



HYPERCHOLESTEROLEMIA AND HYPERTRIGLYCERIDEMIA ON PATIENTS WITH CRITICAL LIMB ISCHEMIA AND AMPUTATION



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INTRODUCTION

Critical limb ischemia (CLI) is a condition with limb pain in rest and could involve severe blood flow modification that affect extremities. Despite that advances in revascularisation and due to the absence of an agreement on definition of non-salvageable limb, amputations continue to be performed even if their rates are declining. The aim of the present study was to assess the link between amputation and hypercholesterolemia and hypertriglyceridemia on patients with critical limb ischemia.

MATERIAL AND METHODS

A retrospective study was conducted on subjects with critical limb ischemia hospitalized at Second Surgical Clinic, Clinical County Hospital Cluj-Napoca, between January 2010 and December 2014. The medical charts for all subjects with principal diagnosis of critical lower limb ischemia were reviewed. Demographic data along with co-morbidities were collected for all subjects included in study.

RESULTS

- 634 patients with median age of 66 years old were included in the study.
- A significantly higher percentage of subjects were male ($p < 0.0001$, Figure 1).
- Amputation was performed on 108 patients (17%).
- A significantly higher percentage of patients without amputation (72%) were smokers compared with patients with amputation (56%, $p = 0.0019$).
- No significant differences were observed between patients with (Amputation=yes) and (Amputation=no) in regards of presence of obesity (A+/A-: 9%:9%, $p > 0.9999$), arterial blood hypertension (82%:77%, $p = 0.2257$), ischemic cardiopathy (50%:44%, $p = 0.2554$), hypercholesterolemia (37%:39%, $p = 0.6955$) or hypertriglyceridemia (36%:34%, $p = 0.6926$).
- No significant differences were identified between subjects with and without amputation, neither in regards of cholesterolemia nor in regards with trygliceridemia ($p > 0.05$, Figure 3).

CONCLUSION

Our study showed that neither total cholesterol nor tryglyceridemia profile is significantly different on critical limb ischemia subjects with and without amputation.

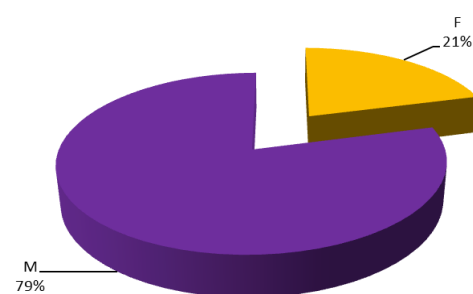


Figure 1. Distribution by gender

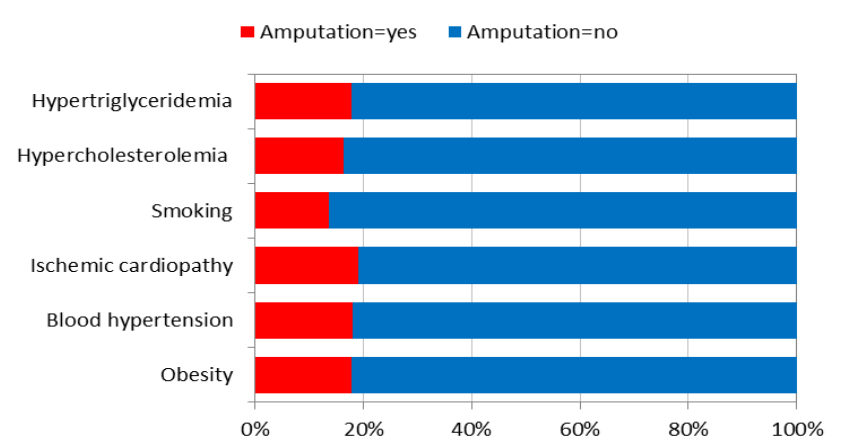


Figure 2. Amputation and co-morbidities

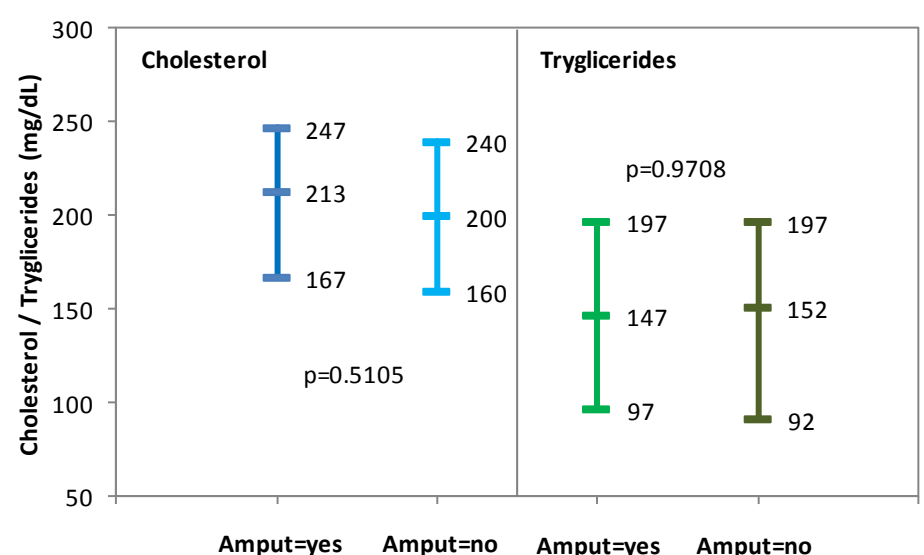


Figure 3. Cholesterol and tryglicerides on patients with and without amputation (Amput)