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Trends in Apolipoprotein B, Non-high-density Lipoprotein Cholesterol, and Low-density Lipoprotein Cholesterol for Adults Aged 20 and Over, 2005–2016

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Abstract

Objectives—Guidelines for lowering cholesterol have focused on total and lowdensity lipoprotein cholesterol (LDL–C). Although the emphasis remains on LDL–C, more attention is now being given to apolipoprotein B (apo B) and non-high-density lipoprotein cholesterol (non-HDL–C). This report presents trends in mean apo B, non-HDL–C, and LDL–C in adults aged 20 and over from 2005–2006 through 2015–2016.

Methods—Data from the 2005–2016 National Health and Nutrition Examination Surveys were used to conduct trend analyses. Means and standard errors of the mean for apo B (n = 13,802), non-HDL–C (n = 30,921), and LDL–C (n = 13,559) are presented overall and by sex, stratified by age, race and Hispanic origin, and body mass index (BMI) category for each 2-year survey cycle. Trends over time were tested using orthogonal contrast matrices and piecewise and multiple linear regression.

Results—In men, apo B declined from 98 mg/dL in 2005–2006 to 93 mg/dL in 2011–2012, but did not change after 2011–2012. Declining trends were also seen for men in non-HDL–C (147 to 141 mg/dL) and LDL–C (116 to 114 mg/dL) from 2005–2006 to 2015–2016. For women, age-adjusted mean apo B declined from 94 mg/dL in 2005–2006 to 91 mg/dL in 2015–2016. Non-HDL–C and LDL–C in women did not change significantly from 2005–2006 to 2011–2012, but non-HDL–C declined from 141 mg/dL in 2011–2012 to 133 mg/dL in 2015–2016, and LDL–C declined from 117 mg/dL in 2011–2012 to 111 mg/dL in 2015–2016. With the exception of LDL–C in men, these trends persisted after controlling for age, race and Hispanic origin, BMI, and lipid-lowering medication use.

Conclusions—From 2005–2006 to 2015–2016, significant but different declining trends in apo B, non-HDL–C, and LDL–C were seen in men and women. In general, differences in age, race and Hispanic origin, BMI category, and lipid-lowering medication use did not explain the trends.

Keywords: lipids • atherosclerotic cardiovascular disease (ASCVD) • body mass index • lipid-lowering medications • National Health and Nutrition Examination Survey (NHANES)

Introduction

Total cholesterol (TC) and lowdensity lipoprotein cholesterol (LDL-C) are known to be related to atherosclerotic cardiovascular disease (ASCVD) (1). National Cholesterol Education Program guidelines for lowering cholesterol (Adult Treatment Panel I [ATP I], ATP II, and ATP III) (2-4) emphasized the measurement and reduction goals for lowering LDL-C, the dominant form of atherogenic cholesterol (1) (i.e., molecules that carry cholesterol to the bloodstream having a tendency to accumulate in blood vessels and block circulation, causing ASCVD). Although the American College of Cardiology and American Heart Association, in their 2018 report, "Guideline on the Management of Blood Cholesterol" (1), have continued to focus on the measurement and reduction of LDL-C, considerable discussion on the value of other lipid and lipoprotein measures is ongoing. In particular, apolipoprotein B (apo B), the main lipoprotein embedded in LDL-C, and non-high-density lipoprotein cholesterol (non-HDL-C), which is more atherogenic than LDL-C, have been proposed as better measures of the atherosclerotic burden of lipids as well as risk prediction (5-12).



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Because of this increasing interest in the measurement and control of other lipids and lipoproteins, secular trends in apo B, non-HDL–C, and LDL–C are analyzed for adults aged 20 and over using data from the National Health and Nutrition Examination Surveys (NHANES) for 2005–2006, 2007–2008, 2009–2010, 2011–2012, 2013–2014, and 2015–2016. The starting point of 2005–2006 was chosen because it is the first NHANES cycle to measure apo B.

Methods

NHANES, conducted by the National Center for Health Statistics (NCHS), comprises cross-sectional surveys representative of the U.S. civilian noninstitutionalized population. Beginning in 1999, NHANES became a continuous survey, and data have been released in 2-year cycles (13).

Results presented in this report are based on data from NHANES 2005–2006, 2007–2008, 2009–2010, 2011–2012, 2013–2014, and 2015–2016. The sample design for each 2-year cycle constitutes a highly stratified, multistage, area probability sample (14–16). The survey was approved by the NCHS Research Ethics Review Board, and written informed consent was obtained from adult participants.

NHANES includes a home interview and a health examination at a mobile examination center (MEC). Participants in the examination component were randomly assigned to a morning session (and asked to fast at least 9 hours prior to examination) or an afternoon or evening session. Each examined participant was eligible for TC and high-density lipoprotein cholesterol (HDL-C) tests; only participants examined in the morning were eligible for apo B and triglyceride tests. Examination response rates for adults aged 20 and over were 71.0% in 2005-2006, 70.6% in 2007–2008, 72.2% in 2009–2010, 64.5% in 2011-2012, 63.7% in 2013-2014, and 58.1% in 2015–2016.

Laboratory methods

At the MECs, venous blood samples were collected from NHANES study participants and processed using a

standardized protocol. After processing, serum samples were stored frozen at -30°C until they were shipped on dry ice to the contracted laboratory for analysis (17). Across survey periods, several changes have occurred in laboratories, methods, and analyzers used to measure lipid and lipoprotein concentrations. Apo B was measured using a nephelometric immunoassay on the Dade Behring BN100 Nephelometer in 2005–2006 (18), and on the Siemens BN ProSpec Nephelometer for 2007–2014 (Siemens acquired Dade Behring in 2007) (19). A comparison study revealed apo B values using the BN100 analyzer were 8% higher on average compared with the Siemens BN ProSpec analyzer. Apo B values for 2005–2006 were matched to 2007-2014 apo B values using a forward Deming regression correction (20). In 2015–2016, a new analyzer, the Roche Cobas 6000 Chemistry Analyzer (21), was used to measure apo B by turbidimetric assay. A comparison study revealed apo B values from the Roche Cobas 6000 analyzer were 3.7% higher than values from the Siemens BN ProSpec nephelometer. Apo B values from 2005-2014 were matched to 2015-2016 apo B values using a forward Deming regression correction (22).

