

ABSTRACT BOOK



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DYNAMICS OF INDICATORS OF QUALITY OF LIFE OF PATIENTS WITH CHRONIC CRITICAL ISCHEMIA OF LOWER LIMBS

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Introduction. Chronic critical lower limb ischemia (CCLLI) caused by infrainguinal atherosclerosis is an important source of death and disability. The number of deaths per year ranges from 10% to 40%, and without revascularization up to 40% of patients are at risk of losing limbs within six months. The global epidemic of diabetes, combined with smoking, diet and lifestyle trends, ensures that the level of the CCLLI will continue to grow. Intermittent claudication, pain, trophic ulcers and necrosis, as well as concomitant diseases make this population extremely vulnerable when considering the safety and efficacy of new therapies and

to study the results of treatment of patients with chronic critical lower limb ischemia with distal vascular lesion treated by various methods and stimulation of neoangiogenesis by determining the quality of life of these patients during the course of the year.

Materials and methods. The study involved 105 patients with CCLLI with a distal vascular lesion that were treated in 2013-2016. The average age of the patients was 63 years (from 38 to 86 years), the age of the patients being slightly different depending on the etiological factor of chronic ischemia - in patients with obliterating atherosclerosis without diabetes, the age averaged 61.6 years (from 53 to 86) with Diabetes mellitus - 66,2 years, and in patients with endarteritis and thrombangiitis the average age was 47.2 years.

All patients were divided into two groups: the main group and the comparison group. The comparison group consisted of 50 patients who received therapy according to indications, the main group included 55 patients who were on treatment from March 2015 to May 2016, who were additionally treated with plasma therapy to stimulate neoangiogenesis. The quality of life of patients were determined during treatment, and also 6 and 12 months after treatment.

Results of research. Interpreting data on the dynamics of the quality of life level of patients with CCLLI showed that patients who were treated with the help of CBA showed the highest Quality of life, indices at earlier times and significantly differed from the corresponding parameters in patients treated by other methods, as well as between the two groups — Main Group is 100% lower than pain, 1.1% higher than FF, 14.7% higher than PF and 11.8% greater distance from painless walking compared to the comparison group at 12 months. Negative dynamics of treatment was noted in patients with conservative therapy and open sympathectomy.

Conclusions. On the basis of the data obtained, it can be concluded that stimulation of neoangiogenesis makes sense as an auxiliary method for treating patients with CCLLI with a distal vascular lesion.