Reduced patency rate after revascularization for peripheral arterial occlusive disease in patients with chronic kidney disease

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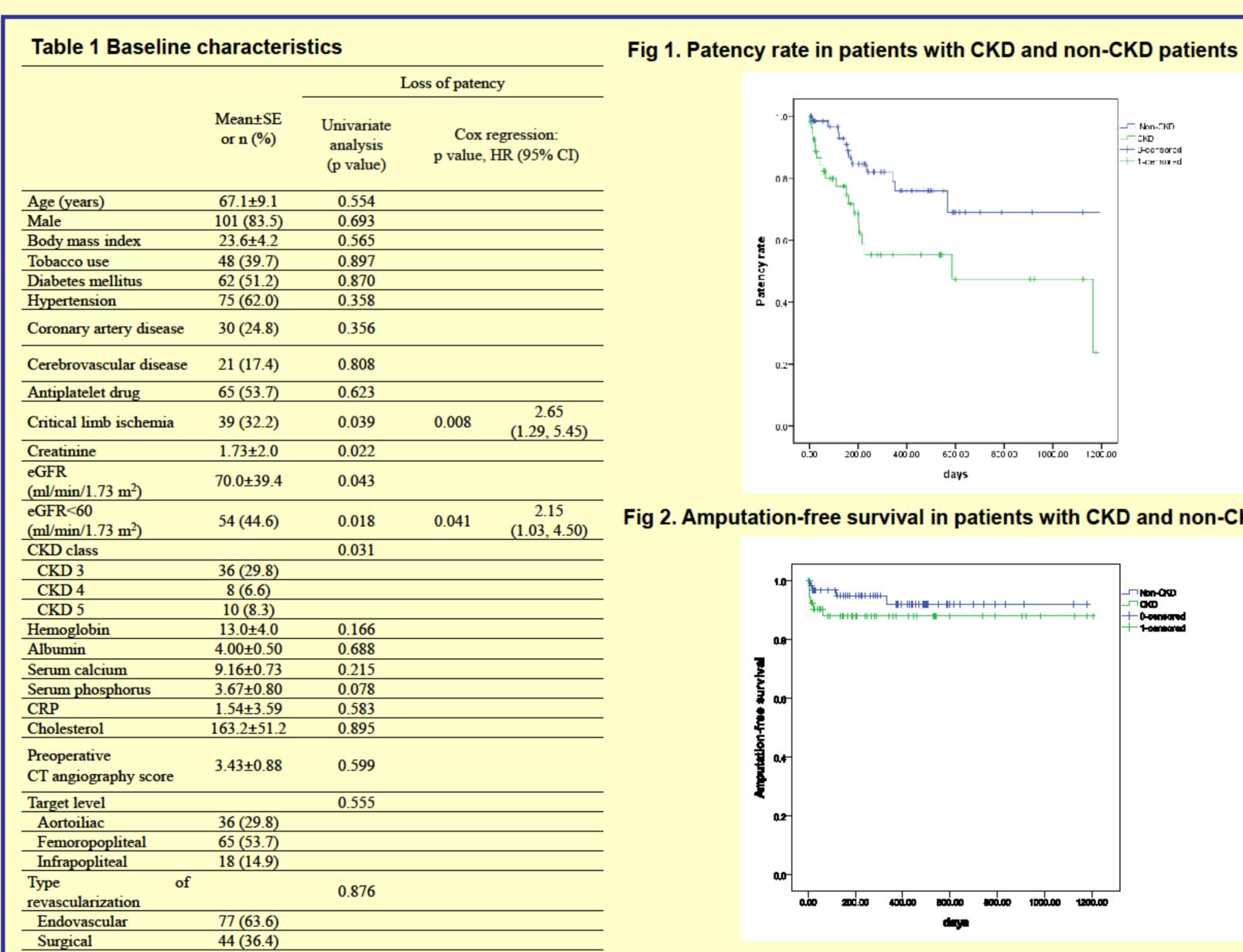
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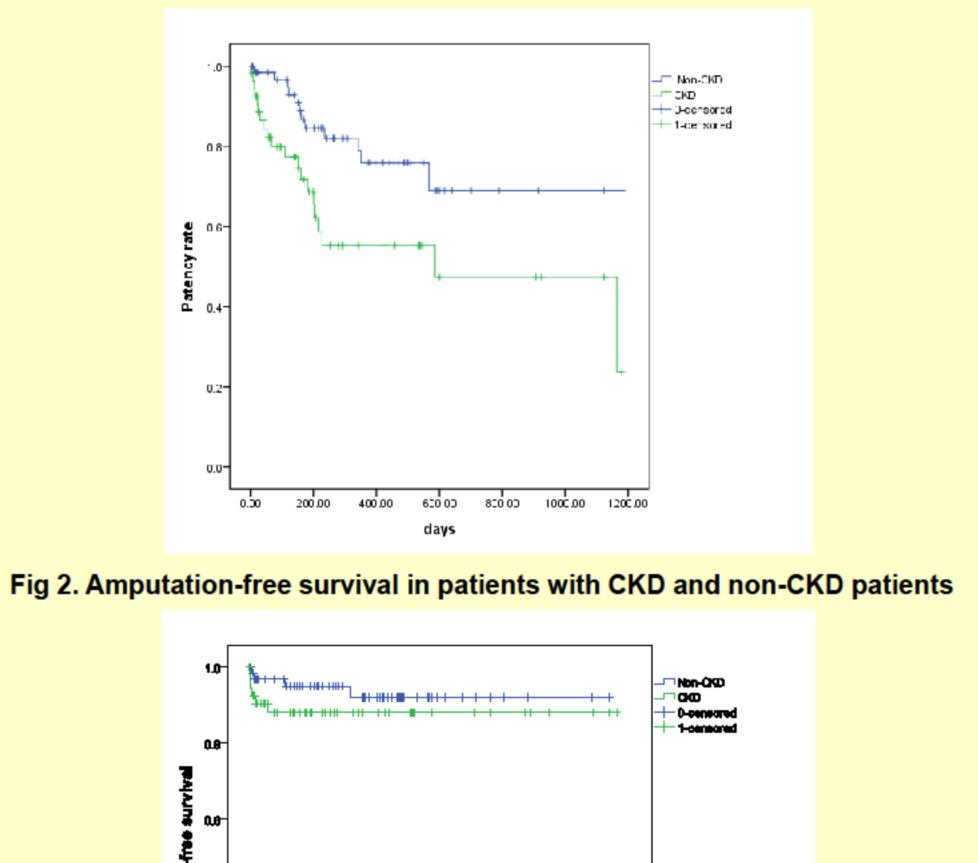
OBJECTIVES

