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The importance of inflammation parameters for the annual prognosis of complications after angioplasty in patients with stable angina and diabetes

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Purpose: To perform. prospective comparative analysis of lipid profiles and markers of inflammation and endothelial dysfunction in groups of CAD patients with and without DM.

Methods: 116 patients aged 62.5±6.7 years with CAD and stable angina were divided into two groups:. group included patients with CAD (n=63) and II group. CAD patients with type. DM (n=53). Selective coronary angiography showed signs of significant coronary stenosis in all patients (>75%). All angioplasty patients was conducted.

Results: Serum laboratory tests were performed during the course of standard therapy at baseline and in 12±2.4 months of observation. At baseline, patients of II group had significantly increased atherogenic indices of the lipid profile (total cholesterol, LDL, apolipoprotein B) and flammation markers (high-sensitivity C-reactive protein, homocysteine, interleukin-1β) compared to. group. Group. had higher levels of soluble CD40 ligand (CD40L). In II group patients with CAD and DM had more numerous and highly significant interrelations between atherogenic lipid fractions (lipoprotein (a), LDL), inflammatory markers (high-sensitivity C-reactive protein, homocysteine, interleukins, tumor necrosis factor-α), endothelial functional activity indices (endothelin-1), thrombogenic factors (soluble CD40L), and glycated hemoglobin.. prospective observational study showed the absence of significant positive changes in the lipid profile and the preserved prolonged inflammation response as indicated by interleukin-1β, high-sensitivity C-reactive protein, homocysteine, matrix metalloproteinases and the presence of disorders in the endothelin system in both groups of patients.

Conclusion: The study showed that long-term endothelial inflammation is the initiating factor of destabilization of the atherosclerotic process is more pronounced in patients with coronary heart disease and diabetes.

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Randomized controlled clinical trial open to 24 weeks of efficiency and safety in outpatient with obesity grade. and II treated with clobenzorex vs clobenzorex with melatonin

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Obesity is disease characterized by the excess of adiposite tissue (fat) in the body. Such disease is determined when in an adult persons there is Body Mass Index (BMI by the acronym in English) is equal or higher than 30 kg/m2.

Purpose: To evaluate the efficacy and safety of Clobenzorex 60 mg/ Melatonin 3mg (morning or night) against to Clobenzorex 60 mg in Mexicans with exogenous obesity during 24 weeks. It was. longitudinal, prospective and comparative study. This study was conducted under 180 exogenous obese patients, to which was administered: (i) Treatment "A" (Clobenzorex 60 mg/ Melatonin 3mg. capsule VO, morning), (ii) Treatment "B" (Clobenzorex 60 mg. capsule VO Melatonin 3mg one night); or (iii) Treatment "C" (60 mg. capsule Clobenzorex VO, am). Efficacy was evaluated by (i) weight loss (kg); (ii) BMI; (iii) Waist-to-Hip Ratio (WHR by the acronym in English); and (iv) percentage of body fat. In the other hand safety was evaluated by recording adverse events occurred.

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