiponectin levels and lipid profiles in children. Diabetes 2006;55: 1337-41.
- 13. Broedl UC, Lehrke M, Fleischer-Brielmaier E, Tietz AB, Nagel JM, Göke B, *et al.* Genetic variants of adiponectin receptor 2 are associated with increased adiponectin levels and decreased triglyceride/VLDL levels in patients with metabolic syndrome. Cardiovasc Diabetol 2006;5:11.
- 14. Evagelidou EN, Giapros VI, Challa AS, Kiortsis DN, Tsatsoulis AA, Andronikou SK. Serum adiponectin levels, insulin resistance, and lipid profile in children born small for gestational age are affected by the severity of growth retardation at birth. Eur J Endocrinol 2007;156:271-7.
- 15. Geloneze B, Pereira JA, Pareja JC, Lima MM, Lazarin MA, Souza IC, *et al.* Overcoming metabolic syndrome in severe obesity: Adiponectin as a marker of insulin sensitivity and HDL-cholesterol improvements after gastric bypass. Arq Bras Endocrinol Metabol 2009;53:293-300.
- Maruyama C, Ishibashi R, Araki R, Koike S, Hirose H, Maruyama T. HMW- adiponectin associates with triglyceride concentrations in type 1 diabetic patients. J Atheroscler Thromb 2009;16:207-16.
- 17. van der Vleuten GM, van Tits LJ, den Heijer M, Lemmers H, Stalenhoef AF, de Graaf J. Decreased adiponectin levels in familial combined hyperlipidemia patients contribute to the atherogenic lipid profile. J Lipid Res 2005;46:2398-404.
- Wangner A, Simon C, Oujaa M, Platat C, Schweitzer B, Arveiler D. Adiponectin is associated with lipid profile and insulin sensitivity in French adolescents. Diabetes

Metab 2008;34:465-71.

- 19. Mantzoros CS, Li T, Manson JE, Meigs JB, Hu FB. Circulating Adiponectin Levels Are Associated with Better Glycemic Control, More Favorable Lipid Profile, and Reduced Inflammation in Women with Type 2 Diabetes. inflammation in diabetic women. J Clin Endocrinol Metab 2005;90:4542-8.
- 20. Eynatten MV, Hamann A, Twardella D, Nawroth PP, Brenner H, Rothenbacher D. Relationship of adiponectin with markers of systemic inflammation, atherogenic dyslipidemia, and heart failure in patients with coronary heart disease. Clin Chem 2006;52:853-9.
- 21. Paschos G K, Zampelas A, Panagiotakos D B, Katsiougiannis S, Griffin B A, Votteas V, *et al.* Effects of flaxseed oil supplementation on plasma adiponectin levels in dyslipidemic men. Eur J Nutr 2007;46:315-20.
- 22. Liu YM, Lacorte JM, Viguerie N, Poitou C, Pelloux V, Guy-Grand B, *et al.* Adiponectin Gene Expression in Subcutaneous Adipose Tissue of Obese Women in Response to Short-Term Very Low Calorie Diet and Refeeding. J Clin Endocrinol Metab 2003;88:5881-6.
- 23. Fargnoli JL, Fung TF, Olenczuk DM, Chamberland JP, Hu FB, Mantzoros CS. Adherence to healthy eating patterns is associated with higher circulating total and high-molecular weight adiponectin and lower resistin concentrations in women from the Nurses' Health Study. Am J Clin Nutr 2008;88:1213-24.
- 24. Nagasawa A, Fukui K, Kojima M, Kishida K, Maeda N, Nagaretani H, *et al.* Divergent effects of soy protein diet on the expression of adipocytokines. Biochem Biophys Res Commun 2003; 311:909-14.
- 25. Ratliff JC, Mutungi G, Puglisi MJ, Volek JS, Fernandez ML. Eggs modulate the inflammatory response to carbohydrate restricted diets in overweight men. Nutr Metab (Lond) 2008;5:6.
- 26. Esmaillzadeh A, Kimiagar M, Mehrabi Y, Azadbakht L, Hu FB, Willet WC. Dietary pattern, insulin resistance, and prevalence of the metabolic syndrome in women. Am J Clin Nutr 2007;85:910-8.
- 27. Tremblay F, Lavigne C, Jacques H, Marette A. Role of dietary proteins and amino acids in the pathogenesis of insulin resistance. Ann Rev Nutr 2007;27:293-310.
- 28. Azadbakht L, Kimiagar M, Mehrabi Y, Esmaillzadeh A, Padyab M, Hu FB, *et al.* Soy inclusion in the diet improves features of the metabolic syndrome: A randomized crossover study in postmenopausal women. Am J Clin Nutr 2007;85:735-41.
- 29. Esmaillzadeh A, Azadbakht L. Food intake pattern may explain the high prevalence of cardiovascular risk factors among Iranian women. J Nutr 2008;138:1469-75.
- 30. Matsubara M, Maruoka S, Katayose S. Decreased Plasma Adiponectin Concentrations in Women with

Dyslipidemia. J Clin Endocrinol Metab 2002;87:2764-9.

