

CLINICAL AND DEMOGRAPHIC CHARACTERISTICS OF THE PATIENTS WITH ACUTE LIMB ISCHEMIA

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Introduction

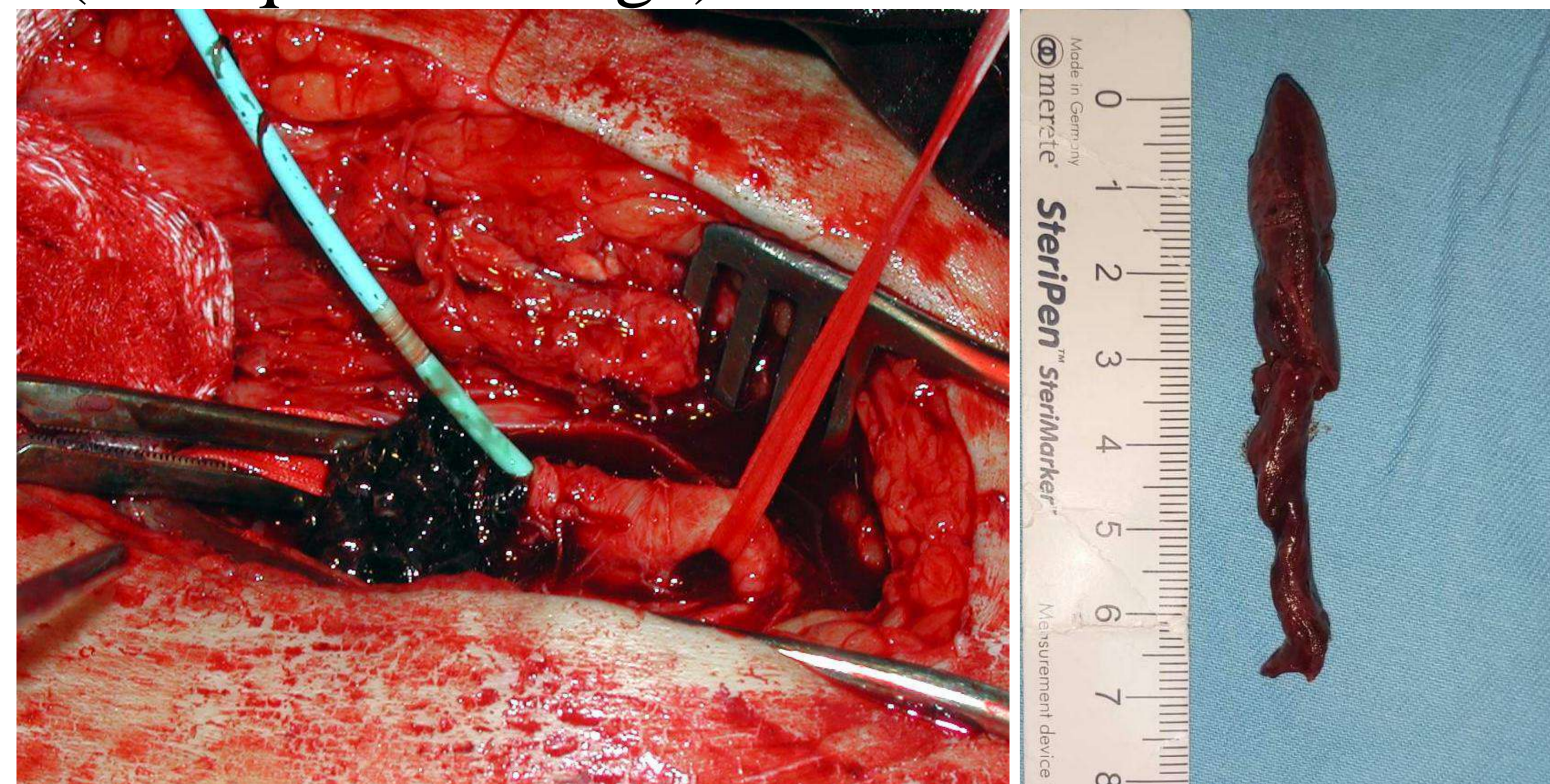
Acute limb ischemia (ALI) is a common vascular emergency associated with high postoperative morbidity and mortality. Acute limb ischemia is defined as any sudden decrease in limb perfusion causing a potential threat to limb viability. Acute limb ischemia is a critical, potentially end-of-life, clinical condition that presents in patients with multiple medical comorbidities.

Purpose

Aim of study was to analyze the clinical and demographic characteristics of the patients with ALI, highlighting potential treatment challenges.

Material and methods

Data of 58 patients (age – 72.5 (63-79) years, male – 50%) with ALI supposed to revascularization during a 6 months period were analyzed descriptively. Values are presented as number (%) or median (interquartile range).



Results

Lower limbs were affected in 43 (74%) cases. Time from ALI onset to patient hospitalization was 12 (4-96) hours; >6 hours – in 37 (63%) cases. Immediately threatened (grade IIB) ALI was diagnosed in 20 (34%) patients. Duration of ALI was higher in grade IIB vs grades I-IIA: 41 (6-96) vs 7 (2-32) hours ($p < 0.05$). Embolism was diagnosed in 48 (82%) patients. Only 7/38 (18%) patients with atrial fibrillation were on warfarin (INR < 2 in all cases). Among patients with thrombosis only 4 (40%) were on ongoing antiplatelet therapy. Comorbidities: hypertension – 45 (77%) patients, coronary artery disease – 45 (77%), heart failure – 40 (68%), renal failure – 30 (51%).

Conclusions

The subset of patients operated for ALI is characterized by elevated grade of frailty, substantial rate of cases with advanced ischemia and suboptimal use of antithrombotic drugs. Identification and correction of modifiable risk factors can potentially improve the treatment outcomes.

Keywords

Acute limb ischemia, embolism, thrombosis, antithrombotic treatment, comorbidities