

年轻人群中 LCN2 与肥胖的相关性研究

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【摘要】目的:为了探讨年轻人群中脂质谱在蛋白2(LCN2)与肥胖的相关性。方法:选择2019年6月至9月间接受健康体检的25-45岁的人群为研究对象,分析LCN2与肥胖的相关性。结果:1)随着BMI水平的增加而年龄、收缩压(SBP)、舒张压(DBP)、空腹血糖(FBG)、总胆固醇(TC)、甘油三酯(TG)、低密度脂蛋白(LDL)、尿酸(SUA)、肌酐(Cre)、谷草转氨酶(AST)、谷丙转氨酶(ALT)、谷氨酰基转移酶(GGT)、LCN2水平及男性所占比值、吸烟率和饮酒率也增加,而高密度脂蛋白(HDL)水平降低($P<0.05$);2)未调整LCN2与BMI呈正相关,调整年龄、性别、吸烟、饮酒、血糖、血压、血脂、肾功、肝功等指标后LCN2与BMI仍呈正相关;3)未调整时高LCN2组肥胖的患病危险是对照组的2.055倍(95%CI: 1.438-2.937),调整年龄、性别、吸烟、饮酒、FBG、SBP、DBP、TC、TG、LDL、HD、UA、BUN、Cre、AST、ALT、GGT因素后高LCN2组肥胖的患病危险是对照组的1.944倍(95%CI: 1.190-3.177)。结论:年轻人群中LCN2与BMI相关,且高LCN2是肥胖的影响因素。

【关键词】 青年人群; 脂质运载蛋白2; 肥胖

A Study on the Correlation between LCN2 and Obesity in Young People

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[Abstract] Objective: To investigate the association between LCN2 and obesity in young adults. Methods: 25 - 45 - year - olds who had health exams from June to September 2019 were selected to analyze the association. Results: 1) As BMI increased, age, SBP, DBP, FBG, TC, TG, LDL, SUA, Cre, AST, ALT, GGT, LCN2 levels, male proportion, smoking and alcohol consumption rates rose, while HDL levels fell ($P<0.05$). 2) LCN2 was positively correlated with BMI in the unadjusted model, and the correlation remained significant after adjusting for multiple indicators. 3) Without adjustments, the obesity risk in the high LCN2 group was 2.055 times that of the control group (95% CI: 1.438 - 2.937). After adjustment, it was 1.944 times (95% CI: 1.190 - 3.177). Conclusion: Among young people, LCN2 is associated with BMI, and high LCN2 is a factor influencing obesity.

[Key words] young people; lipocalin - 2; Obesity

随着生活水平和生活方式改变,超重及肥胖患病率稳步增长。2021年全球超重及肥胖人数21.11亿,中国25岁以上成年超重和肥胖人数4.02亿,2050年将达6.27亿。肥胖是全球严重健康问题,是多种疾病重要危险因素,与生活质量、寿命和医疗费用相关。脂质运载蛋白2(LCN2)是脂肪细胞因子,多项研究显示肥胖组LCN2高于对照组,与肥胖等呈正相关,但也有报道称其与BMI无相关。年轻人群肥胖状况影响慢性疾病患病风险及晚年全因死亡率,目前有关LCN2和肥胖研究多围绕儿童与动物模型,针对年轻人研究