METHODS

Peripheral arterial occlusive disease (PAOD) is more prevalent among patients with chronic kidney disease (CKD) than in general population. Recent data indicate favorable results after revascularization for PAOD, however it is unclear whether it would be also significantly effective to CKD patients. This study aimed to evaluate the potential outcomes of revascularization for PAOD in CKD patients.

We retrospectively evaluated 121 patients who underwent revascularization for PAOD between 2008 and 2012. Patients were categorized into two groups: CKD group (eGFR < 60ml/min/1.73 m²) and control group (eGFR ≥ 60 ml/min/1.73 m²). Preoperative and postoperative assessments of stenosis were quantified by CT angiography (CTA). Postoperative loss of patency was defined as an occlusion or >50% stenosis. Also, hemodynamic parameters (decrease in ankle-brachial index of >0.2, or loss of palpable pulse) or clinical parameters (recurrence of claudication, failure of wound healing or need for amputation of critical limb ischemia) were used as surrogates for patency assessment.





RESULTS

CKD group (n=54) suffered reduced patency rate compared with control group (n= 67) (68±7 vs. 84±5% at 6 months, 55±8 vs. 76±6% at 12 months after respectively, revascularization p < 0.01). amputation-free survival rate showed the tendency to decrease in CKD group (88 \pm 4% vs. 92 \pm 4%, p=NS). Critical limb ischemia and eGFR < 60ml/min/1.73 m² were significant predictors of loss of patency after revascularization of PAOD in CKD patients (HR=2.65, 95% CI: 1.29-5.45; P<0.01, HR=2.15, 95% CI: 1.03-4.50; P < 0.05, respectively).

CONCLUSIONS

Patients with CKD showed significantly lower patency rates after revascularization for PAOD. The presence of critical limb ischemia and chronic kidney disease (eGFR < 60ml/min/1.73 m²) could be used to identify the patients who are at risk for reduced patency rate after revascularization.

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