## Carotid Vascular Strain Predicts Cardiovascular Events in Patients with Hypertension

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## Abstract

Background: We aim to investigate prognostic effects of carotid strain (CS) and strain rate (CSR) in hypertension. Methods: We prospectively recruited 120 patients being treated for hypertension (65.8  $\pm$  11.8 years, 58% male) in this observational study. Peak circumferential CS and peak CSR after ejection were identified using two-dimensional speckle tracking ultrasound. Major cardiovascular events were any admission for stroke, acute coronary syndrome, and heart failure. Results: After a mean follow-up period of 63.6  $\pm$  14.5 months, 14 (12%) patients had cardiovascular events. Age (75.3  $\pm$  9.2 vs. 64.6  $\pm$  11.6 years; p = 0.001), systolic blood pressure (131.8  $\pm$  15.5 vs. 143.1  $\pm$  16.6 mmHg; p = 0.021), diastolic blood pressure (74.6  $\pm$ 11.4 vs. 82.1  $\pm$  12.2 mmHg; p = 0.039), use of diuretics (71 vs. 92 %; p = 0.014), carotid CS (2.17  $\pm$  1.02 vs. 3.28  $\pm$  1.14 %; p = 0.001), and CSR (0.28  $\pm$  0.17 vs. 0.51  $\pm$  0.18 1/s; p <0.001) were significantly different between the patients who did and did not reach the end-points. Multivariate Cox regression analysis controlling for age, systolic blood pressure, diastolic blood pressure, and use of diuretics showed that CS (HR 0.425, 95%CI 0.223-0.811, p = 0.009) and CSR (HR 0.001, 95%CI 0.000-0.072, p = 0.001) were independent predictors for cardiovascular events. Conclusion: In conclusions, decreased CS and CSR were associated with cardiovascular events in hypertension.

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Px of Carotid strain(echocardiography) c table.doc available at https://authorea.com/ users/417358/articles/524490-carotid-vascular-strain-predicts-cardiovascular-eventsin-patients-with-hypertension



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