

MEETING ABSTRACT

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Effects of smoking habit and diagnosed COPD on intensive care unit stay length of surgically treated coronary artery and obstructive peripheral arterial disease patients

Ersin Çelik¹, İsmail Yürekli¹, Ufuk Yetkin¹, Habib Çakır^{1*}, Köksal Dönmez¹, Metin Gümüş², Rahika Durusoy², Ali Gürbüz¹

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Background/Introduction

Smoking is one of the most important mortality and morbidity factors.

Aims/Objectives

We examined 868 coronary artery disease and 268 peripheral vascular disease patients who were treated surgically at our clinic between dates January 2007 and December 2010.

Method

Mean age of 868 coronary artery disease patients were $63,86 \pm 11,17$ (between 21-91 years) and 268 peripheral arterial disease patients were $65,44 \pm 10,37$ (between 21-92 years).

Results

There were 47 COPD patients in 868 patients who underwent surgery for coronary artery disease. In addition, 490 patients were active smoker and 378 were not using tobacco products. Mean Intensive care unit stay for COPD patients was 4,81 day and 3,06 day for patients without COPD. This difference was significant ($p < 0.05$). There were 31 COPD patients in 268 patients who underwent surgery for peripheral arterial disease. In this group, 172 patients were active smoker and 96 were not smoking. Mean Intensive care unit stay for

COPD patients was significantly longer in COPD group ($p < 0.05$).

Discussion/Conclusion

We believe that, preoperative smoking cessation and long-term bronchodilator therapy will reduce morbidity rates of our patients in our daily practice.

Consent

Written informed consent was obtained from the patient for publication of this Case report and any accompanying images. A copy of the written consent is available for review by the Editor-in-Chief of this journal.

Authors' details

¹Department of Cardiovascular Surgery, Katip Celebi University Izmir Ataturk Training and Research Hospital, Izmir, Turkey. ²Department of Public Health, Medical Sciences Faculty, Ege University, Bornova, 35040 Bornova/Izmir, Turkey.

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¹Department of Cardiovascular Surgery, Katip Celebi University Izmir Ataturk Training and Research Hospital, Izmir, Turkey

Full list of author information is available at the end of the article