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ANKLE BRACHIAL INDEX IN PERIPHERAL VASCULAR DISEASE IN DIABETES MELLITUS

Sir,

I read with interest the paper on 'Ankle Brachial Index in Peripheral Vascular Disease in Diabetes Mellitus' by Raman *et al* JAPI 1997; 45 : 440-2 and also the editorial by Muralidharan JAPI 1997; 45 : 431-3 on 'Peripheral Vascular Disease in Diabetes Mellitus' in the same journal. Both these articles have over-looked an important point about the prevalence of PVD being low in Indians and also some important Indian references in this field. We have reported on the prevalence of peripheral vascular disease in a large study based on 4941 consecutive NIDDM patients seen at the MV Diabetes Specialities Centre, Chennai, and the results were published in an international journal.¹

The overall prevalence of PVD in our patients is 3.9% and even after 20 years duration of diabetes the prevalence of PVD was only 8% in our study compared to 42% among Europeans in the series by Palumbo *et al*.²

Our data confirms earlier clinical observations that PVD is less common among Indian diabetics both in India and abroad. The low prevalence of peripheral vascular disease contrasts sharply with the high prevalence of Coronary artery disease (CAD) which has been reported among Indian in India and abroad. The reason why one form of macroangiopathy should be less common and the other more common remains unclear but this is reminiscent of the situation in Japan, where coronary artery disease is less common but strokes very frequent. This obviously points to different risk factors for CAD, compared to PVD or strokes.

In a recent epidemiological study³ involving over 1000 individuals from different socioeconomic strata of Chennai we have confirmed that our earlier observations based on clinic based findings are true even in our population based studies and that while CAD prevalence is very high, both PVD and strokes are strikingly less common in the S. Indian population studied by us.

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