



## Analysis of the Article Correlation Between the Intima-Media Thickness of the Proximal and Distal Common Carotids

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### Dear Editor,

We totally agree with the authors regarding the need to screen the entire extension of the carotid arteries (common, internal and external)<sup>1</sup>. However, we would add the importance of screening them slowly and in the coronal plane, and of measuring the site where the intima-media thickness is visually greater. During the assessment, the coronal view of the vessel allows including the carotid lateral walls, adding accuracy to the examination<sup>2</sup>.

One of our colleagues, in his Master's degree thesis on Echography of the Carotid Arteries, concluded that strictly maintaining the measurement points elected by the American Society of Echocardiography (ASE) causes distortions regarding the maximum intima-media thickness, which can be obtained in each case<sup>2</sup>.

### Keywords

Carotid artery injuries; Diagnostic imaging.

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### References

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### Reply

We thank your comments. It is important to consider that the software currently available is based on epidemiological research and measures only one small arterial segment. For clinical practice, it would be important to have other measuring methods that would assess a greater number of points along the carotid arteries. Three-dimensional ultrasound or another imaging method might be useful if a greater intimal mass to be measured could be determined. Intima-media thickness is a significant surrogate marker for atheromatosis, whose importance in guiding the clinical management of patients has increased. While such

technologies are not fully available, we believe that measuring the carotid intima-media thickness with longitudinal and coronal approaches, as suggested by our colleagues, would be currently ideal to better assess our patients.

Sincerely,

Leonard Hermann Roelke  
Sergio Lamego Rodrigues  
Paulo Andrade Lotufo  
Jose Geraldo Mill