For 2005–2016, TC and triglyceride were measured using coupled enzymatic reactions, and HDL-C was measured using a two-step colorimetric endpoint reaction method (23). The methods and analyzers used during the 2005-2016 survey cycles of NHANES are described in the laboratory method files available from the NHANES website (24). HDL-C values in 2005-2006, in contrast with values for 2007-2016, were on average 3% higher, most likely due to changes in instrumentation (25). LDL-C was calculated by the Friedewald equation (LDL-C = TC - TC)HDL–C – triglyceride / 5, valid only for adult participants with triglyceride results at or below 400 mg/dL examined in the morning session and having fasted 81/2 to less than 24 hours prior to venipuncture) (26). Non-HDL-C was calculated by subtracting HDL-C from TC (non-HDL–C = TC – HDL–C). The 2005–2006 cycle (3% higher on average than HDL-C values in the 2007-2016 survey cycles) resulted in estimates for

non-HDL-C and LDL-C approximately 1-2 mg/dL lower for 2005-2006 only, thus having a negligible effect on overall trends. Despite changes in laboratory methods during several survey years, standardization of serum lipid measurements, following the Centers for Disease Control and Prevention's (CDC) lipid standardization program criteria (27), ensured accuracy and comparability of measurements across studies. Intralaboratory quality control and proficiency testing performed by the laboratories met the CDC program's acceptable performance of allowable bias and imprecision.

Definition of covariates

Covariates known or demonstrated to be associated with apo B, non-HDL-C, and LDL-C included age group, race and Hispanic origin, body mass index (BMI), and use of lipid-lowering medications (28). Age reported during the NHANES screener was grouped into three categories: 20-39, 40-59, and 60 and over. Participants self-reported their race and Hispanic origin after being shown a list including an open-ended response. Race and Hispanic origin was categorized as non-Hispanic white, non-Hispanic black, Mexican American, all Hispanic (beginning in 2007–2008), and non-Hispanic Asian (beginning in 2011–2012) (29). Persons who were categorized as other Hispanic prior to 2007–2008, non-Hispanic Asian prior to 2011–2012, or other race (which included multiracial) were included in the analysis of the entire population but are not shown separately.

Use of lipid-lowering medications was assessed during the in-home interview using the question, "Are you currently taking medication to lower your blood cholesterol?" (28). Although specific medication information is collected in NHANES, this analysis used the self-reported question on use of lipidlowering medications only.

Height and weight were measured using a standardized protocol (30) at the MEC. BMI was calculated as measured weight in kilograms divided by measured height in meters squared rounded to the nearest tenth. BMI categories were defined as normal (BMI of at least 18.5 but less than 25.0), overweight (BMI of at least 25.0 but less than 30.0), and obesity (BMI of at least 30.0) (31).

Statistical methods

Mean apo B, non-HDL-C, and LDL-C are presented across the NHANES 2-year survey cycles for the period from 2005 through 2016 for all adults aged 20 and over and by sex overall (Figures 1-3), and stratified by age, race and Hispanic origin, and BMI subgroups (Tables 1–3). Normality was assessed by plotting the distribution of each variable against that of a normally distributed random variable and comparing their skewness and kurtosis. No substantial departures from normality were seen. All estimated means are accompanied by standard errors. Means for adults aged 20 and over (including by race and Hispanic origin and BMI category) were age adjusted to the projected U.S. Census 2000 population by the direct method using age groups 20-39, 40-59, and 60 and over (32).

Because of the small number of adults aged 20–39 and 40–59 who were on lipid-lowering medications, and the disproportionate number of adults aged 60 and over on lipidlowering medications, means of the three lipid analytes are not presented by sex stratified by use of lipid-lowering medications. Mean apo B, non-HDL–C, and LDL–C for adults aged 60 and over from 2005–2006 to 2013–2014, by sex and use of lipid-lowering medications, are presented elsewhere (33).

Linear and quadratic trends in mean apo B, non-HDL-C, and LDL-C were tested overall and for each sex, age, race and Hispanic origin, and BMI subgroup using orthogonal contrast matrices (34). A significant quadratic trend implied the existence of a survey period where a change in direction or magnitude of the slope occurred (i.e., inflection point), located through the JoinPoint software package (35). For survey periods with an identified inflection point, hypotheses of nonzero slopes from 2005-2006 to the inflection point, a nonzero slope after the inflection point to 2015–2016, and the difference between the two slopes were tested through piecewise linear regression (36). Sex-specific models were constructed by adjusting for the possible confounding effects of lipidlowering medications in addition to age group, race and Hispanic origin, and BMI categories. Adjusted trends were tested using multiple linear regression, treating the survey cycle as a continuous variable.

Statistical hypotheses were tested at the $\alpha = 0.05$ level using a two-sided *t* statistic for univariate linear and quadratic trends, and the Satterthwaite adjusted *F* statistic (37) for piecewise and multiple linear regression.

Sample weights accounting for unequal selection probabilities, adjusting for nonresponse, and calibrating to U.S. Census Bureau population totals were used to estimate all statistics.



Figure 1. Mean apolipoprotein B among men and women aged 20 and over, by survey cycle: United States, 2005–2016

Examination sample weights were used for non-HDL–C, while morning fasting sample weights were used for apo B and LDL–C. Stratification and clustering, in addition to weighting, were incorporated in estimating standard errors through Taylor series linearization (38) and in testing statistical hypotheses.

All statistical analyses were performed using SAS version 9.4 (SAS Institute, Inc., Cary, N.C.) and SUDAAN version 11 (RTI International, Research Triangle Park, N.C.).

Sample sizes

Of the 49,653 adults aged 20 and over in the NHANES 2005–2016 sample, 34,180 (68.8%) were interviewed, and 32,920 (66.3%) were interviewed and examined. Of those 32,920 adults, 30,921 (93.9%) had calculated values for non-HDL–C. Of these 30,921 adults, 387 (1.2%) had missing values for BMI, and 623 (2.0%) had missing data for use of lipid-lowering medications.

