



# ASVS2018

# 19th CONGRESS OF ASIAN SOCIETY FOR VASCULAR SURGERY

THE 13<sup>th</sup> ASIAN VENOUS FORUM IN CONJUNCTION WITH 12<sup>th</sup> CHINA SOUTHERN ENDOVASCULAR CONGRESS

Collaboration, Advancement, and Innovation on Treatment of Vascular Diseases in Asia



ANNALS OF VASCULAR DISEASES

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**ABSTRACT BOOK** 



## Speaker's Abstract

Anticardiolipin antibody IgM and aneurysm in atherosclerotic arterial disease Jong Kwon Park, Hyeonseung Kim, Sun Jae Park

Haeundae Paik Hospital, College of Medicine, Inje University

#### July 13 VENOUS ULCER, LYMPHOEDEMA

A Study of Cases with Recurrence After Endovenous Ablation for Varicose Veins TAKAHIRO IMAI

Nishinokvo Hospital

#### **July 13 AORTA 3**

Incidence and risk factors for retrograde type A dissection and stent graft-induced new entry after thoracic endovascular aortic repair

Tao Ma, Zhi Hui Dong, Wei Guo Fu

Department of Vascular Surgery, Zhongshan Hospital, Fudan University, Shanghai 200032, China

Recent evolution in use and effectiveness in mainland China of thoracic endovascular aortic repair of type B aortic dissection

Xiong J

PLA General Hospital, Beijing, China

In situ venous laser fenestration of Stanford type A aortic dissection during thoracic endovascular aortic repair

Jinbao Qina1, Zhen Zhaoa1, Guang Liua1, Xiaobing Liua1, MinyiYina, ChaoyiCuia, Huihua Shia, ZhiyouPenga, RuiHuaWanga, Xinrui Yanga, Min Luab, XintianHuangab, MierJiangab, KaichuangYeab\*, WeiminLiab\*, XinwuLuab\*

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#### July 13 Peripheral Artery Disease 1

The Role of DCB in Korea Practice: LUTONIX 035 DCB Korean Registry 1 year Data Update Prospective, Multicenter, Post-Market Registry Assessing the Clinical Use and Safety of the LUTONIX 035 DCB in Fem-popliteal arteries

Jae Kyu Kim<sup>1</sup>, Sang Young Chung<sup>1,2</sup>, Soo-Jin-Nah Choi<sup>1,2</sup>

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2.Department of Surgery Chonnam National University School of Medicine

#### **July 13 Peripheral Artery Disease 2**

Directional Atherectomy for the Treatment of Common Femoral Artery Disease Ricky Kwok,Fernando Picazo Pineda,Joseph Hockley,Abdulrahman Maher,Marek Garbowski,Shaun Samuelson,Shirley Jansen

Sir Charles Gairdner Hospital

Bidirectional revascularization technique for patients with critical limb ischemia Kyung Yun Kim M.D., Byung Jun So M.D., Seung Jae Byun M.D.

 $Department\ of\ Vascular\ \&\ Endovascular\ Surgery.\ Wonkwang\ University\ Hospital.$ 

#### July 14 Aorta 7: Ruptured AAA

Treatment strategy of aortic rupture in acute type B dissection Seiichi Yamaguchi, Hisanori Fujita, Yusuke Shibata, Shigeyasu Takeuchi

Chiba Emergency Medical Center

### Speaker's Abstract

(13.8%). Median ABI is 0.86 (min 0.74 max 1.24). Correlation analysis result between Wagner's diabetic ulcer classification and lower extremity ischaemia show coeficient correlation for 0.411 with p value = 0.001, indicate that moderate correlation between Wagner's diabetic ulcer classification and lower extremity ischaemia (p<0.05).

#### **CONCLUSION**

There is moderate correlation between Wagner's diabetic ulcer classification and lower extremity ischaemia. The present study demonstrated that the percentage of lower extremity ischemia become greater with an increasing value of Wagner's classification.

#### **Keyword**

Diabetic foot, Wagner's Classification, Ischaemia, Ankle-Brachial Index

Cross sectional quality of life analysis among diabetic foot ulcer patients
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#### **Background**

Foot ulcer is one of the most serious complications associated with diabetes mellitus that could result with a disability and impairment of health related quality of life.

#### **Objectives**

The main objective is to analyse the quality of life (QoL) among diabetic foot ulcer patients. Secondary objective is to identify factors adversely affected QoL in this population.

#### Methodology

Diabetic patients with evidence of diabetic foot ulcer (DFU) attending outpatient orthopaedics and general surgical clinic of Hospital Tengku Ampuan Afzan, Pahang, Malaysia were recruited into this study. A set of validated SF-36 questionnaire was employed to evaluate the health-related quality of life for each patient. Favourable ethical approval obtained from Medical Research and Ethics Committee (NMRR registration no. 17-1520-36332).

#### **Results**

There is a slightly higher proportion of female among the 104 respondents with DFU with a predilection among the lower income group. Majority presented with Wagner stage 2 and 3. More than half underwent amputation previously.

DFU affected physical health worse than the mental health. Increasing age, low socioeconomic status, presence of comorbidities, major amputation, ulcer at the forefoot and wheelchair usage adversely affected the physical health aspects. Interestingly, smoker seems to score better on the mental health aspect of the quality of life.

#### Conclusion

Diabetic foot ulcer affected physical health aspect much more than mental health aspect within the context of the quality of life.

#### Keywords

Diabetic foot ulcer; health-related quality of life

The Effectiveness of Balloon Angioplasty and Stent Angioplasty for Wound Healing in Patients with Critical Limb Ischemia – A Retrospective Analysis in Single Center Experienced Muhammad Wisnu Pamungkas<sup>1</sup>,Patrianef Darwis<sup>2</sup>

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#### Introduction

Critical limb ischemia (CLI) is a vascular disease that has a significant amputation and mortality risk with diabetes mellitus, the most significant risk factor in CLI, is very common among Indonesian. Endovascular intervention (EVI) is preferred in treating CLI because it is non invasive and effective. Balloon angioplasty and stent angioplasty are the most common method of EVI in Indonesia. This study aims to compare the effectiveness of balloon angioplasty and stent angioplasty on wound healing in CLI.

#### Method

A cross sectional study enrolled 90 subjects of C LI who underwent endovascular intervention usi ng balloon angioplasty and stent angioplasty from January 2013 to July 2017 in dr.Cipto Mangunk usumo General Hospital, Jakarta. The wound he aling period between balloon angioplasty and stent angioplasty were analyzed using unpaired T-test with p<0,05 considered as statistically signific ant. Data of intervention method, wound healing period, and subjects characteristic data (age, amputation, BMI, smoking habit, DM, occlusion site, and blood profile) were obtained.

#### Result

The wound healing period in balloon angioplasty and stent angioplasty distributed normally. Mean value of wound healing period in balloon angioplasty and stent angioplasty is 84,8±2,423 and 59,93±2,423 days with mean difference of 25 days. The difference of wound healing period in



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