INTRODUCTION

Atherosclerosis is chronic progressive disease of aging however acute coronary syndrome represents an acceleration of this chronic process leading to acute changes in patient condition accompanied by serious morbidity & mortality in a relatively short period[1]. Metabolic syndrome (MS) was recently found to be apredictor of cardiovascular risk only when associated significant angiographic CAD (2).

Furthermore, an almost linear relationship seems to exist between the number of criteria of metabolic syndrome and mortality from cardiovascular causes(3).Diabetes mellitus and insulin resistance have already been shown to be independent risk predictors of early restenosis after coronary stenting(4-6).

An early study has been shown the correlation between in-hospital mortality after PCI in both underweight and very obese patients [7]. While there is a common clinical perception that patients with MS have a higher short- and long-term risk after PCI (e.g., access site bleeding and restenosis, respectively (8).