Of the 32,920 interviewed and examined adults aged 20 and over, 14,301 were assigned to the morning session and fasted at least 81/2 hours but less than 24 hours prior to venipuncture; of the 14,301 adults in the fasting sample, 13,802 (96.5%) had measured apo B, and 13,559 (94.8%) had calculated LDL-C. Of the adults with measured apo B, 160 (1.2%) had missing values for BMI, and 255 (1.8%) had missing data for use of lipid-lowering medications. Of the 13,559 adults aged 20 and over with calculated values for LDL-C, 158 (1.2%) had missing BMI, and 251 (1.9%) had missing values for use of lipid-lowering medications.

The unweighted sample sizes for apo B, non-HDL–C, and LDL–C are presented in Tables I–III by sex, stratified by age group, race and Hispanic origin, and BMI category for adults aged 20 and over.

Results

Apo B

Means and standard errors of the mean apo B for adults aged 20 and over are presented in Table 1. In 2015–2016,

the age-adjusted mean apo B for adults aged 20 and over was 93 mg/dL overall, down from 96 mg/dL in 2005–2006.

For men, the age-adjusted mean apo B declined from 98 mg/dL in 2005-2006 to 93 mg/dL in 2011–2012, and then did not change significantly (Figure 1). Similar trends were seen in mean apo B for men aged 20-39 and in the ageadjusted mean apo B for men in the overweight category. The mean apo B declined from 2005-2006 to 2009-2010 for men aged 60 and over and then remained level between 2009-2010 and 2015–2016. The age-adjusted mean apo B declined from 2005-2006 to 2015–2016 for non-Hispanic black men and men in the normal weight category. The observed declining trend in apo B seen in non-Hispanic white men did not reach statistical significance. No significant trends were seen for Hispanic, Mexican-American, or non-Hispanic Asian men, for men aged 40-59, or for men with obesity.

In 2015–2016, the age-adjusted mean apo B for women aged 20 and over was 91 mg/dL, down from 94 mg/dL in 2005–2006 (Figure 1). Similar trends were seen in mean apo B for women aged 20-39 and 60 and over, and in age-adjusted mean apo B for women with normal weight, for those with obesity, and for Mexican-American women. The age-adjusted mean apo B also declined among Hispanic women during 2007-2016. The observed declines among non-Hispanic white women and overweight women did not reach statistical significance. No significant trends in apo B were seen for women aged 40-59 or non-Hispanic black women during 2005-2016, or for non-Hispanic Asian women during 2011-2016.

Non-HDL-C

Means and standard errors of mean non-HDL–C for adults aged 20 and over are presented in Table 2. The age-adjusted mean non-HDL–C for adults aged 20 and over was 137 mg/dL during 2015–2016, down from 144 mg/dL during 2005–2006.

For men aged 20 and over, the ageadjusted mean non-HDL–C declined over this 12-year period to 141 mg/dL in 2015–2016, down from 147 mg/dL in 2005–2006 (Figure 2). Similar declining trends were seen for men in all age, race and Hispanic-origin, and BMI subgroups, except for non-Hispanic Asian men.

For women aged 20 and over, ageadjusted mean non-HDL-C declined after 2011-2012 to 133 mg/dL in 2015-2016, following no significant change from 2005–2006 to 2011–2012 (Figure 2). Similar trends were seen among women aged 40-59, non-Hispanic white and non-Hispanic black women, and women in the normal and overweight categories. For women aged 60 and over, mean non-HDL-C remained level from 2005–2006 to 2009–2010, then declined after 2009-2010 to 2015-2016. Declining trends over the entire 12-year period were seen in mean non-HDL-C for women aged 20-39, and in the age-adjusted mean for Mexican-American women and women with obesity. Similarly, a decline was seen among Hispanic women during 2007–2016. The observed declining trend in non-HDL-C seen in non-Hispanic Asian women during 2011–2016 did not reach statistical significance.

LDL-C

Means and standard errors of the mean LDL–C for adults aged 20 and over are presented in Table 3. During 2015–2016, the age-adjusted mean LDL–C for adults aged 20 and over was 113 mg/dL overall, down from 115 mg/dL in 2005–2006. Among men aged 20 and over, LDL-C declined from 116 mg/dL in 2005–2006 to 114 mg/dL in 2015–2016 (Figure 3). Declining trends were also seen in the mean LDL-C for men aged 60 and over, and in the age-adjusted mean LDL-C for men in both the normal weight and overweight categories. No significant trends were seen in the mean LDL-C for men aged 20-39 or 40-59, or in the age-adjusted mean LDL-C for men with obesity. The observed declines among Hispanic men during 2007-2018, and among Mexican-American and non-Hispanic black men during 2005-2018, did not reach statistical significance. No significant changes occurred among any other race or Hispanic-origin group.

The age-adjusted mean LDL-C for women aged 20 and over declined after 2011-2012 to 111 mg/dL in 2015-2016, following an observed increasing trend that did not reach statistical significance (Figure 3). A similar trend was seen in non-Hispanic black women-a declining trend after 2011–2012 to 2015–2016, following an observed increasing trend that was not statistically significant. The observed declining trend from 2005-2006 to 2015-2016 in the ageadjusted mean LDL-C seen in Mexican-American women did not reach statistical significance. However, the age-adjusted mean LDL-C declined significantly from 2007–2008 to 2015–2016 for Hispanic women. The mean LDL-C declined over the 12-year survey period in women aged 20-39. For women aged 60 and



SOURCE: NCHS. National Health and Nutrition Examination Surveys. 2005–2016.

Figure 2. Mean non-high-density lipoprotein cholesterol among men and women aged 20 and over, by survey cycle: United States, 2005–2016



Figure 3. Mean low-density lipoprotein cholesterol among men and women aged 20 and over, by survey cycle: United States, 2005–2016

over, an increasing trend was seen during 2005–2010 that did not reach statistical significance, followed by a decline after 2009–2010 to 2015–2016. Declines were observed in women with either normal weight or obesity. For women in the overweight category, the age-adjusted mean increased from 2005–2006 to 2011–2012, then decreased after 2011–2012 to 2015–2016.