- 31. Chan DC, Barrett PH, Ooi EM, Ji J, Chan DT, Watts GF. Very low density lipoprotein metabolism and plasma adiponectin as predictors of high-density lipoprotein apolipoprotein A-I kinetics in obese and nonobese men. J Clin Endocrinol Metab 2009;94:989-97.
- 32. Kimm H, Lee SW, Lee HS, Shim KW, Cho CY, Yun JE, Jee SH. Associations between Lipid Measures and Metabolic Syndrome, Insulin Resistance and Adiponectin. ratios in Korean men and women Circ J 2010;74:931-7.
- Bansal N, Charlton-Menys V, Pemberton P, McElduff P, Oldroyd J, Vyas A, *et al.* Adiponectin in umbilical cord blood is inversely related to low-density lipoprotein cholesterol but not ethnicity. J Clin Endocrinol Metab 2006;91:2244-9.
- 34. Chan DC, Watts GF, Ng TW, Uchida Y, Sakai N, Yamashita S, *et al*. Adiponectin and other adipocytokines as predictors of markers of triglyceride-rich lipoprotein metabolism. Clin Chem 2005;51:578-85.
- 35. von Eynatten M, Schneider JG, Humpert PM, Rudofsky G, Schmidt N, Barosch P, *et al.* Decreased plasma lipoprotein lipase in hypoadiponectinemia: An association independent of systemic inflammation and insulin resistance. Diabetes Care 2004;27:2925-9.
- McLaughlin T, Abbasi F, Cheal K, Chu J, Lamendola C, Reaven G. Use of metabolic markers to identify overweight individuals who are insulin resistant. Ann Intern Med 2003;139:802-9.
- 37. Ridker PM, Rifai N, Cook NR, Bradwin G, Buring JE. Non-HDL cholesterol, apolipoproteins A-I and B100, standard lipid measures, lipid ratios, and CRP as risk factors for cardiovascular disease in women. JAMA 2005;294:326-33.
- Ingelsson E, Schaefer EJ, Contois JH, McNamara JR, Sullivan L, Keyes MJ, *et al.* Clinical utility of different lipid measures for prediction of coronary heart disease in men and women. JAMA 2007;298:776-85.
- Azadbakht L, Mirmiran P, Esmaillzadeh A, Azizi F. Dairy consumption is inversely associated with the prevalence of the metabolic syndrome in Tehranian adults. Am J Clin Nutr 2005; 2:523-30.
- 40. Kawamoto R, Tabara Y, Kohara K, Miki T, Kusunoki T, Takayama S, *et al.* Relationships between lipid profiles and metabolic syndrome, insulin resistance and serum high molecular adiponectin in Japanese community-dwelling adults. Lipids Health Dis 2011;10:79.
- 41. Giannessi D, Caselli C, Del Ry S, Maltinti M, Pardini S, Turchi S, *et al.* Adiponectin is associated with abnormal lipid profile and coronary microvascular dysfunction in patients with dilated cardiomyopathy without overt heart

failure. Metabolism 2011;60:227-33.

- 42. Tsuzaki K, Kotani K, Sano Y, Fujiwara S, Gazi IF, Elisaf M, *et al.* The relationship between adiponectin, an adiponectin gene polymorphism, and high-density lipoprotein particle size: From the Mima study. Metabolism 2012;61:17-21.
- 43. Fujiwara S, Kotani K, Sano Y, Matsuoka Y, Tsuzaki K, Domichi M, *et al.* S447X polymorphism in the lipoprotein lipase gene and the adiponectin level in the general population: Results from the Mima study. J Atheroscler Thromb 2009;16:188-93.
- 44. Martin LJ, Woo JG, Daniels SR, Goodman E, Dolan LM. The relationships of adiponectin with insulin and lipids are strengthened with increasing adiposity. J Clin Endocrinol Metab 2005;90:4255-9.
- 45. Chan DC, Watts GF, Ooi EM, Chan DT, Wong AT, Barrett PH. Apolipoprotein A-II and adiponectin as determinants of very low-density lipoprotein apolipoprotein B-100 metabolism in nonobese men. Metabolism 2011;60:1482-7.
- Retnakaran R, Hanley AJ, Raif N, Connelly PW, Sermer M, Zinman B. Hypoadiponectinaemia in South Asian women during pregnancy: Evidence of ethnic variation in adiponectin concentration. Diabet Med 2004;21:388-92.
- 47. Ng TW, Watts GF, Farvid MS, Chan DC, Barrett PH. Adipocytokines and VLDL metabolism: Independent regulatory effects of adiponectin, insulin resistance, and fat compartments on VLDL apolipoprotein B-100 kinetics? Diabetes 2005;54:795-802.
- 48. Kasumi T, Kawaguchi A, Sakai K, Hirano T, Yoshino G. Young men with high-normal blood pressure have lower serum adiponectin, smaller LDL size, and higher elevated heart rate than those with optimal blood pressure. Diabetes care 2002;25:971-6.
- 49. Hulthe J, Hulten LM, Fagerberg B. Low adipocyte-derived plasma protein adiponectin concentrations are associated with the metabolic syndrome and small dense low-density lipoprotein particles: Atherosclerosis and insulin resistance study. Metabolism 2003;52:1612-4.
- Okada T, Saito E, Kuromori Y, Miyashita M, Iwata F, Hara M, *et al.* Relationship between serum adiponectin level and lipid composition in each lipoprotein fraction in adolescent children. Atherosclerosis 2005;188:179-83.
- 51. Lautamäki R, Rönnemaa T, Huupponen R, Lehtimäki T, Iozzo P, Airaksinen KE, *et al.* Low serum adiponectin is associated with high circulating oxidized low-density lipoprotein in patients with type 2 diabetes mellitus and coronary artery disease. Metabolism 2007;56:881-6.
- 52. Tanaka T, Tsutamoto T, Nishiyama K, Sakai H, Fujii M, Yamamoto T, *et al*. Impact of oxidative stress on plasma adiponectin in patients with chronic heart failure. Circ J

