# Study on effect of cigarette smoking on haemoglobin and blood lipid profile in males in Brack Alshati, Libya

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**Abstract: Introduction:**Smoking in different forms is considered as a chief hazard factor for atherosclerosis, coronary heart sickness and peripheral vascular disorders' **Aim:** the aim of this study was to evaluate the effect of cigarette smoking on lipid profiles and haemoglobin levels in adult males smokers compared with non-smokers .**Material and methods**: this study was performed on sixty subjects from which thirty were smokers and thirty non smokers they were used as (controls). Mean serum lipid profiles and haemoglobin levels were measured in smokers and non- smokers .**Results:** the level of haemoglobin for the smoker was significantly decreased compared with that of non-smokers(p<0.05) ), whereas the CHOL, LDL, HDL levels for the smoker were significantly deferent (p>0.05) compared with the controls (p<0.05), and TG was not significantly deferent (p>0.05) compared with the control. **Conclusion:** there were effect of cigarette smoking on haemoglobin and serum lipids (CHOL, LDL, HDL) ,and there was no effect of cigarette smoking on the TG level on smokers.

Keywords: Cigarette, smoking, lipid, profile, TG, LDL, HDL, haemoglobin.

#### Introduction

Smoking in different formulas is considered as a chief hazard factor for atherosclerosis, coronary heart sickness and peripheral vascular disorders[1-3]. Apart from active smokers, passive-smokers are also prone for the development of smoking related disorders [2]. Cigarette smoking is approved as one of the leading causes of preventable morbidity and mortality, and one of the largest preventable causes of ill health in the world. Cigarette smoking is said to be responsible for 17%-30% of all deaths from cardiovascular diseases. Cigarette smoking is generally considered as associated with increased risk of a variety of medical disorders. Several studies provide the evidence that tobacco is strongly associated with altering the normal status of the lipid profile [4-6]. In spite of all that information, there is still much controversy about which part or parts in the lipid profile are mainly altered in

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response to cigarette smoking, and whether those lipid profile components influence other parts directly or indirectly and vice versa [7]. Smoking was a major risk factor for atherosclerotic cerebro- and cardiovascular diseases (CVD) through leading to dyslipidemia. Dyslipidemia was the presence of abnormal levels of lipids in the blood, characterized by an elevation of the concentration of total cholesterol (TC), low-density lipoprotein (LDL), and triglycerides (TG), and a decrease in high density lipoprotein cholesterol (HDL) [8-9]. A comprehensive analysis, examined published data from 1966 to 1987 and estimated the excess risk posed by smoking on CVD, with particular emphasis on lipid and lipoprotein involvement, the results of the analysis indicated that compared with non-smokers, cigarettes smokers had significantly higher TC (3%), TG (9.1%), and LDL (10.4%), higher (but not significant LDL (1.7%), and lower concentrations of HDL (-5.7%) [8]. Many physiologic benefits were associated with smoking cessation, including normalization of the lipid and lipoprotein profile. A meta-analysis. suggested that with smoking cessation an individual could experience an increase in HDL, but other lipid and lipoproteins (TC, LDL, and TG) remained unchanged, Movement toward normalization of HDL could be seen in as little as 17 days and would continue to progress toward normal (non-smoking) levels as long as cessation continues[10]. the Aim of this study was to evaluate the effect of cigarette smoking on lipid profiles and haemoglobin levels in adult male smokers compared with that of non-smokers.

### **Materials and Methods**

The present work comprised two groups of subjects. These subjects (cigarette smokers and non-smokers) were resident in Al-Shati region ,the first Groups include 30 smokers and the second groups include 30 non-smokers male subjects. their Age range was (18-60) year . The rang of cigarettes smoking by those smokers were from 10 to 20 cigarettes/ day ,patients who suffering from diseases during the study period were excluded. Diabetics, hypertensive and those with history of angina also were not included in the study. This study was performed in the period extended from April to October 2016.

