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#356 - Features of the endothelium in patients with asthma and type 2 diabetes mellitus.

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## Background

To study the severity of bronchial obstruction syndrome in patients who have asthma (As) combined with type 2 diabetes mellitus (DM2T), and the state of their endothelium.

## Method

The study involved 63 cases of As with DM2T. The patients' age averaged 53.00 [48.50; 60.00] years, the duration of their As was 17.00 [14.45; 19.50] years. Concomitant DM2T was diagnosed and treated by an experienced specialist in endocrinology. The respiratory function, endothelin 1 (ET-1), von Willebrand factor (VWF) and S-nitrosothiol (S-NO) were assessed.

## Results

The examined patients revealed reduction of  $FEV_1 < 60\%$ . Two groups were isolated depending upon their  $FEV_1$ . Group I with  $FEV_1 < 50\%$  consisted of 45 (71.42%) cases; group II with  $50\% < FEV_1 < 60\%$  included 18 (28.58%) patients. The obtained obstructive changes were accompanied with a reliable ( $p < 0.05$ ) damage of vasoregulatory endothelial mediators both between the examined groups and versus the control group. In patients from group I: ET-1 = 10.32 [9.40; 11.00] fmol/l, VWF = 160.00 [155.00; 170.00]%, S-NO = 0.24 [0.17; 0.29] mmol/l; the above indices in patients from group II were, respectively, 7.99 [6.92; 8.35] fmol/l, 155.00 [150.00; 160.00]% and 0.18 [0.14; 0.21] mmol/l. A correlation analysis was made; it revealed a positive relationship between ET-1 and VWF ( $R = 0.78$ ,  $p = 0.001$ ) and a negative one between ET-1 and S-NO ( $R = -0.63$ ,  $p = 0.002$ ) as well as with all rate indices studied ( $FEV_1$ ,  $FEF_{25}$ ,  $FEF_{50}$ ), these facts demonstrating presence of obstruction along the whole respiratory tract.

## Conclusion

The findings demonstrate that an endothelial damage is an unfavourable pathogenetic factor in pulmonary vessel dystonia with resultant progression of bronchial obstruction and development of hypoxia, especially in patients with a comorbid course.