**Table No A – F.** Pie table A showing distribution of subject in healthy control group I, NAFLD group II (Over weight- BMI 25 to 30), NAFLD group III (Obesity type I- BMI 30 to 35), NAFLD group IV (Obesity type II- BMI 35 to 40), and NAFLD group V (Obesity type III- BMI more than 40) subjects. Pie tables B-E showing distribution of male and female in group I, group II, group III, group IV and group V subjects.

**Table No. 1.** Showing the demographic data of all study group subjects in group I healthy control subjects (N=100).

**Table No. 2.** Showing the demographic data of all study group in NAFLD subjects (N=400).

**Table No. 3.** Showing the overall range and mean (±SD) level of biochemical parameters of group I healthy control subjects (N=100). Data indicates that all the mean values are within the normal range in control group.

**Table No. 4.** Showing the overall range and mean (±SD) level of biochemical parameters of NAFLD subjects (N=400) (Fig no 4a, 4b, 4c, 4d, 4e, 4f, 7g).

**Table No. 5.** Showing the overall range and mean (±SD) level of biochemical parameters of NAFLD Subjects group II (BMI 25-30) (N=74) (Fig no 5a, 5b, 5c, 5d, 5e, 5f, 5g).

**Table No. 6.** Showing the overall range and mean (±SD) level of biochemical parameters of NAFLD Subjects group III (BMI 30-35) (N=211) (Fig no 6a, 6b, 6c, 6d, 6e, 6f, 6g).
Table No. 7. Showing the overall range and mean (±SD) level of biochemical parameters of NAFLD Subjects group IV (BMI 35-40) (N=75) (Fig no 7a, 7b, 7c, 7d, 7e, 7f, 7g).

Table No. 8. Showing the overall range and mean (±SD) level of biochemical parameters of NAFLD Subjects group V (BMI more than 40) (N=40) (Fig no 8a, 8b, 8c, 8d, 8e, 8f, 8g).

Table No. 9. Showing the significant changes of study parameters in healthy control group I and over all NAFLD subjects group. There were highly significant (P<0.001) increase in BMI, TG, LDL-c, VLDL-c, GGT and HOMA-IR (Fig no 9a, 9b, 9d, 9f), highly significant (P<0.001) decrease in HDL-c in this group (Fig no 9b). Total Bilirubin, SGPT, ALP and hs- CRP were highly significant (P<0.01) (Fig no 9c, 9d, 9g). FBS, TC and fasting insulin were significantly (P< 0.05) (Fig no 7b, 7e) increase in healthy control group I as compared to NAFLD subjects group (N=100 and 400 respectively).

Table No. 10. Showing the comparative changes of study parameters in healthy control group I and NAFLD subjects group II. There were highly significant (P<0.001) increase in BMI, FBS, TC, TG, VLDL-c, ALP, fasting insulin and HOMA-IR (Fig no 10a, 10b, 10d, 10e, 10f), highly significant (P<0.001) decrease in HDL-c in this group (Fig no 10b). LDL-c and SGPT were highly significant (P<0.01) (Fig no 10b, 10d). GGT was also significantly (P< 0.05) (Fig no 10d) increase, but no significant changes were observed in total
bilirubin and hs-CRP (Fig no 10c, 10g) in healthy control group I as compared to NAFLD subjects group II (N=100 and 74 respectively).

**Table No. 11.** Showing the comparative changes of study parameters in healthy control group I and NAFLD subjects group III. There were highly significant (P<0.001) increase in BMI, FBS, TC, TG, LDL-c, VLDL-c, SGPT, ALP, GGT, fasting insulin and hs-CRP (Fig no 11a, 11b, 11d, 11e, 11g), highly significant (P<0.001) decrease in HDL-c in this group (Fig no 11b). HOMA-IR was also significantly (P< 0.01) (Fig no 11f) increase, but no significant changes was observed in total bilirubin (Fig no 11c) in healthy control group I as compared to NAFLD subjects group III (N=100 and 211 respectively).

