

VEITHsymposium 2024 ★ New York

**Current Optimal Treatment When
Carotid Stenosis In The Neck
Coexists With Intracranial Disease
Or Clot**



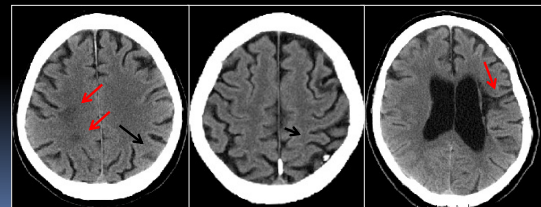
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Nothing to disclose

- **Tandem stenosis**
- **Carotid stenosis + Cerebral clot**

Asymptomatic patients
Symptomatic patients
TIA
Stroke

Don't forget:
Asymptomatic patients
may have suffered
from clinically silent infarcts.



Treatment Options

- **Thrombectomy**
- **Balloon Angioplasty**
- **Stenting**

Which Lesion First ?

**Cerebral artery lesion first:
poor collateral blood flow !**

**Carotid artery lesion second:
better collateral blood flow –
Circle of Willis !**

Blood Pressure Management

Before the intervention:
systolic 160 mm Hg or more

During the intervention:
systolic 160 mm Hg or more

After the intervention:
systolic 100-120 mmHg

Intervention in general anaesthesia: no blood pressure drop !

Carotid Tandem Stenoses

Recurrent TIAs, right bifurcation + distal ica stenosis



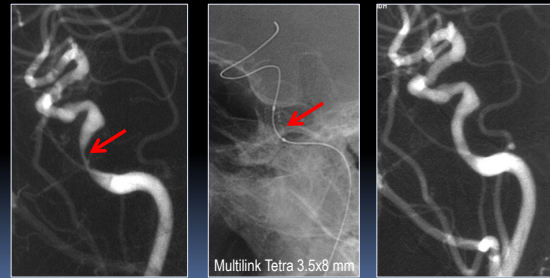
Carotid Tandem Stenoses

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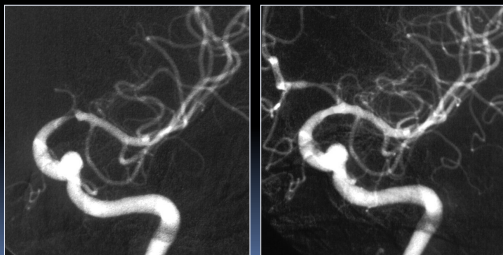
Distal ICA + MCA Stenoses

Symptomatic stenosis of distal left ica

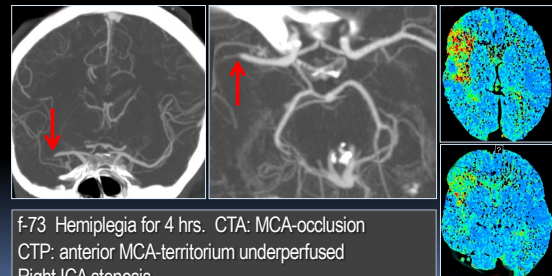


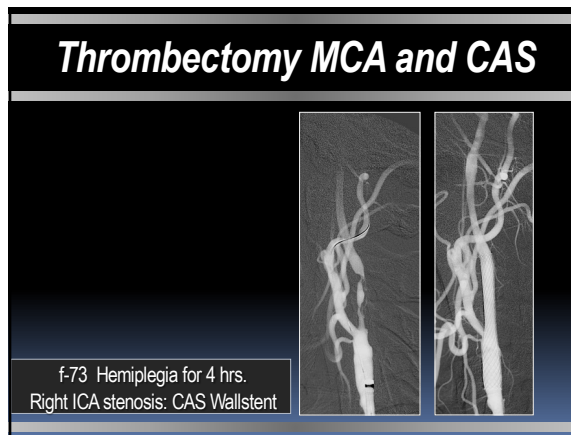
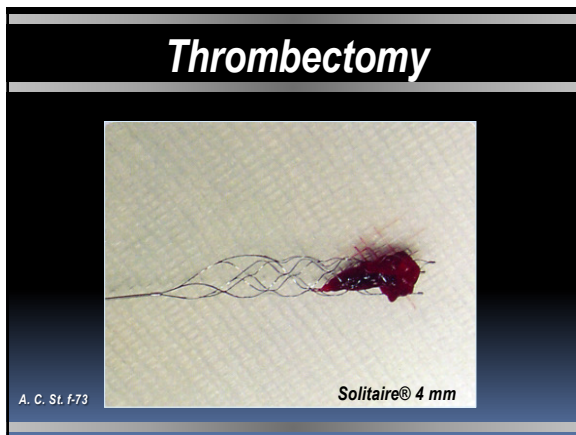
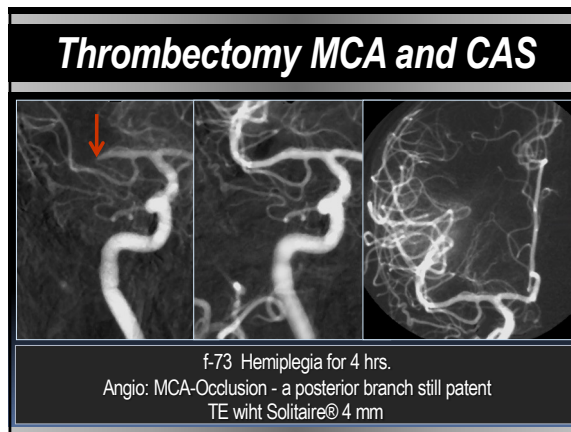
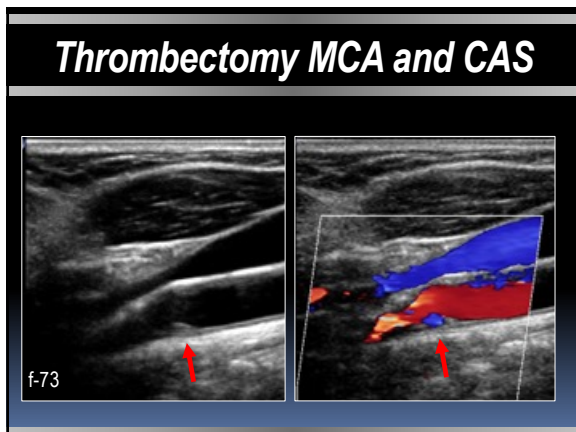
Distal ICA + MCA Stenoses

Symptomatic stenosis of distal left ica + mca
balloon 2.5 x 10 mm



Thrombectomy MCA and CAS





Results

288 pts. carotid & cerebral
artery obstructions
mean age 72 y
177 male 111 female
success 283 - 98%
CAS/y about 380; TE/y about 320