Blood samples were collected from all contributors, the sample was divided into two container, one without anticoagulant and the other with anticoagulant. Serum was separated from the blood samples, by centrifugation of the blood samples at 3000 round per minute for 10 minutes and the serum samples were kept at -20 OC until used. The analysis of lipid

profile (CHOL,TG,LDL,HDL) were performed by using spectrophotometer (model 1990) manufactured by great Britain and the haemoglobin analysis was performed according to the standard methods as in the sheet enclosed with the kit [11]. Minitab and excel programs version 11 were used for statistical analysis and graphic presentation. The paired t–test and ANOVA were used to compare between the patients and control, p<0.05 were considered as significant .serum haemoglobin in both smokers and non-smokers, the level of haemoglobin for the smoker was significantly decreased when compared with that of non-smokers(p<0.05).

## Results

Table 1 : Table 1: Showing lipid profile and haemoglobin levels (Mean  $\pm$  SD) in smokers in comparison to non-smokers Table 1 and fig.1,2 shows the mean  $\pm$  SD levels of serum haemoglobin in both smokers and non-smokers, the level of haemoglobin for the smoker was significantly decreased when compared with that of non-smokers(p<0.05). The TG levels for both smokers and non-smokers were within normal range and were not significantly deferent (p>0.05), whereas the CHOL levels significantly deferent (p<0.05). The levels of HDL and LDL were both significantly deferent (p<0.05), the LDL were significantly higher while mean level of serum HDL were significantly lower in cases when compared with controls.

Non-smokers	smokers	P.value
n(30)	n(30)	
Mean±SD	Mean±SD	
15.37±0.64	12.82±2.71	0.000
123.50±58.42	108.67±67.47	0.369
134.83±34.26	174.63±66.41	0.011
36.79±6.55	23.26±9.76	0.000
71.44±37.00	131.98±62.34	0.000
	Non-smokers n(30) Mean±SD 15.37±0.64 123.50±58.42 134.83±34.26 36.79±6.55 71.44±37.00	Non-smokerssmokers $n(30)$ $n(30)$ Mean $\pm$ SDMean $\pm$ SD $15.37\pm0.64$ $12.82\pm2.71$ $123.50\pm58.42$ $108.67\pm67.47$ $134.83\pm34.26$ $174.63\pm66.41$ $36.79\pm6.55$ $23.26\pm9.76$ $71.44\pm37.00$ $131.98\pm62.34$

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comparison to non-smokers	



Figure 1:Lipids profile in smokers and non-smokers healthy males



Figure 2:Heamoglobin in smokers and non-smokers healthy males

## Discussion

Tobacco smoking has been associated to cause several major morphological and biochemical problems in individuals. Tobacco cigarette smoking is one of the main important causes of death and crucial public health challenge in world over [12, 13,14]. Smoking has both acute and chronic impact on haematological parameters. There are more than 4000 chemicals found in cigarette smoke [15], and a cigarette smoker is exposed to a

number of harmful compounds including nicotine, free radicals, carbon monoxide and other gaseous products[16]. In this study the haemoglobin levels were significantly deferent whereas, the level of haemoglobin decreased as compared with that of control, in spite of that the result was within the normal range, this result was disagree with that of Nadia, et al., [17], were the haemoglobin significantly higher in cigarette smokers than that of non-smokers. In this study there was not significant change in TG in smokers and non-smokers. However other authors reported, Khurana et al[18]. and Rao and Subash[18], observed a rise in the level of TG. The CHOL in smokers was significant increased compared with that of nonsmokers, this finding was consistent with that of Khurana et al[19]. and Rao and Subash[19] who observe a rise in the levels of total cholesterol. The level of HDL in smokers was significantly decreased compared with that of non-smokers, this finding was in agreement with that of Amit, et al., [20]. The level of LDL were increased in smokers as compared with that of non-smokers, this result was in accordance with that of Amit, et al., [20]. The conclusion: there were effect of cigarette smoking on haemoglobin and serum lipids ( CHOL, LDL, HDL), and there was no effect of cigarette smoking on the TG level on smokers, the effect of cigarette smoking on metabolism of HDL and LDL, may be of great value for predication of cardiovascular risk for a wide range of cholesterol concentrations.

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