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The use of PTA in multisegmental type of arterial lesions in diabetic foot patients.

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The aim of this study was to analyze the results of PTA in multisegmental type of arterial lesions in diabetic foot patients. **Materials and methods:** 73 diabetic foot patients, aged from 34 to 88 (mean 64.2± 8.8), 35 (48%) men, 78 limbs which DFS took part in this study. The type and size of PTA was defined after angiography. All the limbs divided into two groups: group A- limbs with isolated (single) type of arterial lesion, group B - limbs with multilevel type of arterial lesions. It was performed 78 PTA (5 - bilateral) on 191 arterial segments (according to Bollinger A. et al, 1980), including foot arteries. In group A PTA was done in 20 cases (26%), mainly (13 cases) on tibial arterial segments. In group B PTA was performed in 58 cases (74,4%), on tibial and foot arterial segments in 56 cases. **Results:** The results of PTA performance in both groups are reported in table 1. Table1. The PTA in group of patients with single type of arterial lesions (group A) and multilevel type of arterial lesions (group B)

Group	Iliac arteries (5/0)**	Femoral artery (3/38)	Popliteal artery (1/31)	Tibial arteries (15/63)	Foot arteries (0/35)	n	%, (n=78)
A				+		13	16,7%
	+					3	3,8%
		+				3	3,8%
			+			1	1,3%
B		+	+	+		13	16,7%
				+	+	11	14,1%
		+		+	+	9	11,5%
		+	+	+	+	8	10,3%
			+	+		6	7,7%
		+		+		6	7,7%
			+	+	+	3	3,8%
		+	+			2	2,6%

* + PTA was performed ** - number of arterial segments (A/B)

In group A and group B the successful angiographic and clinical results were comparable. **Conclusion:** Our results show the prevalence of distal lesions in both groups and the comparable successful results of PTA in multilevel type and single type of arterial lesions, including foot arterial segments in diabetic foot patients.