**Table No. 12.** Showing the comparative changes of study parameters in healthy control group I and NAFLD subjects group IV. There were highly significant (P<0.001) increase in BMI, FBS, TC, TG, LDL-c, VLDL-c, Total bilirubin, SGPT, GGT and fasting insulin (Fig no 12a, 12b, 12c, 12d, 12e), highly significant (P<0.001) decrease in HDL-c in this group (Fig no 12b). hs-CRP was highly significant (P<0.01) (Fig no 12g). ALP and HOMA-IR were significantly at (P< 0.05) (Fig no 12d, 12f) increase in healthy control group I as compared to NAFLD subjects group IV (N=100 and 75 respectively).

**Table No. 13.** Showing the comparative changes of study parameters in healthy control group I and NAFLD subjects group V. There were highly
significant (P<0.001) increase in BMI, FBS, TC, TG, LDL-c, VLDL-c, Total bilirubin, SGPT, ALP, GGT, HOMA-IR and hs-CRP (Fig no 13a, 13b, 13c, 13d, 13f, 13g), highly significant (P<0.001) decrease in HDL-c in this group (Fig no 13b). Fasting insulin was highly significantly (P<0.01) (Fig no 13e) increase in healthy control group I as compared to NAFLD subjects group V (N=100 and 40 respectively).

**Table No. 14.** Showing the mean level of BMI, FBS, TG, LDL-c, VLDL-c, SGPT, ALP, GGT and HOMA-IR (Fig no 14a, 14b, 14d, 14f) were highly significant at (P<0.001) increase whereas HDL-c (Fig no 14b) was highly significant (P<0.001) decrease in this group. Fasting insulin and hs-CRP (Fig no 14e, 14g) were highly significant (P<0.01). TC and total bilirubin (Fig no 14b, 14c) were significant (P<0.05) in healthy control male group I as compared to NAFLD male subjects group (N=56 and 156 respectively).

**Table No. 15.** Showing the mean level of BMI, FBS, TC, TG, LDL-c, VLDL-c, total bilirubin, ALP, GGT, Fasting insulin, HOMA-IR and hs-CRP (Fig no 15a, 15b, 15c, 15d, 15e, 15f, 15g) were highly significant at (P<0.001) increase whereas HDL-c (Fig no 15b) was highly significant (P<0.001) decrease in this group. SGPT (Fig no 15d) was highly significant (P<0.01) in healthy control female group I as compared to NAFLD female group subjects (N=44 and 244 respectively).
Table No. 16. Showing the comparative changes of study parameters in control male group I and NAFLD male subjects group III. There were highly significant (P<0.001) increase in BMI, FBS, TC, TG, VLDL-c, total bilirubin, SGPT, GGT, fasting insulin and HOMA-IR (Fig no 16a, 16b, 16c, 16d, 16e, 16f, 16g). LDL-c, ALP and hs-CRP (Fig no 16b, 16d, 16g) were highly significant (P<0.01) increase whereas HDL-c (Fig no 16b) was highly significant (P<0.01) decrease in control male group I as compared to NAFLD male subjects group III (N=56 and 72 respectively).

Table No. 17. Showing the comparative changes of study parameters in control female group I and NAFLD female subjects group III. There were highly significant (P<0.001) increase in BMI, FBS, TC, TG, LDL-c, VLDL-c, SGPT, ALP, GGT, HOMA-IR and hs-CRP (Fig no 17a, 17b, 17d, 17f, 17g), highly significant (P<0.001) decrease in HDL-c (Fig no 17b) in this group. Total bilirubin (Fig no 17c) was highly significant (P<0.01). Fasting insulin (Fig no 17e) was also significantly (P<0.05) increase in control female group I as compared to NAFLD female subjects group III (N=44 and 139 respectively).

Table No. 18. Showing the comparative changes of study parameters in healthy control group I and NAFLD group III subjects, according to duration from up to 10 years. There were highly significant (P<0.001) increase in BMI, FBS, TG, LDL-c, SGPT, GGT and fasting insulin (Fig no 18a, 18b, 18d, 18e), highly significant (P<0.001) decrease in HDL-c in this group (Fig no
18b). VLDL-c and HOMA-IR were highly significant (P<0.01) (Fig no 18b, 18f). TC, ALP and hs-CRP (Fig no 18b, 18d, 18g) were also significantly (P< 0.05) increase, but no significant changes was observed in total bilirubin (Fig no 18c) in healthy control group I as compared to NAFLD subjects group III (N=100 and 114 respectively).

