

## ATHEROSCLEROTIC RENOVASCULAR DISEASE IN ELDERLY DIABETICS

THESIS
SUBMITTED IN PARTIAL TUTFILEMENT QF
MASTER DEGREE IN GENERAL MEDICINE

BY
DEWAEL ABDEL-HAMEED ABDEL-HAMEED EL-GANAINY
NEB CH

supervised by

PROF. DR. ADEL MOHAMMED AFIFY
PROF. OF INTERNAL MEDICINE
FACULTY OF MEDICINE AIN-SHAMS UNIVERSITY

DR. AHMED ABDEL KADER AHMED

ASS PROF OF INTERNAL MEDICINE
FACULTY OF MEDICINE AIN-SHAMS UNIVERSITY

ASS PROF OF INTERVENTION RADIOLOGY FACULTY OF MEDICINE AIN-SHAMS UNIVERSITY

FACULTY OF MEDICINE AIN-SHAMS UNIVERSITY 1999 بسمالله الرعيد الرعيم " و قتل رب أدخلني مدخل صدق و أخرجني مغرج صدق و إجمل لي من لدنك سلطانا نصيرا " سة الله المغيم

سورة الأسراء آية ٨٠



## Acknowledgement

I wish to express my deepest gratitude and thanks to Prof. Dr. ADEL MOHAMMED AFIFY Professor of internal medicine Ain Shams University, under whose supervision this work has been carried out. His helpful advice and constructive criticism are greatly acknowledged and deeply appreciated.

I would like to express my deepest gratitude and appreciation for the support, advice, encouragement and enlightening remarks which I received from Prof. Dr. AHMED ABDEL KADER AHMED Assistant Professor of Internal medicine, Ain-Shams University

I would like to thank Professor Dr. WAHED HUSSEIN TANTAWY, Ass. Prof. Of Intervention radiology, Ain-Shams University for his close supervision, his helpful discussion, his continuous guidance and encouragement.

## CONTENTS

	PAGE
A-Part I ( Review of Literature )	
- Introduction and aim of work	15
- Diabetes mellitus (definition, classification, actiology	
And diagnosis)	25
- Chronic complications of diabetes mellitus	55
4 Anatomy of renal vessels	101
Atherosclerotic renovascular disease	109
Duplex and renal disease.	133
B-Part II (Practical part)	
- Patients and Method	161
- Results	165
- Discussion	195
- Summary	205
-Conclusion and Recommendations	207
- References	213
- Arabic summary	

## LIST OF TABLES

	PAGES
1 Subclassification of IDDM	29
2 Difference between IDDM and NIDDM	31
3 Difference between diabetic and non-diabetic	
peripheral vascular disease	90
4 Actiology of renovascular hypertension	113
5 All subjects data	167
6. Relation between age and renal artery stenosis.	184
7. Relation between sex and renal artery stenosis.	185
8. Relation between smoking and renal artery stenosis	185
9. Relation between diabetes mellitus and	
renal artery stenosis	186
10.Relation between duration of diabetes mellitus	
and renal artery stenosis	187
11. Relation between ischemic heart disease	
and renal artery stenosis.	188
12. Relation between cerebrovascular disease	
and renal artery stenosis.	188
13. Relation between peripheral vascular disease	
and renal artery stenosis.	189

14.Relation between systolic blood pressure	
and renal artery stenosis.	189
15 Relation between diastolic blood pressure	
and renal artery stenosis.	190
16.Relation between duration of hypertension	
and renal artery stenosis.	191
17.Relation between serum creatinine	
and renal artery stenosis.	191
18.Relation between creatinine clearance	
and renal artery stenosis.	192
19.Relation between serum cholesterol	
and renal artery stenosis.	193
20.Relation between serum triglycerides	
and renal artery stenosis.	193

#### ABBREVIATIONS

CABG coronary artery bypass graft coronary artery disease

CHOL cholesterol creatinine

Cr d creatinine clearance Cw continuous flow doppler

DIA diastolic

ECM extracellular matrix
ESRD end stage renal disease
GAD glutamic acid decarboxylase
GFR glomerular filtration rate

HTN hypertension

IAA insulin autoantibodies ICA islet cell antibodies

ICSA islet cell surface antibodies

IDDM insulin dependent diabetes mellitus

IHD impaired glucose tolerance ischemic heart disease impocardial infarction

MODY maturity onset diabetes in the young NIDDM non- insulin dependent diabetes mellitus

OGTT oral glucose tolerance test

PAS periodic acid schiff
PRA plasma renin activity
PSV peak systolic velocity
PVD peripheral vascular disease

RAR renal aortic ratio

SYS systolic TG triglycrides

TIN tubulointerstitial nephropathy

## INTRODUCTION

#### INTRODUCTION

#### INTRODUCTION

Renal disease is a major cause of morbidity in patients with diabetes and become the leading cause of chronic renal failure in industrial countries, end-stage renal disease occurs in up to 30% of insulin dependent diabetes mellitus (IDDM) patients and accounts for 20% of deaths in patients under the age of 40 years

(Soldo et al., 1997)

The renal changes associated with diabetes are complex ranging from early hyperfiltration with increased glomerular filtration rate to late nephrosclerosis and fibrosis with azotemia

(Joel et al., 1994)

The risk of renal artery stenosis is greater in diabetics especially non-insulin dependent diabetes mellitus.

(Sawicki et al., 1991).

#### INTRODUCTION

Atherosclerotic renovascular disease is an increas important cause of renal failure.

(Connolly et al., 1994).

The prevalence of renal artery stenosis in dia patients is unknown since no non-invasive and valid screen procedures are available.

(Sawicki et al., 1991).

Arteriography has been the gold standard for deterenal artery stenosis, although it allows direct visualization the renal artery, it is invasive, risky and expensive.

(Jeffrey et al., 1995).

Duplex ultrasound scanning of the renal arteries ideal screening test because it is non-invasive and can protect the presence or absence of renal artery stenosis with a degree of accuracy.

(Jeffrey et al., 1995).

16

66076

# **AIM OF THE WORK**

#### AIM OF WORK

### AIM OF THE WORK

The aim of this work is to study the prevalence of atherosclerotic disease of the renal artery in elderly diabetic patients by non-invasive duplex scan and its relation to atherosclerotic vascular disease in these patients.

# REVIEW OF LITERATURE

## DIABETES MELLITUS

-DEFINITION
-CLASSIFICATION
-AETIOLOGY
-DIAGNOSIS