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2008;72:563-8.

- 53. Makedou K, Kourtis A, Gkiomisi A, Toulis KA, Mouzaki M, Anastasilakis AD, *et al.* Oxidized low-density lipoprotein and adiponectin levels in pregnancy. Gynecol Endocrinol 2011;27:1070-3.
- 54. Cote M, Mauriege P, Bergeron J, Almeras N, Tremblay A, Lemieux I, *et al*. Adiponectin in visceral obesity: Impact on glucose tolerance and plasma lipoprotein and lipid levels in men. J Clin Endocrinol Metab 2005;90:1434-9.
- 55. Verges B, Petit JM, Duvillard L, Dautin G, Florentin E, Galland F, *et al.* Adiponectin is an important determinant of Apo A-I catabolism. Arterioscler Thromb Vasc Biol 2006;26:1364-9.
- 56. Ng TW, Watts GF, Barrett PH, Rye KA, Chan DC. Effect of weight loss on LDL and HDL kinetics in the metabolic syndrome: Associations with changes in plasma retinol-binding protein-4 and adiponectin levels. Diabetes Care 2007;30:2945-50.
- 57. Schnrider JG, vov Eynatten M, Schiekofer S, Nawroth PP, Dugi KA. Low plasma adiponectin levels are associated with increased hepatic weight gain in humans. Diabetes 2002;51:2964-7.
- Qiao L, Zou C, Westhuyzen DR, Shao J. Adiponectin Reduces Plasma Triglyceride by Increasing VLDL Triglyceride Catabolism. Diabetes 2008;57:1824-33.
- 59. Yamauchi T, Kamon J, Minokoshi Y, Ito Y, Waki H, Uchida S, *et al.* Adiponectin stimulates glucose utilization and fatty-acid oxidation by activating AMP activated protein kinase. Nat Med 2002;8:1288-95.

- 60. Tian L, Luo N, Klein RL, Chung BH, Garvey WT, Fu Y. Adiponectin Reduces Lipid Accumulation in Macrophage Foam Cells. Atherosclerosis 2009;202:152-61.
- 61. Stefan N, Vozarova B, Funahashi T, Matsuzawa Y, Weyer C, Lindsay RS, *et al.* Plasma adiponectin concentration is associated with skeletal muscle insulin receptor tyrosine phosphorylation, and low plasma concentration precedes a decrease in whole-body insulin sensitivity in humans. Diabetes 2002;51:1884-8.
- 62. Berg AH, Combs TP, Du X, Brownlee M, Scherer PE. The adipocytesecreted protein Acrp30 enhances hepatic insulin action. Nat Med 2001;7:947-53.
- 63. Weiss R, Otvos JD, Flyvbjerg A, Miserez AR, Frystyk J, Sinnreich R, *et al.* Adiponectin and Lipoprotein Particle Size. Diabetes Care 2009;32:1317-9.
- 64. Baratta R, Amato S, Degano C, Farina MG, Patane G, Vigneri R, *et al.* Adiponectinrelationship with lipid metabolism is independent of body fat mass: Evidence from bothcross-sectional and intervention studies. J Clin Endocrinol Metab 2004;89:2665-71.
- 65. Mantzoros CS, Williams CJ, Manson JE, Meigs JB, Hu FB. Adherence to the Mediterranean dietary pattern positively associated with plasma adiponectin concentrations in diabetic Women. Am J Clin Nutr 2006;84:328-35.

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