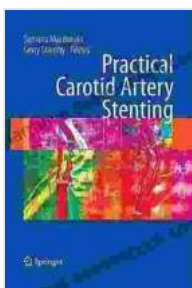


Practical Carotid Artery Stenting



Practical Carotid Artery Stenting by Ronan Hession

★★★★★ 5 out of 5

Language : English
File size : 5275 KB
Text-to-Speech : Enabled
Enhanced typesetting : Enabled
Print length : 469 pages
Screen Reader : Supported



Carotid artery stenting (CAS) is a minimally invasive procedure used to treat carotid artery stenosis, a narrowing of the arteries that supply blood to the brain. CAS involves placing a stent, a small mesh tube, in the carotid artery to widen it and restore blood flow. This procedure is often performed to prevent stroke in patients with significant carotid artery stenosis.

CAS is a relatively new procedure, but it has quickly become the preferred treatment for carotid artery stenosis. CAS is less invasive than traditional carotid endarterectomy (CEA), which involves surgically removing the plaque from the carotid artery. CAS is also associated with a lower risk of complications and a shorter recovery time.

Indications for CAS

CAS is indicated for patients with carotid artery stenosis that is severe enough to cause symptoms or increase the risk of stroke. Symptoms of carotid artery stenosis can include:

- Transient ischemic attack (TIA)
- Stroke
- Amaurosis fugax (temporary loss of vision in one eye)
- Numbness or weakness on one side of the body
- Difficulty speaking or swallowing

The risk of stroke in patients with carotid artery stenosis depends on the severity of the stenosis. Patients with stenosis of 50% or more have a 2-5% annual risk of stroke. The risk of stroke is higher in patients with stenosis of 70% or more.

Contraindications to CAS

CAS is not appropriate for all patients with carotid artery stenosis.

Contraindications to CAS include:

- Recent stroke or TIA
- Uncontrolled hypertension
- Severe heart disease
- Severe kidney disease
- Active infection
- Allergy to contrast dye

Procedure

CAS is typically performed in a hospital setting under general anesthesia.

The procedure takes about 1-2 hours.

During the procedure, the doctor will make a small incision in the neck near the carotid artery. A catheter is then inserted into the artery and guided to the site of the stenosis. The stent is then deployed into the artery and expanded to widen it. The stent is usually made of metal or a combination of metal and fabric.

After the stent is placed, the doctor will close the incision and bandage the area. The patient will be monitored in the hospital for a few hours after the procedure to ensure that there are no complications.

Recovery

Most patients recover quickly from CAS. The patient may experience some bruising and swelling in the neck, but this usually resolves within a few days. The patient may also experience some hoarseness or difficulty swallowing, but this usually improves within a few weeks.

The patient will be able to go home the day after the procedure. The patient will need to take it easy for the first few days and avoid strenuous activity. The patient will also need to take medication to prevent blood clots and reduce the risk of stroke.

Complications

CAS is a relatively safe procedure, but it can be associated with some complications. These complications include:

- Stroke
- Heart attack
- Kidney failure

- Bleeding
- Infection
- Nerve damage
- Death

The risk of these complications is low, but it is important to be aware of them before undergoing the procedure.

Outcomes

CAS is a successful procedure for the treatment of carotid artery stenosis. The procedure is associated with a low risk of complications and a high rate of success. CAS is also associated with a significant reduction in the risk of stroke.

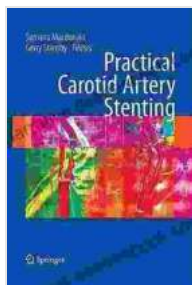
The long-term outcomes of CAS are excellent. Most patients who undergo CAS will remain stroke-free for many years. The procedure can improve the quality of life for patients with carotid artery stenosis by reducing the risk of stroke and its associated complications.

CAS is a minimally invasive procedure that is used to treat carotid artery stenosis. CAS can prevent stroke and improve the quality of life for patients with carotid artery stenosis. The procedure is associated with a low risk of complications and a high rate of success.

Author

Ronan Hession, MD is a leading expert in peripheral vascular intervention. He is a Professor of Surgery at the University of California, San Francisco, and the Director of the Vascular Center at the San Francisco VA Medical

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