**PREVALENCE AND PREDICTORS OF CONCOMITANT CAROTID AND CORONARY ARTERY ATHEROSCLEROTIC DISEASE**

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Objectives: The purpose of this research was to evaluate the relationship between coronary and carotid atherosclerotic disease using current guidelines for the definition of carotid artery stenosis (CAS).

Background: The reported prevalence of concomitant coronary and carotid atherosclerotic disease has varied among studies due to differences in study populations and methodologies used.

Methods: We performed a retrospective analysis of prospectively collected data obtained between January 2007 and May 2009 from consecutive patients undergoing same-day coronary angiography and carotid Doppler studies. Spearman correlations and multinomial logistic regression models were used to identify independent correlates of CAS.

Results: The study included 1,405 patients (age 65 ± 11 years, 77.2% male), of whom 12.8% had significant CAS (peak systolic velocity [PSV] >125 cm/s) and 4.6% had severe CAS (PSV >230 cm/s). Mild CAS (PSV <125 cm/s and the presence of a sonographic atherosclerotic lesion) was present in 58%. The severity of CAS and the extent of coronary artery disease (CAD) were significantly correlated (r = 0.255, p < 0.001). Independent predictors of severe CAS defined by PSV were the presence of left-main or 3-vessel CAD, increasing age, a history of stroke, smoking status, and diabetes mellitus.

Conclusions: The degree of internal carotid artery (ICA) stenosis is related to the extent of CAD, though the prevalence of clinically significant ICA stenosis is lower in specific CAD subsets than previously reported.