



Fact Sheet

Quick Facts on Carotid Artery Disease Treatment Options

Patients at high risk for stroke, or those who have significant carotid artery disease, can be treated with medication, surgical treatment or carotid stenting, as well as lifestyle changes. Age, as well as additional existing medical conditions, plays important roles in determining which treatment is most appropriate.

Medication management

- Anticoagulants/Antiplatelets can be used as preventative treatment. Antiplatelet agents such as aspirin, and anticoagulants such as warfarin interfere with the blood's ability to clot and can play an important role in preventing stroke.¹

Carotid endarterectomy (CEA)

- The surgical procedure for carotid artery disease is called carotid endarterectomy (CEA). Performed by a vascular surgeon, it involves cutting the carotid artery open to remove plaque build-up. When blockage is severe (70 percent or greater reduction in the diameter of the artery), surgical treatment is usually recommended. While considered an invasive procedure, an estimated 200,000 CEAs are performed each year in the U. S.²

Carotid artery stenting (CAS)

- Carotid artery stenting (CAS) is a minimally invasive procedure during which a long, thin tube, or catheter, is inserted through a groin artery and maneuvered to the carotid artery. The catheter carries a tiny balloon that inflates and deflates, flattening the plaque against the walls of the artery. Then a tiny metal, mesh tube, or stent, is placed in the artery to hold it open. The stent is implanted with the use of a companion product, called an embolic protection device, which is designed to prevent plaque and debris from breaking off and blocking blood flow to the brain during the procedure.²

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- CAS offers the following advantages for patients at risk of stroke who are not favorable candidates for surgery:
 - Performed under local anesthesia
 - Avoids the risks of cranial nerve injury and neck scarring
 - Shorter procedure time, reduced hospital stay, and faster recovery
- Research shows the risk of death, stroke, and myocardial infarction associated with carotid artery stenting in high-risk patients is equivalent to that associated with carotid endarterectomy.³

Lifestyle changes

- Changing some lifestyle factors may limit the progression of carotid artery disease. The first step smokers should take is to quit smoking. Losing weight, exercising regularly and eating a diet low in saturated fats will also help to lower the risk of carotid artery disease. Lifestyle changes should be incorporated with all other forms of CAD treatment.²

References

¹ Acute and Preventive Treatments. *American Stroke Association*. Retrieved from www.strokeassociation.org. 12/08/06.

² Carotid Artery Disease, Stroke, Transient Ischemic Attacks (TIAs). *Society for Vascular Surgery*. Retrieved from www.vascularweb.org 12/08/06.

³ Protected carotid-artery stenting versus endarterectomy in high-risk patients. *N Engl J Med*. 2004; 351:1493-1501