

May 24-25, 2018
London, UK

Sanjay Singh et al., J Vasc Endovasc Therapy 2018, Volume 3
DOI: 10.21767/2573-4482-C1-003

CAROTID ENDARTERECTOMY UNDER LOCAL ANAESTHESIA: REVIEW OF PRACTICE AND PERI-OPERATIVE OUTCOMES

Sanjay Singh, Asghar Butt and Peter LeeChong

United Lincolnshire Hospitals NHS Trust, UK

Background: Carotid artery stenosis accounts for approximately 10% of all ischemic strokes, causing significant morbidity and mortality. The use of local anaesthesia rather than general anaesthesia might lower the risk of a stroke during or after surgery. We investigated peri-operative outcomes of carotid endarterectomy (CEA) done under local anaesthesia at our unit.

Methods: Consecutive patients from a single vascular unit with symptomatic carotid stenosis undergoing CEA under local anaesthesia between January 2016 and October 2017 identified from a prospective maintained vascular database were included in the study.

Results: Seventy-nine patients, who had CEA between January 2016 and October 2017, were included in the study. Amaurosis fugax was the index event in 10% of patients (n=8), TIA in 46% (n=36), minor stroke in 39% (n=31), other symptoms in 40% (n=3) and asymptomatic in 1.0% (n=1). There were 65% (n=51) male and 35% (n=28) female patients with a mean age of 74 years. Pre-operative risk factors were age more than 80 years old (26.5%), arterial hypertension (51.8%), hypercholesterolemia (83.5%), current smoking (20%), ex smoking (55%), stenosis \geq 90% (31.6%). Majority of the patients were referred by stroke physicians (91%). Operative procedure suture with prosthesis patch was 96.3%, direct suture 2.5% and eversion 1.2%. Readmission within 30 days of procedure was 3 (3.7%) patients. Repeat TIA were seen in 4 (5%) patients which recovered and no major stroke seen. There was no cranial nerve injury and mortality in our study.

Conclusion: Our evidence suggests that carotid endarterectomy can be safely performed under local anaesthesia and can be an effective alternative to general anaesthesia for carotid stenosis.

Recent Publications

1. Lewis S C, Warlow C P, et al. (2008) General anaesthesia versus local anaesthesia for carotid surgery (GALA): a multicenter randomized controlled trial. *Lancet* 372(9656):2132-2142.
2. Liu S S, Strodtbeck W M, Richman J M and Wu C L (2005) A comparison of regional versus general anaesthesia for ambulatory anaesthesia: a meta-analysis of randomized controlled trials. *Anesth Anal* 101(6):1634-1642.
3. Rerkasem K and Rothwell P M (2008) Local versus general anaesthesia for carotid endarterectomy. *Cochrane Database Syst Rev* 4:CD00126.
4. Kfoury E, Patel S and Mukherjee D (2012) Carotid endarterectomy under local anaesthesia: an alternative treatment for carotid stenosis. *Vasc Disease Management* 9(11):193-197.
5. Amato B, Markabaoui A K, et al. (2005) Carotid endarterectomy under local anaesthesia in elderly: is it worthwhile? *Acta Biomed* 76:64-68.

Biography

Sanjay Singh has expertise and passion in Vascular and Endovascular Surgery. He has done complex aortic endovascular fellowship and is a Vascular Consultant working in United Kingdom. His open and contextual surgical techniques are based on researched and practiced models which help create new pathways for innovation. He has achieved this aptitude after years of experience in research and teaching in university hospitals and institutions. The ever-responsive and adapting field of endovascular surgery has improved the survival rates of high risk patients.

dr_sanjaysingh@hotmail.com