Adjusted trends

Table 4 presents results of the sex-specific multiple linear regressions for apo B, non-HDL-C, and LDL-C by survey cycle in adults aged 20 and over, adjusting for the possible confounding effects of use of lipidlowering medications, age group, race and Hispanic origin, and BMI categories. The declining trends in apo B seen in women, and in non-HDL-C seen in men, from 2005-2006 to 2015-2016 persisted after controlling for these possible confounders. Based on these adjusted models, the estimated decline in apo B in women was nearly 4 mg/dL (equal to 5 x 0.81 mg/dL), and the estimated decline in non-HDL-C in men was more than 8 mg/dL (equal to 5 x 1.68 mg/dL).

The declining trend in apo B in men seen in the early period from 2005–2006 to 2011–2012, as well as the declining trends in non-HDL–C and in LDL–C seen in women in the later period from 2011–2012 to 2015–2016, also persisted after controlling for these covariates. Based on these adjusted models, estimated declines were found of approximately 5 mg/dL (equal to 3 x 1.71 mg/dL) in apo B for men over the early survey period, and approximately 9 mg/dL (equal to 2 x 4.54 mg/dL) in non-HDL–C and nearly 7 mg/dL (equal to 2 x 3.30 mg/dL) in LDL–C for women over the later survey period.

The estimated decline based on the adjusted model of nearly 3 mg/dL (equal to 5 x 0.56) seen in LDL–C for men was not statistically significant (p = 0.087).

Discussion

From 2005–2006 to 2015–2016, significant but different patterns of declining trends in the three lipid analytes were seen in men and women aged 20 and over. Age-adjusted mean non-HDL-C and LDL-C declined for men over this 12-year survey period, whereas declines in age-adjusted mean non-HDL-C and LDL-C occurred in the later part of the period among women. The age-adjusted mean apo B declined over the entire time period among women aged 20 and over. In contrast, mean apo B for men declined from 2005-2006 to 2011–2012 and then leveled off after 2011–2012 to 2015–2016. With the exception of LDL-C for men, these trends persisted after controlling for the possible confounding effects of age group, race and Hispanic origin, BMI category, and the use of lipid-lowering

medications. Declining trends in apo B, non-HDL–C, and LDL–C were seen in men with normal weight, in women aged 20–39 and women with obesity during 2005–2016, and in Hispanic women during 2007–2016. For non-Hispanic black men and Mexican-American women, significant declining trends were seen in apo B and non-HDL–C, whereas observed declining trends in LDL–C did not reach statistical significance.

Observed declining trends that did not reach statistical significance were also seen in apo B for non-Hispanic white men, non-Hispanic white women, and overweight women, as well as in LDL–C for Mexican-American and Hispanic men for 2007–2016. The sample sizes for apo B and LDL–C for these subgroups may be too small to detect a trend when a trend does, indeed, exist.

Ford, Li, and Sniderman examined changes in lipids, including apo B in U.S. adults with diagnosed diabetes, undiagnosed diabetes, prediabetes, and normoglycemia, from 1988–1991 to 2005-2008 (39). Bachorik et al. presented distributions of apo B for children and adults in the United States during 1988-1991 (40), and Carroll et al. assessed trends in apo B, non-HDL-C, and LDL-C in adults aged 60 and over during 2005–2014 by sex and use of lipid-lowering medications (33). Perak et al. presented trends in lipids of children and youth aged 6-19 years during 1999–2016 (41). Vega and Grundy present trends in non-HDL-C and LDL-C for adults with atherosclerotic cardiovascular disease (42). To the authors' knowledge, this report is the first to present data on trends in apo B in the U.S. population aged 20 and over in more recent years.

The declines in apo B, non-HDL–C, and LDL–C seen in women, and the declines in apo B and non-HDL–C seen in men, cannot be explained by the use of lipid-lowering medications, age, race and Hispanic origin, or BMI. The decreasing trends in TC from 2005–2006 to 2015–2016 most likely contributed to the declining trends in non-HDL–C. Other factors that affect lipids include diet such as trans-fatty acid consumption (43,44), physical activity, and weight loss. In 2006, the U.S. Food and Drug Administration required that trans-fatty

acid content be declared on the nutrition label of foods and dietary supplements. Consequently, trans-fatty acids were banned in a number of places, such as California in 2008 and New York City in 2006. By 2010, studies showed that many manufacturers reduced or removed transfatty acids (45,46), which may explain the declines in apo B, non-HDL-C, and LDL-C seen in adults aged 20 and over of both sexes. Individual behavior changes related to physical activity are unlikely to have contributed substantially to these declining trends. In 2017, 41.8% of men met the Healthy People 2020 physical activity recommendation (to engage in aerobic physical activity of at least moderate intensity for more than 300 minutes per week, or of vigorous intensity for more than 150 minutes per week, or an equivalent combination), up from 38.7% in 2012. Among women, 32.5% met the recommendations in 2017 compared with 30.2% in 2012 (47). In addition, the prevalence of obesity in adults continued to increase, from 34.5% in 2005–2006 to 39.6% in 2015–2016 (48). The percentage of adults on lipidlowering medications increased from 2005–2006 to 2015–2016 in both men and women aged 60 and over, but no changes were observed in adults aged 20-39 or 40-59 among either sex (49).

Strengths of this analysis include the use of standardized lipid measurements for adults in six national samples representative of the U.S. civilian noninstitutionalized population. However, observed trends in mean apo B and LDL-C for many subgroups based on small sample sizes (particularly for race and Hispanic origin and BMI categories) did not reach statistical significance due to lack of power (i.e., the ability to detect a trend when a trend exists). Another limitation is that the use of lipid-lowering medications is based on the report of any type, rather than on specific types, of lipid-lowering medications, and no information on the duration of use of lipid-lowering medications is available. Furthermore, the trends presented in this report are based on only six survey cycles spanning a relatively short period of time, and only three data points are available for non-Hispanic Asian adults. The calculation of LDL-C by the Friedewald equation rather than by

direct measurement may be an additional limitation. LDL calculated by the Friedewald equation has been shown to be unreliable for levels less than 70 mg/dL (1).

