BOSTON HEART DIAGNOSTICS Oxidized Phospholipids-ApoB

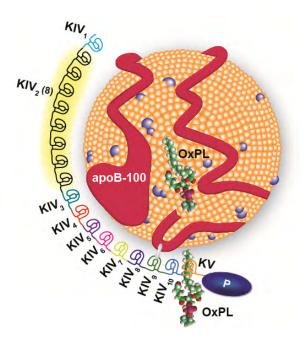
Boston Heart Diagnostics is proud to be the first reference laboratory to offer **Oxidized Phospholipids (OxPL-apoB).**

Oxidized phospholipids are found on all apoB-containing lipoproteins, including LDL, VLDL, and especially on Lp(a) $^{(8,9)}$.

OXIDIZED PHOSPHOLIPIDS ARE HIGHLY PRO-INFLAMMATORY AND CONTRIBUTE TO MANY DISEASES OF AGING

When taken up by the artery wall, oxidized lipoproteins accelerate atherosclerosis, and increase the risk of myocardial infarctions, strokes, and calcific aortic valve stenosis ⁽¹⁻⁹⁾.

Clinicians can use OxPL-apoB levels to reclassify patients into higher or lower risk categories allowing better personalized care.





ABOUT OxPL-apoB

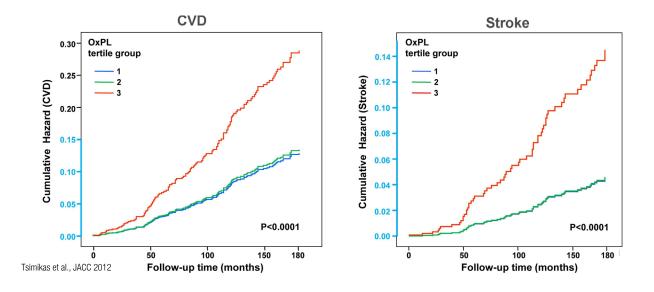
- 1. OxPL-apoB measurement is superior to oxidized LDL (ox-LDL) in CVD risk prediction and its clinical utility has been demonstrated in 42 clinical studies involving more than 80,000 patients ⁽¹⁻⁷⁾
- 2. Advantages of OxPL-apoB over ox-LDL are that OxPL-apoB measures oxidized phospholipids on ALL apo B-containing particles, and does not correlate with serum apoB levels.^(8,9)
- **3. Two- to three-fold increased CVD risk** is seen in individuals with an OxPL-apoB in the increased risk category as compared to those with values below this threshold ⁽¹⁻⁷⁾.
- 4. If OxPL-apoB levels are high, consider maximal preventative therapies, including optimal lipid management, blood pressure and diabetes control, cessation of smoking and weight loss if appropriate.



Lp(a): The primary carrier of oxidized phospholipids

OxPL-apoB CUMULATIVE HAZARD CURVES FOR CVD AND STROKE

Cumulative hazard curves for CVD incidence and stroke incidence by OxPL tertile groups. There were 138 cases of incident CVD and 60 cases of incident stroke in 765 patients followed for 15 years (1995-2010). From Tsimikas et al. JACC 2012.



ORDERING, REPORTING, AND SAMPLE INFORMATION

Ordering Information

• The order code is: 635

Report and Reference Ranges

- OxPL-apoB will be reported in the Inflammation and Oxidation section of the lab report
- The reference ranges below will be reported.

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Optimal	Borderline	Increased Risk
< 2.0	2.0 -3.0	> 3.0 nmol/L

Specimen Requirements

• Serum collected in a serum separator tube (SST/Tiger top)

References

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