

Vascular Surgery UPDATE



**Cranley Surgical
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**All the Options.
Better Care.**

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PREVENTING STROKE THROUGH CAROTID ENDARTERECTOMY OR CAROTID STENTING

Stroke is the third leading cause of death in the United States and it is the leading cause of severe disability. Every 53 seconds someone has a stroke, every 3.3 minutes someone dies from a stroke. Of the 4.4 million stroke survivors, 29% are younger than 65. One of the more common causes of stroke, carotid artery disease, is preventable and can be treated if it is detected in time. Vascular surgeons help prevent stroke by removing atherosclerosis from the carotid artery, which is one of the major arteries carrying oxygenated blood to the brain.

Primary care physicians are on the forefront of helping patients understand the common risk factors for carotid artery disease. These include hypertension, dyslipidemia, tobacco abuse, known cardiovascular disease and diabetes mellitus. Careful consideration of history and physical examination findings prompt evaluation of the carotid arteries with duplex scanning. Duplex ultrasonography is an excellent screening tool which can direct further care as well as surgical planning.

Vascular surgeons are skilled at interpreting duplex scan results. They review results with the patient taking into account their overall health and surgical risks. If surgery offers the best option, the vascular surgeon can often operate directly from the duplex scan image. This avoids additional risk and discomfort to the patient from an angiogram. It also reduces the overall cost

to the healthcare system. Sometimes, further testing, including angiography is needed before surgery or intervention is contemplated. Since vascular surgeons with endovascular training perform their own angiograms, the patient can be offered all the options, as well as an informed decision. At times the best option is medical management with antiplatelet medications or anticoagulation. Vascular surgeons stay in close contact with primary care physicians, who then manage the patient medically.

Carotid endarterectomy has been the gold standard with a proven track record for symptomatic and asymptomatic patients with significant carotid artery disease. Recently, carotid artery stenting has been introduced as an alternative to surgery. Vascular surgeons are trained in carotid stenting. However, this procedure should be reserved for high-risk patients who may not tolerate carotid endarterectomy because long term outcomes are yet unknown.

There is considerable debate in the definition of high-risk disease and which patients will benefit from carotid artery stenting versus carotid endarterectomy. These answers will be determined by ongoing clinical trials. Vascular surgeons who commonly perform both endarterectomy and stenting have the background to determine which approach will provide the best outcome. All the options. Better Care.

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