Aim: Type 2 diabetes is characterized by a long progression period before overt disease onset. Impaired fasting glycaemia (IFG) is associated with a substantially increased risk of developing diabetes and cardiovascular diseases. The changes in lipoprotein metabolism take important parts in the period of the diseases. Cost effective strategies to identify people with IFG for intervention should be improved to estimate the risks because total cholesterol and HDL levels are normal in the half of these patients. The purpose of this study was to compare plasma lipid and apolipoprotein profiles and their ratio in subjects with IFG and DM. Methods: A total of 167 patients were enrolled to the study. Subjects were categorized as IFG (n = 89) and DM (n = 78) according to American Diabetes Association criteria. We evaluated serum total cholesterol, high-density lipoprotein cholesterol (HDL-C), low-density lipoprotein cholesterol (LDL), triglyceride, apolipoprotein (apo) A-I and apo B, and their ratios. Results: Serum LDL, total cholesterol, triglyceride, Apo A1 ve Apo B levels were not significantly different between Type 2 diabetic patients and IFG patients (p>0.05). On the other hand, LDL/Apo B and HDL/ApoA1 ratios were significantly lower in Type 2 diabetic than IFG group (p=0.028, p= 0.0001, respectively). Conclusion: LDL/ApoB ratio, which could represent small dense LDL subgroup, was lower in Type 2 diabetics. LDL/ApoB and HDL/ApoA1 ratios may be used to define DM risk in patients with IFG patients.