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Carotid Artery Stenosis Associated with Increased Mortality in Patients who Underwent Coronary Artery Bypass Grafting: A Single Center Experience.

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Author information

Abstract

BACKGROUND: Vascular disease resulting from arteriosclerosis is a severe worldwide health risk. Early diagnosis and intervention is important to control adverse cerebral and cardiovascular events. The aim of this study was to assess the potential predictors of mortality in patients submitted to coronary bypass surgery.

METHODS: Cohort study included asymptomatic cerebrovascular disease patients scheduled for coronary artery bypass grafting admitted to the cardiology reference center. All patients were submitted to carotid artery ultrasound assessment prior to surgery and were followed up during the entire in-hospital postoperative period. Carotid artery stenosis was considered clinically significant when cross sectional area $\geq 50\%$. Significance was set at $p < 0.05$. Logistic regression was used to identify independent predictors of mortality.

RESULTS: Of 455 patients with a mean age of 62.2 years 65.6% were males. The prevalence of carotid artery stenosis was 18.7%. It was absent in 3.6% of the patients, below 50% in 77.8%, between 50 and 69% in 11.6%, and between 70 and 99% in 6.9%. The carotid artery was occluded in 0.2% of the sample. An overall mortality of 12%, affecting 35 men ($P=0.001$) with stenosis $\geq 50\%$. After logistic regression analysis, carotid artery stenosis $\geq 50\%$ was confirmed as being an independent predictor of mortality ($P=0.005$).

CONCLUSION: In this series carotid artery stenosis showed a high prevalence in the sample assessed and was an independent predictor of mortality.

KEYWORDS: Carotid arteries; arteriosclerosis; coronary artery pathology; coronary artery bypass grafts; stroke; ultrasound.

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