Declining trends from 2005–2006 to 2015–2016 were seen in apo B for women and in non-HDL–C for men after controlling for the use of lipid-lowering medications in addition to age, race and Hispanic origin, and BMI categories. Declining trends from 2005–2006 to 2011–2012 were seen in apo B for men, and declining trends from 2011–2012 to 2015–2016 were seen in non-HDL–C and LDL–C for women. These trends may continue to be monitored with future NHANES surveys.

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Table 1. Mean apolipoprotein B among men and women aged 20 and over, by survey cycle, age group, race and Hispanic origin, and body mass index category: United States, 2005–2016

	Survey cycle												
-	2005	-2006	2007	7–2008	2009	9–2010	201	1–2012	201	3–2014	201	5–2016	
Sex, age, race and Hispanic origin, and BMI	Mean	Standard error	Mean	Standard error	Mean	Standard error	Mean	Standard error	Mean	Standard error	Mean	Standard error	p value for linear trend
Total, both sexes ^{1–3}	96	1.3	96	0.7	94	1.0	93	0.8	93	0.7	93	0.7	0.004
Men													
Aged 20 and over ¹⁻³	98	1.2	98	0.8	95	0.9	93	1.1	95	0.9	95	1.1	†
20–39	94	1.9	93	1.2	92	1.7	88	1.3	91	1.5	92	1.4	†
40–59	103	1.3	105	1.5	100	1.4	101	2.5	102	1.6	102	1.8	0.406
60 and over	98	1.6	93	1.9	91	1.2	89	1.5	90	1.7	89	2.5	‡
Race and Hispanic origin ^{1,3} : Non-Hispanic:													
White	97	1.2	97	1.0	93	1.3	93	1.6	94	1.1	95	1.5	0.061
Black	96	1.9	93	2.6	95	1.5	88	1.2	90	1.2	91	2.3	0.011
Asian							92	2.2	96	1.8	97	2.6	0.150
Hispanic⁴			102	1.3	101	0.9	100	1.1	101	2.4	100	1.2	0.289
Mexican American	104	1.9	103	1.7	102	1.7	100	1.4	103	3.1	100	1.6	0.168
BMI category ^{1,2} :													
Normal weight	92	1.2	93	1.2	89	1.8	89	1.4	85	1.6	88	2.4	0.005
Overweight	103	1.5	98	1.1	98	1.2	94	1.5	95	1.5	97	1.9	+
Obese	100	1.7	103	2.2	99	1.6	96	1.5	101	2.0	99	1.4	0.256
Women													
Aged 20 and over ¹⁻³	94	1.7	94	1.0	92	1.2	92	0.8	91	0.8	91	1.0	0.030
Age group (years) ^{2,3} :													
20–39	89	2.4	87	1.1	85	1.3	84	1.0	84	1.6	82	1.5	0.004
40–59	97	2.3	100	2.3	96	1.7	98	1.1	97	1.8	99	1.4	0.828
60 and over	98	1.5	98	1.2	99	1.8	97	1.2	94	1.4	95	1.3	0.017
Race and Hispanic origin ^{1,3} : Non-Hispanic:													
White	95	2.1	94	1.0	92	1.6	92	0.9	92	1.1	92	1.5	0.068
Black	89	1.5	93	1.9	93	1.4	91	1.9	85	2.4	90	1.6	0.132
Asian							88	2.2	88	2.3	89	1.5	0.600
Hispanic ^₄			96	1.4	94	1.5	93	2.0	93	1.5	91	1.1	0.008
Mexican American	95	2.0	97	1.3	95	1.9	92	2.1	92	2.2	91	1.5	0.011
BMI category ^{1,2} :													
Normal weight	87	1.8	89	0.8	85	1.2	85	1.4	83	1.3	85	2.2	0.045
Overweight	97	1.6	96	2.0	97	2.0	96	1.2	94	1.3	94	2.0	0.069
Obese	99	2.2	99	1.7	96	1.7	97	1.3	95	1.1	94	0.9	0.015

† Significant quadratic trend for 2005–2016. Mean apo B declined from 2005–2006 to 2011–2012 (p < 0.05) and remained level after 2011–2012 (p > 0.05). Slopes for line segments are significantly different (p < 0.05)

different (p < 0.05). ‡ Significant quadratic trend for 2005–2016. Mean apo B declined from 2005–2006 to 2009–2010 (p < 0.05) and remained level after 2009–2010 (p > 0.05). Slopes for line segments are significantly different (p < 0.05).

Data not available.
'Age adjusted to the projected U.S. Census 2000 population using age groups 20–39, 40–59, and 60 and over.

²Includes other races not shown separately.

³Includes underweight adults not shown separately. ⁴Includes Mexican-American adults.

NOTES: Apolipoprotein B (apo B) is measured in mg/dL. BMI is body mass index; underweight is BMI less than 18.5 (not shown separately), normal weight is BMI at or above 18.5 and below 25.0, overweight is BMI at or above 25.0 and below 30.0, and obese is BMI at or above 30.0.

