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ABSTRACT BOOK



Oral Presentation

vascular aneurysm repair may lead to more incidence of type IIIb endoleak in the future.

Conclusions

Incidence of type IIIb endoleak was equivalent to that of type IA endoleak in Japanese multicenter database, suggesting type IIIb endoleak in Dacron stent graft may not be extremely rare and should carefully be observed during the postoperative course after endovascular aneurysm repair. Also, excessive balloon inflation should be avoided to lessen the risk of type IIIb endoleak.

A Comparison of Clinical Outcomes of Two Open Surgical Reconstructions in Patients with Aortoiliac Occlusive Disease: A Retrospective Study from a Single Center

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Objectives

Aortobifemoral bypass (AbFB), aortobiiliac bypass (AbIB), and aortoiliac endarterectomy (AIE) remain effective surgical treatment options in patients with aortoiliac occlusive disease (AIOD). However, recently, endovascular treatment has been used increasingly as an alternative to surgery, with good clinical results. We compared clinical outcomes of bypass grafting and endarterectomy for treatment of AIOD.

Design

This study is a single-center, observational cohort study.

Methods

We studied 27 patients who underwent surgery for AIOD between January 2011 and December 2016 with at least one year of follow-up. AbFB and AbIB were performed in 16 patients (bypass group), whereas AIE was performed in 11 patients (endarterectomy group). Early surgical and long-term outcomes were compared using Fisher's exact test and Student's *t*-test and Kaplan–Meier curves.

Results

The operative time was 346.6 ± 73.4 and 347.5 ± 114.6 min in the bypass and endarterectomy group, respectively ($P = 0.982$). There was no significant difference in the length of stay (14.0 ± 11.4 versus 8.0 ± 2.4 days, $P = 0.099$) and complications within 30 days (3 versus 0, $P = 0.248$). One patient in the bypass group died perioperatively. During follow-up, two reinterventions were performed in the bypass group ($P = 0.499$). Reintervention-free survival rates at five years were 78.1% and 100% in the bypass and endarterectomy groups, respectively ($P = 0.245$).

Conclusions

Although the proportion of endovascular treatment increased and the preference for bypass grafting is high, AIE remains a good option as open surgical treatment in patients with AIOD.

A primary care survey on the prevalence of lower extremity peripheral obstructive arterial disease among diabetics and its effect on quality of life (QOL)

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Background

The prevalence of Peripheral Obstructive Arterial Disease (POAD) is significant among diabetics and contributed significantly towards cardiovascular morbidity. Moreover, it substantially reduce the sufferer's quality of life.

Objective

This cross-sectional study aims to provide a data on the prevalence of POAD among diabetic population in the primary care in Kuantan and its' effects on the QoL. Additionally, we examined for any other associated factors that may have contributed towards the development of POAD.

Methodology

We applied a universal sampling for the purpose of patient selection. POAD is universally defined as ankle-brachial index (ABI) of lower than 0.9. Individuals were assessed on validated Malay version of WHOQOL BREF to assess QoL parameters. P value of <0.05 considered as statistically significant. A favourable opinion was given by Malaysia Ethical Committee (NMRR registration no. 17-1375-35710).

Results

The prevalence of POAD among diabetics at Klinik Kesihatan (General Practitioner) Jaya Gading, Kuantan was found to be 20%. It significantly affected the lower levels of education ($p = 0.016$), older age group ($p = 0.02$) and lower economic class ($p = 0.03$). Their QoL adversely affected evidenced by a lower composite scores in all domains calculated using validated Malay version of WHOQOL BREF questionnaires.

Conclusion



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