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TEMAT ROZPRAWY DOKTORSKIEJ: Ocena sprawności funkcjonalnej i jakości życia w chorobie tętnic obwodowych (PAD) u chorych po rewaskularyzacji

SUMMARY

Introduction

One of the most common causes of peripheral arterial disease (as much as 90%) is generalized atherosclerosis. The main causes of atherosclerosis are: smoking, sedentary lifestyle, diabetes, obesity and hypercholesterolaemia. One of the symptoms of PAD is intermittent claudication. The clinical severity of PAD can be assessed by treadmill walking test which assesses PFWD and MCD. An important test is also the measurement of the ABI index. The basic treatment of advanced atherosclerotic lesions located in the arteries of the lower extremities is revascularization. The aim of the study was to assess the effect of revascularization procedure on the value of ABI index, distance pain-free walking distance (PFWD) and maximal claudication distance (MCD), pain level and quality of life of PAD patients.

Research material and methods

The participants of the study were patients of the Department of Vascular Surgery and Angiology, dr. A. Jurasz University Hospital No. 1 in Bydgoszcz. The study group consisted of 107 patients diagnosed with peripheral arterial disease (82 men and 25 women). The patients were divided into three groups according to the level of arterial obstruction. All participants of the study underwent ABI measurement, quality of life assessment (measured using the WHOQoL-BREF questionnaire and the intermittent claudication questionnaire). In addition, pain-free walking distance and the maximum distance of intermittent claudication were assessed during the treadmill study. Pain was assessed during the walk test using the NRS scale. The above-mentioned examinations were performed 1–5 days before the planned revascularization procedure and 3 months after the surgery.

Results

Statistical analysis showed that the revascularization procedure significantly improved the value of the ABI index on the operated limb by 0.18 on average. The average values of the MCD distance (by an average of 63.4 m) and PFWD (by an average of 25.12 m) have also improved significantly. Pain was significantly reduced in the PFWD study (by an average of 1 point) and in the MCD study (by an average of 1 point). In addition, a significant improvement in the quality of life in the psychological, somatic and environmental spheres has been demonstrated. Significant differences also concern the improvement of the results in the intermittent claudication questionnaire.

Conclusions

The revascularization procedure improves the ankle-brachial index and the quality of life in the following spheres: somatic, psychological, environmental and it also improves the distance of claudication intermittent MCD and PFWD and the results in the intermittent claudication questionnaire, as well as pain reduction.

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Podpis