## Chesnokova A. V., Pototskaya L. A., Minakova Yu. V., Ryzhova T. S. RISK FACTORS IN THE DEVELOPMENT OF OBLITERATING ATHEROSCLEROSIS OF THE LOWER EXTREMITIES

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**Objective**. Obliterating atherosclerosis of the lower extremities is a chronic vascular disease that develops according to the cause of lipid disorders. The mortality from this disease in Russia is very high, which requires additional improvements in diagnosis, treatment and prevention.

**Aim:** To determine the various risk factors for obliterating atherosclerosis of the lower extremities.

**Materials and methods.** The work was performed on the example of 25 clinical cases in conditions of the day hospital of the Polyclinic No. 1 of the City Clinical Hospital No. 7 of the city of Tver.

**Results and discussion.** The most significant risk factors for obliterating atherosclerosis of the lower extremities are non-modifiable and modifiable. Unmodified risk factors include age, gender, heredity. As a result of the study, the average age of the patients was 68.16 (men - 67.1, women - 71). The disease prevails in male patients - 72% (18 people); 7 female patients - 18%. In women, the later development of atherosclerosis is explained by the protective effect of estrogen. 6 patients (24%) have a genetic predisposition.

Modifiable risk factors for obliterating atherosclerosis of the lower extremities include smoking, obesity, unbalanced diet, coronary heart disease, arterial hypertension, diabetes mellitus. In this study, 5 patients (20%) among all men smoke, 18 people(72%) are non-smoking. Among women, this factor is absent. Obesity was detected in 18 patients (72%), only 7 patients have normal physique (18%). It should be noted that obesity, being an independent risk factor, promotes the development and progression of arterial hypertension, diabetes mellitus, which, in turn, are concomitant diseases of atherosclerosis.

Separately, it is necessary to consider such a concomitant disease as diabetes. In this study, 11 patients (44%) suffer from diabetes mellitus. In diabetes mellitus, atherosclerosis is much more aggressive, while the frequency of critically dangerous ischemia is higher compared to regular patients.

In this study, arterial hypertension was observed in 14 patients (56%), 11 patients (44%) have normal blood pressure. This risk factor increases the development of obliterative atherosclerosis of the lower extremities in elderly patients.

Early detection of the disease and timely treatment are important. Effective prophylaxis is considered therapy with antihypertensive drugs, changing lifestyle and achievement of normal blood pressure targets. As a result of the study 20 patients (80%) suffer from coronary artery disease. 14 patients (56%) do not follow their diet.

**Conclusion.** Atherosclerosis is a multifactorial disease. The greater the number of risk factors simultaneously affecting the human body, the higher the likelihood of developing obliterating atherosclerosis of the vessels of the lower extremities. Ignoring the initial signs of this disease leads to the development of its severe form, which already requires direct surgical intervention, because this condition threatens the immediate life of the patient. For this reason, the treatment of this disease is important to start at the initial stage, without waiting for complications and the inevitable operations.