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[P1-338] The Relationship between Sex Hormones, Sex Hormone Binding Globulin and Peripheral Artery Disease in Older Persons

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Peripheral artery disease (PAD) is an important and multi-factorial condition in older individuals. The prevalence of PAD increases with age and concurs to the development of frailty and disability. Fewer investigations have assessed the role of sex hormones and sex hormone binding globulin (SHBG) in PAD(1-2).

Aim of the Study. To test the association between sex hormones, SHBG and lower extremity PAD in the elderly. Methods. 933 older men and women with complete data on SHBG, total testosterone (T) were selected from the InCHIANTI study. SHBG and T were measured using immunoradiometric assay with minimum detectable concentration (MDC) of 3.0 nmol/lt and 0.08 nmol/lt, respectively. The inter- and intraassay CV concentrations were < 3.7, and 11.5 for SHBG and < 9.6 and 9.1, for T. Total Estradiol (E2) was measured using ultrasensitive radioimmunoassay with a MDC of 2.2 pg/mL and intra- and interassay CVs <10%,. The Ankle-Brachial Index (ABI) was measured with a hand-held Doppler stethoscope. PAD was defined as an ABI <0.90 and absence of PAD by ABI > 0.90. Logistic regression models adjusted for age (Model 1),for age, BMI, interleukin-6, physical activity, smoking, hypertension, diabetes, chronic heart failure,HDL-cholesterol (Model 2) and Model 3 including also T, SHBG and total E2 were used to test the association between SHBG, sex hormones (predictors) and PAD (outcome). Results.The mean age \pm SD of the 933 (419 men and 514 women) subjects at baseline was 71.8 \pm 4.9 years (74.2 \pm 6.5 in men and 75.6 \pm 7.0 in women).64 (43 men and 21 women) participants had ABI <0.90 and 869 participants ABI > 0.90. Only in men, SHBG was positively associated with PAD in both Model 1 (OR: 3.24, CI 1.46-7.18, p= 0.0038) and Model 2 (OR 3.58, CI 1.36-9.40, p=0.009), while this relationship did not reach the statistical significance in Model 3 (p=0.06).

Total E2 was not significantly associated with PAD in both men (p=0.68) and women (p=0.21). In women, T was positively associated with PAD, in Model 1 (OR 5.93, CI 1.29-27.11, p=0.02), Model 2 (OR 1.72, CI 0.99-2.97, p=0.053), and this relationship was still significant in Model 3 (OR 2.048, CI 1.13- 3.72, p=0.01). In contrast, in men, T was not independently associated with PAD.

Conclusion

Higher SHBG and T are significantly associated with PAD in older men and women, respectively. Further longitudinal studies are needed to address the role of SHBG and T in the development of PAD in the elderly.

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Presentation Time: 1:30 pm

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