

Acute coronary syndrome at patient with periferal artery disease and DM type 2 - Case report

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Introduction

Acute coronary syndrome include: non-stabile angina pectoris, ST-elevation myocardial infarction and non-ST elevation myocardial infarction. It is associated with elevated serum levels of myocardial enzymes: troponin, total creatine phosphokinase, the myocardial isoenzyme of CK, aspartate aminotransferase and lactate dehydrogenase. One of the diagnostic parameter of ACSy is rise of cardiac enzymes in the blood.

Periferal artery disease is most often caused by atherosclerosis, a plaque formation in arteries that suply blood to the extremities such as legs and arms. When these fatty deposits collect in arteries it narrows the opening and blocks effective blood flow.

Type 2 diabetes mellitus constitutes a prevalent and significant public health concern in the context of an aging society, particularly when disease management is suboptimal. Amnog individuals with T2DM the risk of developing PAD and ACSy is higher compared to non-diabetic individuals.

Diabetic patients with stable blood glucose control and good managing of other risk factors are important in preventing these complications.

Case Report

We present a case of 71 year old male patient who came to Internal department in Clinical Hospital Stip with chest pain, hypotension and history of ongoing tobacco smoking more than 50 years.

St.post Primary PCI/Stenting to LAD,2019, St.post femoro-popliteal bypass lat.sin,2022, DM typ 2 with elevated HBA1C(8,4%), FPG=15,8, GFR(51 ml/min) and dyslipidemia.

His laboratory findings showed significantly higher levels of troponin, CK, AST and LDH, urgent hospitalization and coronary angiography was performed at Cardiology Department.

The final result was two DES to right coronary artery. The endocrinologist modified his insulinotherapy and added SGLT inhibitor.

Conclusions

It is important to understand the connection between diabtes, ACSy and PAD, to recognize the high risk profiles and to lower risk for both conditions.



Key words:

Acute coronary syndrom,
periferal artery disease,
diabetes mellitus typ 2