RESULTS An old woman with hypertension severe ischemic cardiopathy (previous percutaneous coronary intervention with stent implantation), and Type II diabetes mellitus, who presented with two chronic ischemic ulcers in left leg and foot due to Super implantation), and Type II diabetes mellitus, who presented with two

Endovascular treatment applied to femoro-popliteal Type C&D lesions has dretreatment. New rising approaches and devices might further expand endovascular possibilities towards TASC C&D, which may make a strategy of angioplasty first be appropriate. achieved promising results, in spite of TASC II recommendation that surgery is the preferred.

GW26-e1562 Effects of Angiotensin blockers on marfan syndrome: a meta-analysis of randomized controlled trials
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OBJECTIVES To evaluate the efficacy of angiotensin blockers (ABs) in patients with Marfan syndrome (MFS).

METHODS We systematically searched Pubmed, Embase, Web of Science, and Cochrane Library of clinical trials databases from inception to December 31, 2014 to identify all randomized controlled trials (RCTs) evaluating the effects of ABs including angiotensin receptor blockers and angiotensin-converting enzyme inhibitors on MFS. The primary outcome was change in the diameter of the aortic root. Secondary outcomes were elective aortic surgery and combined adverse events (CAEs) including aortic dissection or rupture incidence and death.

RESULTS We included 5 RCTs with a total of 904 MFS patients. The 5 trials of ABs therapy had 455 patients: 10 (2.2%) receiving perindopril, 449 (98.8%) receiving losartan (4 studies); the control group of 449 patients were receiving the placebo (2 studies) or beta-blockers (3 studies). When data were pooled across the 5 included RCTs, the ABs was superior to control in reducing the aortic root dilatation (MD -1.5, 95%CI -2.39 to -0.62). And we found that there was no significant difference in CAEs and elective aortic surgery between the 2 groups (OR 1.66, 95%CI 0.33 to 8.45; OR 1.59, 95%CI 0.86 to 2.94, respectively).

CONCLUSIONS ABs treatment reduces aortic root dilatation rate in patients with MFS. However, treatment with ABs could not prevent attainment of important clinical end points including death, aortic rupture or dissection, and elective surgery.

GW26-e2286 MRI tissue perfusion evaluation in patients with chronic limb ischemia compared with healthy subjects.
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OBJECTIVES The prevalence of chronic limb ischemia ranges from 3 up to 10%. As the main cause of non-traumatic amputations, peripheral artery disease (PAD) leads to a working age population decrease. This is a serious social problem which causes the urgent need to improve the diagnostic approaches. Nowadays there is a great need to develop the new methods for a sensitive and specific assessment of a skeletal muscle perfusion. Magnetic-resonance imaging (MRI) provides a non-invasive tissue perfusion evaluation.

METHODS A total of 43 subjects were studied. 35 PAD patients with claudication symptoms and an anec-chrachial index (ABI) 0.3-0.8 and 8 healthy volunteers. All performed supine plantar flexion of the foot in a 1.5T MRI scanner for 5 minutes or until limiting symptoms with intravenous gadolinium-based contrast media administration (GdDPA). Peak tissue perfusion (TP) was measured by placing a region of interest in the region of a tibialis anterior muscle. Time-intensity curve of TP was generated using Siemens Mean Curve Software. TP level was evaluated in relative values.