Table 2. Mean non-high-density lipoprotein cholesterol among men and women aged 20 and over, by survey cycle, age group, race and Hispanic origin, and body mass index category: United States, 2005-2016

	Survey cycle												
-	2005	-2006	200	7–2008	200	9–2010	201	1–2012	2013	3–2014	2015	5–2016	-
Sex, age, race and Hispanic origin, and BMI	Mean	Standard error	Mean	Standard error	Mean	Standard error	Mean	Standard error	Mean	Standard error	Mean	Standard error	p value for linear trend
Total, both sexes ^{1–3}	144	0.9	145	0.7	143	0.8	142	0.9	136	0.7	137	1.1	Less than 0.001
Men													
Aged 20 and over ¹⁻³ Age group (years) ^{2,3} :	147	1.1	148	1.1	146	0.9	143	1.2	139	1.3	141	1.4	Less than 0.001
20–39	143	1.9	145	1.7	142	1.2	137	1.9	136	2.2	136	1.8	Less than 0.001
40–59	156	1.6	159	1.8	157	2.1	156	1.6	148	1.7	153	2.7	0.010
60 and over	139	1.4	134	1.6	136	1.9	132	1.5	128	2.4	128	2.8	Less than 0.001
Race and Hispanic origin ^{1,3} : Non-Hispanic:													
White	147	1.3	147	1.4	145	1.1	143	1.5	138	1.6	140	1.8	Less than 0.001
Black	136	1.8	139	2.0	137	2.1	133	2.2	130	1.8	130	2.6	0.001
Asian							141	2.5	142	2.8	141	2.8	0.988
Hispanic ^₄			155	1.7	153	1.2	149	2.2	147	2.5	147	1.8	Less than 0.001
Mexican American	157	2.2	157	2.6	153	2.0	151	2.9	146	3.1	149	2.6	0.001
BMI category ^{1,2}													
Normal weight.	133	1.6	139	1.8	132	1.8	134	1.6	124	1.6	126	2.2	Less than 0.001
Overweight	153	1.6	149	1.5	152	1.6	145	1.5	141	1.8	146	2.7	Less than 0.001
Obese	153	1.4	157	2.5	152	1.2	150	2.1	147	2.5	146	1.8	Less than 0.001
Womon													
Women													
Aged 20 and over ^{1–3} Age group (years) ^{2,3} :	141	1.1	142	1.0	139	1.2	141	0.8	134	0.8	133	1.2	Ť
20–39	132	2.2	130	1.9	127	1.5	128	1.1	124	2.1	120	1.8	Less than 0.001
40–59	147	1.9	150	2.2	147	1.9	151	1.4	142	1.5	143	1.5	†
60 and over	148	1.7	149	1.6	148	1.7	148	1.8	138	1.2	138	2.0	+
White	1/12	1 /	1/3	1 1	140	1 /	1/12	1.0	13/	0.0	133	13	+
Black	131	1.4	133	2.5	133	2.2	136	1.0	126	0.3	125	2.0	1
Asian	101	1.7	100	2.5	100	2.2	135	1.1	132	2.1	120	2.2	0 194
Hispanic ⁴			1//	17	1/1	1.5	1/2	1.0	130	13	135	1.0	Loss than 0.001
Mexican American	1//	2 1	144	2.1	1/2	1.5	130	2.2	137	23	135	1.2	Less than 0.001
BMI category ^{1,2}	144	2.1	144	2.1	142	1.5	100	2.2	107	2.0	100	1.0	2000 unan 0.001
Normal weight	131	13	131	15	131	14	133	23	121	14	121	17	+
	146	1.0	147	13	144	2.0	146	1.8	137	13	136	1.7	 +
Obese	150	21	149	1.0	146	2.0	146	1.0	142	13	140	1 9	Less than 0.001
	150	2.1	143	1.3	140	2.0	140	1.1	144	1.5	140	1.3	Less man 0.001

--- Data not available.

+ Significant quadratic trend for 2005–2016. Mean non-HDL–C remained level from 2005–2006 to 2011–2012 (p > 0.05) but declined after 2011–2012 (p < 0.05). Slopes for line segments are significantly different (p < 0.05). + Significant quadratic trend for 2005–2016. Mean non-HDL–C remained level from 2005–2006 to 2009–2010 (p > 0.05) but declined after 2009–2010 (p < 0.05). Slopes for line segments are significant quadratic trend for 2005–2016. Mean non-HDL–C remained level from 2005–2006 to 2009–2010 (p > 0.05) but declined after 2009–2010 (p < 0.05). Slopes for line segments are significant quadratic trend for 2005–2016. Mean non-HDL–C remained level from 2005–2006 to 2009–2010 (p > 0.05) but declined after 2009–2010 (p < 0.05). Slopes for line segments are

significantly different (ρ < 0.05). ¹Age adjusted to the projected U.S. Census 2000 population using age groups 20–39, 40–59, and 60 and over.

²Includes other races not shown separately.

³Includes underweight adults not shown separately. ⁴Includes Mexican-American adults.

NOTES: Non-high-density lipoprotein cholesterol (non-HDL-C) is calculated as total cholesterol (TC) - HDL-C, where both TC and HDL-C are measured in mg/dL. BMI is body mass index; underweight is BMI Less than 18.5 (not shown separately), normal weight is BMI at or above 18.5 and below 25.0, overweight is BMI at or above 25.0 and below 30.0, and obese is BMI at or above 30.0.

Table 3. Mean low-density lipoprotein cholesterol among men and women aged 20 years and over by survey cycle, age group, race and Hispanic origin, and BMI category: United States, 2005-2016

