**Effects of Coronary Atherosclerosis on Postoperative Outcomes of Patients Undergoing Knee Arthroscopy: Analysis with Two-Year Minimum Surveillance**

Introduction: Coronary atherosclerosis (CA) and knee arthroscopy (KA) are highly prevalent in the western elderly population. Long-term outcomes in patients undergoing KA are poorly characterized. This study aims to identify the impact of CA on two-year postoperative outcomes following KA surgery.

Methods: The New York Statewide Planning and Research Cooperative System (SPARCS) was queried to identify patients who underwent KA with two-year follow-up. Differences in post-operative outcomes in a cohort diagnosed with CA were compared to a control, controlling for variables such as age, sex, and obesity designation. Univariate and multivariate analyses were utilized to compare demographics and rates of postoperative outcomes, surgical and medical complications, reoperation, readmission, and in-hospital mortality between the two groups.

Results: A cohort of 150 CA and 150 non-CA patients were identified. CA and non-CA patients had comparable ages and sex distributions. From the analyses, it was revealed that CA patients when compared to non-CA patients, had experienced higher rates of medical complications such as pneumonia (p = 0.043), acute renal failure (p = 0.044), and sepsis (p = 0.028) in addition to higher rates of in-hospital mortality (p = 0.050).

Conclusions: CA patients who underwent KA surgery experienced higher rates of medical complications such as pneumonia, acute renal failure, sepsis, and higher likelihood of mortality within 2 years post-operation compared to a control cohort. These findings should be taken into consideration to optimize outcomes in CA patients prior to KA surgery.