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Diabetic Foot Versus Non-Diabetic Foot: Are There Different Outcomes Following Percutaneous Transluminal Angioplasty in Patients with Critical Limb Ischemia?

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Background: There are very limited data regarding the impacts of diabetes mellitus (DM) on the clinical outcomes, and clinical outcomes after percutaneous translumianl angioplasty (PTA). Method: This study consisted of 128 consecutive Chronic limb ischemia pts underwent PTA. Among these pts, 76 (60.3%) CLI pts presented with DM foot (DM foot group, 167 lesions) and 50 pts without DM foot (Non-DM foot group, 93 lesions). Periprocedural complications and clinical outcomes up to 6 months were compared. Results: The baseline characteristics were similar between the two groups, except that more pts in DM foot group suffered from worse ischemic symptoms (p<0.01) and accompanied with coronary artery disease (CAD, p=0.039). Overall procedural success rate was 99.3%, and there was no difference in angiographic success rate between the two groups with similar periprocedural complications. At 6 months, the cumulative clinical outcomes also similar (Table.). Conclusion: EVT offered good procedural success rate without significant periprocedural complications and mid-term clinical outcomes with excellent limb salvage in either diabetic or non-diabetic pts with CLI.

Table. Peri-procedural outcomes and clinical outcomes up to 6 months

	DM foot group (N=76 pts, N=167 lesions)	Non DM foot group (N=50 pts, N=93 lesions)	P value
rocedural Outcomes			
Dissection	63 (36.8)	30 (32.3.4)	0.501
Perforation	11 (6.4)	4 (4.5)	0.590
Angiographic success	166 (99.4)	92 (98.9)	1.000
linical outcomes up to 6 months			
fortality	4 (11.1)	1 (3.7)	0.381
ardiac death	1 (3.7)	0 (0)	1.000
otal occlusion	6 (18.8)	4 (14.3)	0.737
inary restenosis	14 (41.2)	11 (39.3)	1.000
epeat PTA	11 (32.4)	9 (32.1)	1.000
TLR-PTA	11 (32.4)	9 (32.1)	1.000
TVR-PTA	11 (32.4)	9 (32.1)	1.000