

Is CHA2DS2-VASc Score Related to Inflammation in Patients With In-Stent Restenosis?

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Samet Yılmaz, MD¹, and Mehmet Kadri Akboga, MD²

We thank Dr Demirtas for his comments¹ about our study.² We demonstrated that the CHA2DS2-VASc (congestive heart failure, hypertension, age 75 years, diabetes mellitus, previous stroke/transient ischemic attack, vascular disease, age 65-74 years, female gender) score could be used as a predictor of in-stent restenosis (ISR) in patients who underwent percutaneous coronary intervention due to stable coronary artery disease.²

It is clearly known that ISR is directly related to inflammatory process.³ Several inflammatory markers can be used to assess the inflammatory status of a patient. In our study,² we found a positive correlation between CHA2DS2-VASc score and C-reactive protein (CRP) levels ($r = .384$, $P < .001$). C-reactive protein is the most widely used inflammatory marker.³ Other than CRP, new markers such as monocyte to high-density lipoprotein cholesterol ratio, lymphocyte to monocyte ratio, serum bilirubin, uric acid, and vitamin D levels have been shown to be related to increased inflammation in patients with coronary artery disease.²⁻⁵

Our aim in our study was to determine the relationship between CHA2DS2-VASc score and ISR. Therefore, we did not provide details about oxidative inflammatory markers other than CRP.

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¹ Pamukkale University Hospital, Cardiology Clinic, Denizli, Turkey

² Turkey Yuksek Ihtisas Education and Research Hospital, Cardiology Clinic, Ankara, Turkey

Corresponding Author:

Samet Yılmaz, Pamukkale University Hospital, Denizli 20100, Turkey.
Email: sametyilmazmd@gmail.com