少见。因此本研究探讨年轻人群血清LCN2水平与肥胖相关性,为早期检测和干预年轻人肥胖提供帮助。

1 资料与方法

1.1 一般资料

选取2019年6-9月20-45岁1090名接受健康体检者为研究对象,按《中国超重和肥胖症预防控制指南(2003)》标准分类肥胖程度。

1.2 方法

受检者清晨空腹体格检查, 计算 BMI; 禁食 8 小时后采静脉血, 部分测多项指标, 另一部分血清冷冻保存后用酶联免疫法测 LCN2。

1.3 统计学方法

用 SPSS26.0 统计软件分析数据。

2 结果

2.1 不同 BMI 水平间各项指标趋势见相关表格。

见表 1。

	正常 (n=491)	超重 (n=394)	肥胖 (n=205)	P	P 趋势
年龄	35.02 ± 5.90	36.43 ± 5.68	35.82 ± 5.71	0.002	0.097
男 (%)	184 (37.5)	271 (68.8)	166 (82.4)	<0.001	<0.001
SBP	113.13 ± 14.55	120.13 ± 13.55	131.99 ± 17.46	<0.001	<0.001
DBP	71.63 ± 10.58	76.45 ± 11.20	84.20 ± 13.83	<0.001	<0.001
FBG	5.32 ± 1.24	5.56 ± 1.39	5.84 ± 1.51	<0.001	<0.001
TC	4.69 ± 0.85	4.87 ± 0.90	5.08 ± 1.12	<0.001	<0.001
TG	0.32 ± 0.12	0.42 ± 0.17	0.49 ± 0.18	<0.001	<0.001
LDL	2.50 ± 0.62	2.69 ± 0.65	2.89 ± 0.76	<0.001	<0.001
HDL	1.53 ± 0.36	1.30 ± 0.32	1.20 ± 0.29	<0.001	<0.001
SUA	337.06 ± 101.65	405.95 ± 111.39	458.36 ± 102.76	<0.001	<0.001
BUN	5.61 ± 1.23	5.91 ± 1.39	5.90 ± 1.35	0.001	0.008
Cre	68.00 ± 15.64	75.22 ± 15.12	78.49 ± 15.47	<0.001	<0.001
AST	1.24 ± 0.13	1.30 ± 0.15	1.36 ± 0.16	<0.001	<0.001
ALT	1.22 ± 0.22	1.39 ± 0.25	1.51 ± 0.26	<0.001	<0.001
GGT	1.38 ± 0.29	1.59 ± 0.31	1.73 ± 0.31	<0.001	<0.001
LCN2	3.52 ± 0.37	3.58 ± 0.37	3.61 ± 0.35	0.007	0.006
吸烟 (%)	111 (22.6)	140 (35.5)	93 (45.4)	<0.001	<0.001
饮酒 (%)	106 (21.6)	147 (37.3)	101 (49.3)	<0.001	<0.001

2.2 不同模型 LCN2 对 BMI 影响的多元线性回归见相关表格。

见表 2。

	B	SE	Beta	t	P
模型 1	1.066	0.308	0.104	3.463	0.001
模型 2	0.824	0.287	0.081	2.871	0.004
模型 3	0.684	0.253	0.067	2.700	0.007
模型 4	0.599	0.252	0.059	2.381	0.017

2.3 不同模型高 LCN2 对肥胖患病危险见相关表格。

见表 3。

	B	SE	Wald	P	OR	95%CI
模型 1	0.720	0.182	15.650	<0.001	2.055	1.438–2.937
模型 2	0.600	0.200	9.039	0.003	1.823	1.232–2.695
模型 3	0.701	0.241	8.480	0.004	2.015	1.257–3.230
模型 4	0.665	0.251	7.039	0.008	1.944	1.190–3.177

3 讨论

中国肥胖率迅速上升, 肥胖与多种疾病密切相关。多项

研究表明 LCN2 与体重等密切相关, 本研究结果显示 LCN2 水平随 BMI 增加而增加, 高 LCN2 组肥胖患病危险是对照组 2.055 倍。LCN2 引起肥胖机制不明, 可能是增加饱和脂肪酸摄入、胰岛素促进 LCN2 水平升高间接影响糖代谢。总之,

LCN2 与肥胖及相关代谢异常密切相关, 对肥胖诊断有一定价值, 但预测肥胖灵敏度和特异度较低, 因横断面研究局限, 无法明晰 LCN2 与肥胖因果关系, 需进一步探索。

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- 国家自然科学基金资助项目 (81660562), 吉林省教育厅资助项目 (JJKH20210585KJ)。