	Survey cycle												
-	2005	-2006	200	7–2008	200	9–2010	201	1–2012	201	3–2014	201	5–2016	
Sex, age, race and Hispanic origin, and BMI	Mean	Standard error	Mean	Standard error	Mean	Standard error	Mean	Standard error	Mean	Standard error	Mean	Standard error	p value for linear trend
Total, both sexes ^{1–3}	115	1.2	116	0.9	116	1.1	115	0.9	111	0.9	113	1.1	0.011
Men													
Aged 20 and over ¹⁻³	116	1.3	116	1.0	116	1.2	113	1.4	112	1.3	114	1.4	0.028
20–39	111	2.3	114	1.9	114	1.9	112	1.9	110	2.1	113	1.7	0.864
40–59	123	1.8	126	1.9	124	2.4	120	2.6	121	1.7	122	2.3	0.153
60 and over	113	1.9	103	2.6	107	2.1	105	2.6	102	2.7	102	3.6	0.015
Race and Hispanic origin ^{1,3} : Non-Hispanic:													
White	114	1.3	115	1.3	115	1.8	113	2.0	111	1.7	113	2.1	0.214
Black	115	2.8	114	3.1	117	2.1	109	2.4	112	1.8	110	3.4	0.103
Asian							114	4.2	111	2.9	116	4.0	0.705
Hispanic ⁴			120	2.0	120	1.3	120	1.6	119	4.3	117	1.7	0.161
Mexican American	123	2.6	120	2.7	120	2.4	119	2.1	118	5.1	116	2.0	0.090
Normal weight	112	20	113	21	110	24	111	21	105	24	107	3.5	0.018
Overweight	123	2.6	118	1.8	120	1.8	118	1.9	113	2.1	117	2.3	0.014
Obese	113	2.0	120	3.0	120	1.6	112	1.9	116	2.4	116	1.8	0.888
Women													
Aged 20 and over ¹⁻³	114	1.6	115	1.2	116	1.4	117	0.9	111	1.1	111	1.5	+
Age group (vears) ^{2,3} :													
20–39	109	2.9	106	1.6	107	2.0	107	0.9	102	2.1	100	1.9	0.006
40–59	119	2.8	123	2.5	122	1.6	126	2.1	118	2.7	122	2.7	0.703
60 and over	116	2.0	117	2.0	121	2.5	120	1.6	113	2.1	113	1.9	±
Race and Hispanic origin ^{1,3} : Non-Hispanic:													·
White	116	2.1	116	1.1	116	1.9	118	1.3	112	1.5	113	2.0	0.117
Black	110	2.8	113	2.8	115	1.8	116	2.0	107	4.0	109	2.6	+
Asian							114	3.8	106	3.1	110	2.4	0.312
Hispanic ⁴			115	1.8	114	2.3	115	2.3	110	2.3	108	1.7	0.003
Mexican American	110	3.0	117	2.4	113	2.3	111	3.3	107	3.1	108	2.3	0.078
BMI category ^{1,2} :													
Normal weight	109	2.3	111	1.3	110	2.2	112	2.4	103	1.9	105	3.1	0.037
Overweight	117	2.6	117	2.3	123	2.8	123	2.1	115	1.7	115	2.9	§
Obese	118	2.0	118	2.2	116	1.7	119	1.6	114	1.4	114	1.4	0.043

Data not available.

† Significant quadratic trend for 2005–2016. Mean LDL–C appeared to increase from 2005–2006 to 2011–2012 but did not reach statistical significance (p > 0.05) and declined after 2011–2012 (p < 0.05). Slopes for line segments are significantly different (p < 0.05).

⁺ Significant quadratic trend for 2005–2016. Mean LDL–C appeared to increase from 2005–2006 to 2009–2010 but did not reach statistical significance (p > 0.05) and declined after 2009–2010 (p < 0.05). Slopes for line segments are significantly different (p < 0.05). § Significant quadratic trend for 2005–2016. Mean LDL–C increased from 2005–2006 to 2011–2012 (p < 0.05) and declined after 2011–2012 (p < 0.05). Slopes for line segments are significantly

different (p < 0.05).

¹Age adjusted to the projected U.S. Census 2000 population using age groups 20–39, 40–59, and 60 and over. ²Includes other races not shown separately.

³Includes underweight adults not shown separately.

⁴Includes Mexican-American adults.

NOTES: Low-density lipoprotein cholesterol (LDL-C) is calculated by the Friedewald equation (see reference 26 in this report) and is measured in mg/dL. BMI is body mass index; underweight is BMI less than 18.5 (not shown separately), normal weight is BMI at or above 18.5 and below 25.0, overweight is BMI at or above 25.0 and below 30.0, and obese is BMI at or above 30.0.

Table 4. Adjusted trends in apolipoprotein B, non-high-density lipoprotein cholesterol, and low-density lipoprotein cholesterol among men and women aged 20 and over: United States, 2005–2016

	Аро	ъВ	Non-H	DL-C	LDL-C		
Sex and time period comparison	Slope (standard error)	p value	Slope (standard error)	<i>p</i> value	Slope (standard error)	p value	
Men							
2005–2006 to 2015–2016			-1.68 (0.29)	Less than 0.001	-0.56 (0.33)	0.087	
2005–2006 to 2011–2012	-1.71 (0.48)	Less than 0.001					
2011–2012 to 2015–2016	0.72 (0.70)	0.304					
Difference in slopes		0.021					
Women							
2005–2006 to 2015–2016	-0.81 (0.26)	0.003					
2005–2006 to 2011–2012			-0.62 (0.43)	0.150	0.71 (0.53)	0.184	
2011–2012 to 2015–2016			-4.54 (0.62)	Less than 0.001	-3.30 (0.83)	Less than 0.001	
Difference in slopes				Less than 0.001		0.001	

... Category not applicable.

NOTES: Data are adjusted for age, race and Hispanic origin, body mass index (BMI) category, and use of lipid-lowering medications. Apo B is apolipoprotein B. Non-HDL–C is non-high-density lipoprotein cholesterol. LDL–C is low-density lipoprotein cholesterol. Underweight is BMI less than 18.5, normal weight is BMI at or above 18.5 and below 25.0, overweight is BMI at or above 25.0 and below 30.0, and obese is BMI at or above 30.0.

Technical Notes

Table I. Unweighted sample size for mean apolipoprotein B among men and women aged 20 and over, by survey cycle, age group, race and Hispanic origin, and body mass index category: National Health and Nutrition Examination Surveys, 2005–2016