**Table No. 19.** Showing the comparative changes of study parameters in healthy control male group I and NAFLD male subjects group III, according to duration from up to 10 years. There were highly significant (P<0.001) increase in BMI, FBS, TC, TG, SGPT, GGT, fasting insulin and HOMA-IR (Fig no 19a, 19b, 19d, 19e, 19f). LDL-c, VLDL-c and total bilirubin were highly significant (P<0.01) (Fig no 19b, 19c). HDL-c and ALP were also significantly (P< 0.05) (Fig no 19b, 19d) decrease, but no significant changes was observed in hs-CRP (Fig no 19g) in healthy control male group I as compared to NAFLD male subjects group III (N=56 and 47 respectively).

**Table No. 20.** Showing the comparative changes of study parameters in healthy control female group I and NAFLD female subjects group III, according to duration from up to 10 years. There were highly significant (P<0.001) increase in BMI, FBS, TC, TG, VLDL-c, total bilirubin, SGPT, ALP, fasting insulin and HOMA-IR (Fig no 20a, 20b, 20c, 20c, 20d, 20e, 20f), highly significant (P<0.001) decrease in HDL-c (Fig no 20b) in this group. LDL-c and GGT were highly significant (P<0.01) (Fig no 20b, 20d). hs-CRP was also
significantly (P< 0.05) (Fig no 20g) increase in healthy control female group I as compared to NAFLD female subjects group III (N=44 and 67 respectively).

**Table No. 21.** Showing the comparative changes of study parameters in healthy control group I and NAFLD group III subjects, according to duration from 10 to 15 years. There were highly significant (P<0.001) increase in BMI, FBS, TC, TG, LDL-c, VLDL-c, SGPT, GGT, fasting insulin, HOMA-IR and hs-CRP (Fig no 21a, 21b, 21d, 21e, 21f, 21g), highly significant (P<0.001) decrease in HDL-c (Fig no 21b) in this group. Total bilirubin was highly significant (P<0.01) (Fig no 21c). ALP was also significantly (P< 0.05) (Fig no 21d) increase in healthy control group I as compared to NAFLD group III subjects (N=100 and 97 respectively).

**Table No. 22.** Showing the comparative changes of study parameters in healthy control male group I and NAFLD male subjects group III, according to duration from 10 to 15 years. There were highly significant (P<0.001) increase in BMI, FBS, TC, TG, LDL-c, VLDL-c, total bilirubin, SGPT, fasting insulin and HOMA-IR (Fig no 22a, 22b, 22c, 22d, 22e, 22f, 22g), highly significant (P<0.001) decrease in HDL-c (Fig no ) in this group. ALP, GGT and hs-CRP were also highly significant (P<0.01) (Fig no 22d, 22g) in healthy control male group I as compared to NAFLD male subjects group III (N=56 and 25 respectively).
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Table No. 23. Showing the comparative changes of study parameters in healthy control female group I and NAFLD female subjects group III, according to duration from 10 to 15 years. There were highly significant (P<0.001) increase in BMI, FBS, TC, TG, VLDL-c, SGPT, ALP, GGT, fasting insulin, HOMA-IR and hs-CRP (Fig no), highly significant (P<0.001) decrease in HDL-c (Fig no 23a, 23b, 23d, 23e, 23f, 23g) in this group. LDL-c and Total bilirubin were also highly significant (P<0.01) (Fig no 23b, 23c) in healthy control female group I as compared to NAFLD female subjects group III (N=44 and 72 respectively).

Table No. 24. Showing the comparative changes of study parameters in healthy control group I as compared with NAFLD subjects group II (BMI 25-30), group III (BMI 30-35), group IV (BMI 35-40),and group V (BMI more the 40).

Table No. 25. Shows Spearman’s correlation between all the study parameters in NAFLD subjects group III (BMI 30-35). It was found that BMI had positive correlation with TG, fasting insulin, HOMA-IR, hs-CRP and duration of type II diabetes, while significantly negative correlation with HDL-c. All studied total bilirubin and liver function enzymes (SGPT, ALP and GGT) were positive correlated with each other.