RESULTS
Ten RCTs were identified with a total of 3754 patients, 2468 intervention and 1284 control, and followed up for 4 to 52 weeks. The combined data showed that the primary endpoint, percent changes in LDL-C MD -25.81 [95 CI% -29.56, -22.06], was statically significant. Secondary endpoints were to assess the percent change from baseline for non-HDL-C -20.19 [95 CI% -23.42, -16.95] and apolipoprotein B -15.43 [95 CI% -17.09, -13.76] with a p value of <0.00. Two studies revealed that when adding it to dual therapy, 90% of patients achieved LDL-C <70 mg/dL, and 95% of patients had ≥50% lower LDL-C from baseline to week 6;. One study showed that adding PCSK9i lowered LDL-C by 30.3% vs placebo (P<.001).

CONCLUSION
Bempedoic acid significantly decreased LDL-C, non-HDL-C, and apolipoprotein B levels.

PP-OL-13

CORRELATION OF TG/HDL-C RATIO AND TyG INDEX WITH C-REACTIVE PROTEIN IN IMPAIRED FASTING GLUCOSE SUBJECTS

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OBJECTIVES
Prediabetes is an insulin resistant (IR) condition. The TG/HDL-C ratio and TyG index were associated with prediabetes and IR which are related to cardiovascular disease (CVD). HS-CRP is a marker of inflammation that is closely related to CVD. The aim of this study is to determine the correlation between TG/HDL-C ratio and TyG index with HS-CRP as a marker of chronic inflammation in impaired fasting glucose (IFG).

METHODOLOGY
Research subjects were taken from Makassar Lipid and Diabetes Study, an observational study which involved 92 prediabetic subjects aged 18-70 years old in Makassar City, Indonesia between January to April 2022. Triglyceride, HDL-C, FPG, and HS-CRP were examined. Level of HS-CRP >3-10 mg/L defined as a high risk of CVD. Impaired Fasting Glucose defined as fasting plasma glucose 100-125 mg/dL. Statistical analyses used were Kruskal-Wallis and Chi-Square tests.

RESULTS
The mean TG/HDL-C ratio was 4.88, TyG index was 4.92, and HS-CRP level was 4.53 ± 2.91 mg/L. The Chi Square test showed that there was no significant difference between TG/HDL-C ratio and TyG Index with high risk group of CVD (HS-CRP >3-10 mg/dL) among IFG subjects with p= 0.383 and p=0.584, respectively.

CONCLUSION
Our results indicate that there is no statistically significant relationship between TG/HDL-C ratio and TyG index with HS-CRP in prediabetic IFG subjects.

PP-OL-14

OBESITY IN THE ASEAN REGION: INDONESIA'S PERSPECTIVE

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BACKGROUND
Obesity is a chronic, relapsing, multifactorial, treatable neurobehavioral disease in which an increase in fat mass causes adipose tissue dysfunction and physical fat mass abnormalities cause metabolic, biochemical, and psychosocial health problems. After smoking and armed violence, war, and terrorism, obesity is the third leading cause of social burden.

Indonesia, one of the countries with a large population of more than 270 million people, is the world's fourth most populous country. According to the Ministry of Health of the Republic of Indonesia's Basic Health Research, the prevalence of obesity in adults increased from 19.1 percent in 2007 to 26.3 percent in 2013 and 35.4 percent in 2018. Obesity is more prevalent in females than in males, at 44.4 percent and 26.6 percent, respectively. As a result, one in every three adults is obese. Overweight and obesity were prevalent in children at a rate of 20%, or one in every five children. According to the World Obesity Atlas (2022), Indonesia has 14 million females (14%) and 8 million males (8%) who are obese (BMI >30 kg/m^2)

The situation is a health burden as well as a financial burden for individuals and the state. The potential impact of rising obesity rates is an increase in the prevalence of prediabetes (IGT) and diabetes in Indonesia, which were 10.2 percent and 5.7 percent in 2007, 29.9 percent and 6.9 percent in 2013, and 30.8 percent and 10.9 percent in 2018. According to the 2019 IDF Atlas, Indonesia has the world's third largest adult population with prediabetes, with 29.1 million people and