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**THE ASSOCIATION BETWEEN
MICROALBUMINURIA AND PERIPHERAL
ATHEROSCLEROSIS IN PATIENTS WITH RISK
FACTORS OF CARDIOVASCULAR DISEASES**

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Objective The association of microalbuminuria (MA) between cardiovascular disease (CVD) is increasingly recognised. Limited information is available for the association between MA and peripheral arterial disease (PAD) in patients with risk factors for CVD and with no established CVD. The aim of this study was to explore the associations between MA and PAD in this group of patients.

Methods A total of 277 consecutive patients (153 male and 124 female, mean age 75 (22.5)) were included in this cross-sectional study, who had risk factors for CVD and had no established CVD. Cardiovascular risk factors were assessed. Urinary albumin-to-creatinine ratio (UACR), high sensitive C-reactive protein (hs-CRP), fasting glucose and serum lipids were measured. Patients were divided into MA group (male: $17 \leq \text{UACR} \leq 250$ mg/g; female: $25 \leq \text{UACR} \leq 355$ mg/g) and no MA group (male: $0-17$ mg/g; female: $0-25$ mg/g). Ankle brachial index (ABI) were evaluated, PAD was defined by $\text{ABI} < 0.95$.

Results The incidence of PAD in patients with MA was higher than those without MA, 30.19% and 16.07%, respectively ($p < 0.05$). The systolic blood pressure, carotid intima-media thickness (CIMT), brachial-ankle pulse wave velocity (baPWV) and left ventricular mass index (LVMI) were significantly increased in patients with MA compared to those without MA ($p < 0.05$). The logistic regression analysis showed PAD were significantly associated with MA (OR 2.26, 95% CI 1.14 to 4.49). After adjusting for sex, age, hs-CRP and traditional risk factors of CVD, PAD were still significantly associated with MA (OR 2.52, 95% CI 1.06 to 6.00).

Conclusion Among patients with risk factors of CVD, those with MA have increased risk of PAD. The UACR test should be taken as the routine testing project in patients with risk factors of CVD.