

ABSTRACT

Background: CEA – „gold standart“ for treatment of 50-99% stenosis in symptomatic and 60-99% stenosis in asymptomatic patients

Methods: From 2008 till 2018, 1373 brachiocephalic interventions were performed. 1089 patients were analyzed, comparing the effectiveness of 837 carotid endarterectomies, among which 172 (20.6%) were conducted in classical and 665 (79.4%) according to the original method of "retrograde endarterectomy"

Results: Stroke/death was in 32 patients, 4.0% for retrograde and 4.8% for classic CEA

Conclusions: The results of surgical treatment of atherosclerotic lesions of the carotid arteries reveal the benefit of using the method of retrograde carotid endarterectomy, which is reliably confirmed by the lower level of major complications.

NO DISCLOSURES

INTRODUCTION

CEA is one of the promising areas of both primary and secondary surgical prophylaxis of cerebral ischemia caused by atherosclerotic lesions of the carotid arteries and is the gold standard for treatment among symptomatic patients with carotid stenosis of 50-99% and asymptomatic patients with carotid stenosis 60-99%.

AIM

To choose the optimal method of surgical treatment of atherosclerotic carotid artery lesions.

METHODS

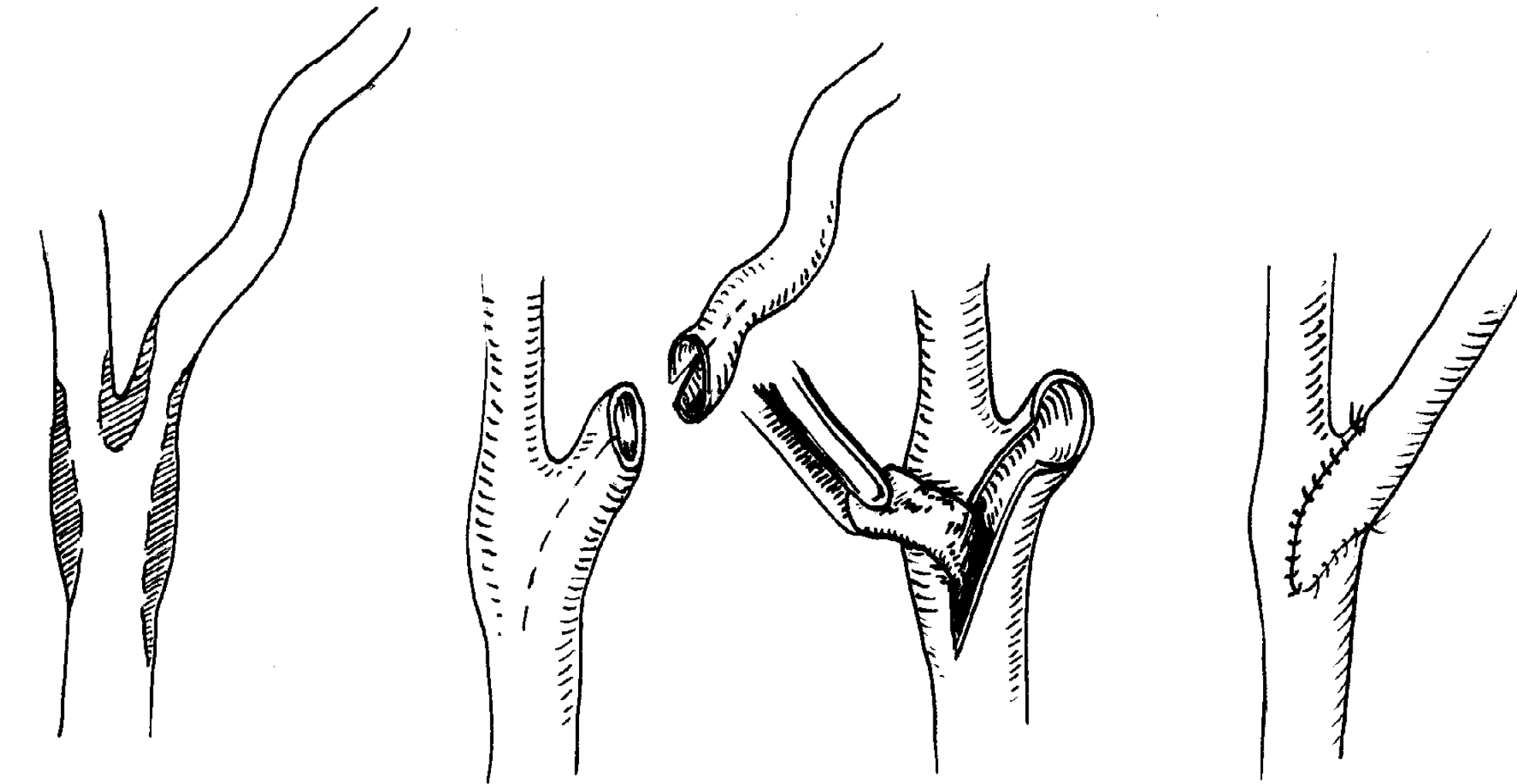
During the period of 2008-2018, 1373 surgical interventions on brachiocephalic vessels were performed at the department of vascular surgery of Lviv Regional Clinical Hospital. Among them - 1206 interventions (87.8%) for symptomatic lesions and 167 (12.2%) - among asymptomatic ones. The results of surgical treatment of atherosclerotic lesions of carotid arteries among 1089 patients were analyzed, comparing the effectiveness of 837 carotid endarterectomies, among which 172 (20.6%) were conducted in classical and 665 (79.4%) according to the original method of "retrograde endarterectomy". The comparative assessment between the groups was performed according to the incidence of major complications (stroke / death) in the perioperative period. There was no significant statistical difference between the groups formed by age, sex, and concomitant pathology.

RESULTS

Major complications (stroke / death) were observed among 34 patients (4.1%). In the implementation of retrograde carotid endarterectomy, the level of stroke / death was 4.0%, at performing classical carotid endarterectomy - 4.8% (p < 0.05).

CONCLUSION

- The results of surgical treatment of atherosclerotic lesions of the carotid arteries reveal the benefit of using the method of retrograde carotid endarterectomy, which is reliably confirmed by the lower level of major complications.



Retrograde CEA method from 1986, patented 14.06.97

