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Treatment approaches to the carotid artery diseases

Özgür Altınbaş

Konya Training and Research Hospital, Turkey

Stroke is the third most common cause of death all over the world after ischemic heart disease and cancer. Approximately 30% of the patients die within the first year of having a stroke and another 50% are left disabled (1). Atherosclerotic disease at the carotid bifurcation has been shown to be responsible for greater than 20% to 25% of all strokes (2). A clear separation between symptomatic and asymptomatic carotid artery stenosis is critical. If the patient has transient or permanent focal neurologic symptoms related to the ipsilateral retina or the cerebral hemisphere, is considered to be symptomatic (3). Carotid endarterectomy should be strongly considered for symptomatic patients with 70% to 99% stenosis and should also be considered for symptomatic patients with 50% to 69% stenosis if no other etiologic basis for the ischemic symptoms can be found. Surgery should be recommended only in selected patients with asymptomatic carotid artery stenosis because of the marginal benefit from revascularization in this patient population (4). Prompt evaluation and triage of patients with symptomatic carotid artery stenosis are essential to minimize the risk of early recurrent cerebrovascular events (5). In conclusion, symptomatic carotid artery syndromes need urgent carotid duplex, MRI or DSA evaluation to determine the need for urgent surgery. Those with the greatest degree of stenosis derive the greatest benefit from timely carotid endarterectomy.

Recent Publications

1. Louridas G, Junaid A. Management of carotid artery stenosis. *Can Fam Physician* 2005; 10(7): 984-989
2. Mintz BL, Hobson RW. Diagnosis and treatment of carotid artery stenosis. *JAOA* 2000; 100(11): 22-26
3. Lanzino G, Rabinstein AA, Brown RD. Treatment of carotid artery stenosis: Medical therapy, surgery, or stenting? *Mayo Clin Proc* 2009; 84(4): 362-368
4. Hobson RW et al. Management of atherosclerotic carotid artery disease: Clinical practice guidelines of the Society for Vascular Surgery. *Journal of vascular surgery* 2008; 48(2): 480-486
5. Rothwell PM, Giles MF, Chandratheva A, et al. Early use of Existing Preventive Strategies for Stroke (EXPRESS) study Effect of urgent treatment of transient ischaemic attack and minor stroke on early recurrent stroke (EXPRESS study): A prospective population-based sequential comparison. *Lancet* 2007; 370(9596):1432-1442.

Biography

Özgür Altınbaş has a MD degree in cardiovascular surgery and PhD student in biochemistry. He graduated from Justice Vocational School and International Rotary Foundation. He has studies in different fields of cardiovascular surgery and interested in molecular and biochemical pathways of the diseases. He is the member of varied vocational and charity organizations.

ozgur_altinbas@yahoo.com

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