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BACKGROUND AND PURPOSE: Cardiovascular complications are high in the diabetic patients. Especially, acute coronary heart diseases (CHD) can be prevented by use of antiplatelet agents. This study was to determine the efficacy of antiplatelet therapy on prevention of cardiovascular events in diabetic patients.
METHODS: The medical charts of 132 diabetic patients at Hanyang University, Kuri Hospital from January 1996 to January 2000 were reviewed retrospectively. Patients were evaluated as four main groups in primary prevention group (with antiplatelet or without antiplatelet agents) and secondary prevention group (with or without antiplatelet agents). We compared the efficacy of antiplatelet agents on the prevention of cardiovascular events, which include acute MI, CHD death, and stroke, between the groups. We also evaluated the time to recurrence of CHD in the secondary prevention group and the effect of concurrent diseases on the efficacy of antiplatelet agents.
RESULTS: The percentages of cardiovascular events between patients with vs. without antiplatelet therapy were: (a) 7.4%(5/67) vs. 9.5%(2/21) in the primary prevention group, (b) 19.4%(7/36) vs 37.5%(3/8) in the secondary prevention group. The rates of each cardiovascular event in the secondary prevention group were: (a) AMI in 20.8%(5/24) vs. 100%(1/1), (b) Stroke/TIA 18%(2/11) vs. 100%(1/1), (c) 14%(1/7) vs. no patients in others between with vs. without antiplatelet therapy. Concomitant diseases have had the effect to increase the cardiovascular events. Cilostazol and aspirin were the mostly used antiplatelet agents and their efficacy was similar.
CONCLUSION: Prevention of cardiovascular events with antiplatelet agents in diabetic patients was effective particularly in secondary prevention group. Intensive antiplatelet therapy and monitoring was required because cardiovascular events continuously recurred even on antiplatelet therapy.

[PF1-7] [ 10/18/2002 (Fri) 13:30 - 16:30 / Hall C ]

## Clinical Effects of Gemcitabine/5-FU Theraphy vs. Epirubicin/Cisplatin/5-FU in Pancreatic Cancer

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Gemcitabine demonstrated modest activity in locally advanced and metastatic pancreatic cancer with difficulty early diagnosis and poor prognisis. The purpose of this study was to evaluate the efficacy and toxicity of gemcitabine and 5-fluorouracil(GF) combination theraphy and epirubicin, cisplatin, and 5-fluorouracil(ECF) combination theraphy for the patients with locally advanced or metaststic pancreatic cancer. Between January 1996 and December 2001,Patients with locally advanced or metastatic pancreatic cancer were selected and reviewed retrospectively at Kangnam St. Mary's Hospital. Data collection included patient's baseline characteristics, CT scan, diagnosis date, expire date, prognosis disease appeared date at first,and toxicity. Outcome variables were response to chemotheraphy, overall survival, prognosis free survival and grade of toxicity. From the 16 evaluable patients treated with GF regimen, a 12.5% objective response rate was obtained with median survival time of 7.6 months.The median progression-free survival time was 2.7months in responding group. In the 8 patients treated with ECF regimen, the objective response rate was 12.5% and the median survival time was 5.7months. The median progression-free survival time was 2.6 months in responding group. With regard to toxicity, WHO grade 3 or grade 4 hematologic toxicity was 8.6% of total cycles in GF group and 10.7% in ECF group. WHO grade 3 or garde 4 nonhematologic toxicity was 1.6% of total cycles in GF group and 1.4% in ECF group. In conclusion, GF regimen was longer in median survival time than ECF regimen and was milder in hematologic toxicity in the teratment of patients with locally advanced or metastatic panceratic cancer.

[PF1-8] [ 10/18/2002 (Fri) 13:30 - 16:30 / Hall C ]

## Quality of Life in Pediatric Patients with Mucopolysaccharidosis

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Mucopolysaccharidosis (MPS) is a genetic disorder with deficiency of lysomal enzymes needed for the degradation of glycosaminoglycans(GAGs). This storage disease is characterized by intra-lysosomal