	Survey cycle										
Sex, age, race and – Hispanic origin, and BMI	2005–2006	2007–2008	2009–2010	2011–2012	2013–2014	2015–2016					
Total, both sexes ^{1,2}	1,959	2,345	2,595	2,286	2,364	2,253					
Men											
Aged 20 and over ^{1,2} Age group (years) ^{1,2} :	956	1,141	1,211	1,135	1,129	1,087					
20–39	319	367	367	409	362	345					
40–59	306	366	444	369	395	355					
60 and over	331	408	400	357	372	387					
Race and Hispanic origin ² : Non-Hispanic:											
White	505	568	578	444	514	389					
Black	202	205	203	230	207	203					
Asian				172	139	133					
Hispanic ³		322	365	258	243	317					
Mexican American	182	199	232	134	151	168					
BMI category ¹ :											
Normal weight	258	294	291	320	321	273					
Overweight	361	463	456	413	435	398					
Obese	307	356	437	375	350	390					
Women											
Aged 20 and over ^{1,2}	1,003	1,204	1,384	1,151	1,235	1,166					
Age group (years) ^{1,2} :											
20–39	427	369	477	409	397	371					
40–59	290	394	456	392	451	407					
60 and over	286	441	451	350	387	388					
Race and Hispanic origin ² :											
Non-Hispanic:											
White	480	560	647	441	542	380					
Black	230	232	226	292	227	249					
Asian				160	148	128					
Hispanic ³		369	435	229	288	375					
Mexican American	210	218	272	113	162	205					
BMI category1:											
Normal weight	284	335	383	340	363	295					
Overweight	275	350	426	316	319	335					
Obese	408	474	544	451	515	508					

--- Data not available.

¹Includes other races not shown separately.

²Includes underweight adults not shown separately.

³Includes Mexican-American adults.

NOTES: BMI is body mass index. Underweight is BMI less than 18.5 (not shown separately), normal weight is BMI at or above 18.5 and below 25.0, overweight is BMI at or above 25.0 and below 30.0, and obese is BMI at or above 30.0.

Table II. Unweighted sample size for mean non-high-density lipoprotein cholesterol among men and women aged 20 and over, by survey cycle, age group, race and Hispanic origin, and BMI category: National Health and Nutrition Examination Surveys, 2005-2016

	Survey cycle										
Sex, age, race and — Hispanic origin, and BMI	2005–2006	2007–2008	2009–2010	2011–2012	2013–2014	2015–2016					
Total, both sexes ^{1,2}	4,481	5,332	5,696	4,913	5,342	5,157					
Men											
Aged 20 and over ^{1,2} Age group (years) ^{1,2} :	2,155	2,616	2,760	2,434	2,547	2,478					
20–39	742	830	885	877	875	830					
40–59	680	843	948	778	862	800					
60 and over	733	943	927	779	810	848					
Race and Hispanic origin ² : Non-Hispanic:											
White	1,114	1.295	1.368	929	1.111	865					
Black	481	488	477	593	517	494					
Asian				340	288	304					
Hispanic ³		714	764	495	554	717					
Mexican American.	428	448	503	259	352	419					
BMI category ¹ :											
Normal weight.	544	662	678	710	688	622					
Overweight	866	1.019	1.051	876	961	912					
Obese	680	866	968	784	840	881					
Women											
Aged 20 and over ^{1,2} Age group (years) ^{1,2} :	2,326	2,716	2,936	2,479	2,795	2,679					
20–39	959	872	1,020	871	927	907					
40–59	697	878	963	851	979	913					
60 and over	670	966	953	757	889	859					
Race and Hispanic origin ² : Non-Hispanic:											
White	1,150	1.248	1.410	915	1.219	843					
Black	515	531	493	655	538	562					
Asian				345	318	300					
Hispanic ³		830	869	502	638	886					
Mexican American.	484	493	544	235	370	499					
BMI category ¹ :											
Normal weight	709	766	804	724	815	684					
Overweight	645	808	866	693	743	737					
Obese	895	1,055	1,186	966	1,154	1,196					

--- Data not available.

¹Includes other races not shown separately. ²Includes underweight adults not shown separately.

³Includes Mexican-American adults.

NOTES: BMI is body mass index. Underweight is BMI less than 18.5 (not shown separately), normal weight is BMI at or above 18.5 and below 25.0, overweight is BMI at or above 25.0 and below 30.0, and obese is BMI at or above 30.0.

Table III. Unweighted sample size for mean low-density lipoprotein cholesterol among men and women aged 20 and over, by survey cycle, age group, race and Hispanic origin, and BMI category: National Health and Nutrition Examination Surveys, 2005–2016

	Survey cycle									
Sex, age, race and – Hispanic origin, and BMI	2005–2006	2007–2008	2009–2010	2011–2012	2013–2014	2015–2016				
Total, both sexes ^{1,2}	1,907	2,296	2,550	2,244	2,332	2,230				
Men										
Aged 20 and over ^{1,2} Age group (years) ^{1,2} :	921	1,106	1,181	1,105	1,105	1,070				
20–39	308	357	356	402	352	341				
40–59	290	350	430	354	384	347				
60 and over	323	399	395	349	369	382				
Race and Hispanic origin ² : Non-Hispanic:										
White	488	553	561	428	500	385				
Black	198	202	201	228	206	202				
Asian				170	136	131				
Hispanic ³		307	355	248	238	310				
Mexican American	172	189	227	127	147	164				
BMI category ¹		100		121		101				
Normal weight	255	288	289	317	320	272				
	340	447	440	401	126	301				
Obese	296	343	426	360	336	381				
00000	200	010	120	000	000	001				
Women										
Aged 20 and over ^{1,2}	986	1,190	1,369	1,139	1,227	1,160				
Age group (years) ^{1,2} :										
20–39	423	366	474	407	395	371				
40–59	282	386	449	387	446	402				
60 and over	281	438	446	345	386	387				
Race and Hispanic origin ² :										
Non-Hispanic:										
White	470	554	637	435	537	379				
Black	229	229	226	290	227	249				
Asian				158	148	127				
Hispanic ³		365	430	227	285	371				
Mexican American	206	215	267	112	160	203				
BMI category ¹ :										
Normal weight	282	333	381	339	363	294				
Overweight	271	347	424	309	319	331				
Obese	397	466	534	447	507	507				
	007	100	001		007	007				

--- Data not available.

¹Includes other races not shown separately.

²Includes underweight adults not shown separately. ³Includes Mexican-American adults.

NOTES: BMI is body mass index. Underweight is BMI less than 18.5 (not shown separately), normal weight is BMI at or above 18.5 and below 25.0, overweight is BMI at or above 25.0 and below 30.0, and obese is BMI at or above 30.0.

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