

PREVALENCE AND ETIOPATHOGENESIS OF CRITICAL LIMB ISCHEMIA ON THE BACKGROUND OF DIABETES MELLITUS

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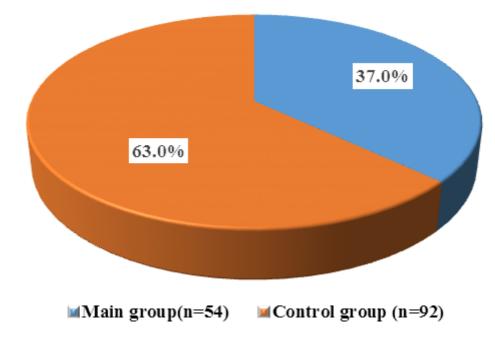
Relevance. Ischemia of the lower extremities is a chronic pathological condition characterized by a lack of oxygen in the tissues of the legs. Critical ischemia of the lower extremities is a set of manifestations of diseases accompanied by damage to peripheral arteries and associated with chronic insufficiency of blood supply to the soft tissues of the legs. Critical ischemia of the lower extremities (pre—gangrene, threatening limb ischemia) is a special form of circulatory condition in which there is a high risk of irreversible changes in the leg and the threat of amputation.

The aim of the study: To improve the methods of treatment of critical lower limb ischemia in patients with diabetes mellitus

Materials and methods. The work is based on the data of examination and treatment of 146 patients with critical ischemia of the lower extremity with severe foot damage (IV-V according to Wagner, 1979) who were treated at the clinical base of "Jeongnam National University in the Hakdong Clinic in the Department of Interventional Radiology" of the Ministry of Health of South Korea for 2016 to 2020.

In accordance with the objectives of the study, the patients were conditionally divided into 2 groups: in the comparison group of 92 (63%) patients with SDS, traditional methods of treatment at the foot level according to known methods with endovascular delatation were performed.

The main group consisted of 54 (47%) patients with SDS with severe foot damage who underwent endovascular thrombectomy with a BOSTON SCIENTIFIC (USA) device at the level of the vessels of the finger and foot, developed by specialists at the University of Boston USA



Distribution of patients by comparison groups

When assessing the condition of the foot limb in the main group of patients, the transcutaneous



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oximeter of the soft tissues of the lower leg, duplex and angiographic studies, thermography and objective data were evaluated. For the homogeneity of the groups in the study, patients were selected for whom vascular occlusion was observed at the foot level and blood flow was preserved in the popliteal artery and above. When determining purulent-necrotic lesions of the examined patients, Wagner (1979) classifications were used

In the main group, patients underwent conservative treatment and, according to the indication of endovascular delatation, in the absence of effective treatment, amputation was performed at the level of the lower leg and foot, taking into account the tpcO2 index of foot tissue and duplex examination.

Literature

- 1. World Health Organization, Forty-second world health assembly, Geneva 8–19 May Resolutions and decisions, Annexes (WHA42/1989/REC/1). 2013.
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