



# 6<sup>TH</sup> MACEDONIAN CONGRESS of CARDIOLOGY

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## **ЗБОРНИК НА АПСТРАКТИ ABSTRACT BOOK**



**ШЕСТИ КОНГРЕС НА  
МАКЕДОНСКОТО ЗДРУЖЕНИЕ  
ПО КАРДИОЛОГИЈА СО  
МЕЃУНАРОДНО УЧЕСТВО**

**SIXTH CONGRESS OF THE  
MACEDONIAN SOCIETY  
OF CARDIOLOGY WITH  
INTERNATIONAL PARTICIPATION**

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**МОДЕРИРАНИ ПОСТЕР ПРЕЗЕНТАЦИИ  
MODERATED POSTER PRESENTATION**

**КОРОНАРНА АРТЕРИСКА БОЛЕСТ И ИНТЕРВЕНТНИ  
ПРОЦЕДУРИ: ПЕРИФЕРНА ВАСКУЛАРНА БОЛЕСТ И  
ТРОМБОЕМБОЛИЗАМ; ВРОДЕНИ И ВАЛВУЛАРНИ СРЦЕВИ  
МАНИ; СРЦЕВА СЛАБОСТ**

**CORONARY ARTERY DISEASES AND INTERVENTIONAL  
PROCEDURES; PERIPHERAL ARTERY DISEASES AND  
TROMBOEMBOLIZAM; CONGENITAL AND VALVULAR HEART  
DISEASE AND HEART FAILURE**

**PO1. Association of biomarkers of oxidative stress, stress glycaemia and glycated hemoglobin with acute coronary syndrome**

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**Introduction:** Oxidative stress produced by free radicals has been linked to the development of several diseases, including the coronary artery disease. Assessment of oxidative stress markers could modify prevention, risk stratification and treatment of patients with coronary artery disease. **The aim of our study** was to comparatively evaluate association between biomarkers of oxidative stress, stress glycaemia and HgbA1c in patients with coronary artery disease.

**Methods.** Cross-sectional observational study performed in patients treated for coronary artery disease (CAD). Patients were evaluated for their demographics, clinical data, lipoprotein and glycaemic profile and oxidative stress biomarkers: malondialdehyde (MDA) and hydroperoxide (HP), and antioxidant enzymes: superoxide dismutase (SOD), CATALASE and glutathione peroxidase (GPS). Patients were divided in two groups: patients with acute coronary syndrome (ACS) and chronic coronary artery disease (HCAD), and then subdivided, ACS patients in: STEMI, NSTEMI and USA, HCAD in: asymptomatic CAD, revascularised and post MI patients. We also had comparator group of healthy volunteers.

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**Results.** 300 patients included, 194(64.7%) males and 106(36.3%) females, mean age  $62.9 \pm 11.2$  years. ( $p=ns$  for age difference). 187 (62.3%) were ACS (three subgroups: STEMI, NSTEMI and UAP), and 113 (37.7%) HCAD. No statistically significant difference in the risk profile between the groups was observed. Patients with CAD had significantly higher pro-oxidative and significantly lower anti-oxidative biomarkers levels, as compared with healthy volunteers. Statistically significant differences were observed for HP and SOD between ACS and HCAD group. In HCAD group revascularized patients experienced higher oxidative stress as compared to stable post MI patients. Among ACS patients there were statistically significant intergroup difference but not pointing to the single type of ACS. ACS patients had also higher levels of stress glycaemia and HgbA1c. Significant positive correlation was found for HgbA1c and stress glycaemia with MDA ( $r=,154^{**}$ ,  $p=0,008$ ;  $r=,254^{**}$ ,  $p=0,024$  respectively). **Conclusion.** Markers of oxidative stress were significantly higher, and antioxidative activity significantly lower in comparison to healthy volunteers, between ACS and HCAD patients for HP and SOD, while inside the groups, revascularised HCAD patients were with the highest pro-oxidative and lowest anti-oxidative activity, while in ACS patients although there were significant intergroup differences in biomarkers of oxidative stress there were no specifics as a function of STEMI, NSTEMI or UAP.

## PO2. Трансрадијален пристап во третманот на повеќесадовна артериска болест кај млад пациент

**Х. Пејков, О. Калпак, Ж. Зимбаков, И. Спировски, О. Бушлетиќ, М. Бошев, Ј. Костов, Д. Китановски, И. Бојовски, М. Бушева, И. Василев**

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Да се прикаже бенефитот и сигурноста од перкутани коронарни интервенции кај млади пациенти со повеќесадовна коронарна болест со трансрадијален пристап. Пациентот е 34 години, кој беше примен на нашата клиника поради градна болка при напор. Во минати заболувања негира болести од интерес. Фамилиарна анамнеза позитивна, Татко со коронарна артериска болест и ЦАБГ кој после 5 години починал. Направен КСТ кој во 5 минути прекинат поради градна болка и СТ сегмент депресија во V4-V6 од 2 мм. Хокардиографијата покажува уредна кинетика на лева комора со ЕФ 65% и присутна митрална инсуфициенција од 2 степени. Наредниот ден е направена коронарографија со наод за ЛАД

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преку транс  
општа состо  
ишемија.

## PO3. Spontaneous

**E. Grueva M  
Z. Petrovski,  
University Clin**

### Introduction

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prevalence of  
previously no  
women with  
a typical chest  
ECG: ST segm  
and precordial  
pLAD stenosis  
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and IVS. Tre  
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(LIMA-LAD) v  
with echocardi  
-16.8%. **Discu**  
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not iatrogenic  
a false lumen  
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SCAD. Preval  
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