

Also In control group of this research there was significantly negative correlations between post prandial (pp) TG with testosterone as in figure 1. This consider as risk factor for developing many systematic disease e.g. Type 2 DM and CVD in which the dyslipidemia is the main characteristic feature, and this agreed with Iraqi clinical study⁽²³⁾.

Elevated serum triglyceride level is a common dyslipidemic feature that accompanies Type 2 DM and pre-diabetic states⁽²⁴⁾, a picture which can be seen better with the postprandial TG than the fasting TG⁽²⁵⁾. This point clarifies the reason for using the postprandial TG in many of the recent reports on DM or CVD^(23,26-28). Elevated levels of postprandial TG indicate the presence of increased levels of remnants from chylomicrons and very LDL-c. The cholesterol-containing, triglyceride-rich lipoproteins penetrate the arterial endothelium and may get trapped within the sub-endothelial space, potentially leading to the development of atherosclerosis⁽²⁹⁾.

The rise of this predictor pp TG of atherosclerosis risk associates the decline in serum testosterone level in the present diabetics and their control which implies the importance of both factors in this respect and necessitates their improvement to decrease the risk of atherosclerosis and CVD.

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