Customization of Carotid Revascularization Management to Optimize Outcomes

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- 1. Lessons from Clinical Events Committees and the Court of Law
- 2. Customized access
- 3. Customized embolic protection
- 4. Customized revascularization

Lessons Learned from Clinical Events Committees and the Court of Law

One Clinical Events Committee (CEC) case is worth 40 of my own

Who Does the CEC Review?

- Old ladies
- With damaged brains
- With comorbidities
- Without classical symptoms

The risk exceeds the likely benefit.

Sri lyer 1997



"Don't perform carotid stenting in asymptomatic people over 80 years old"

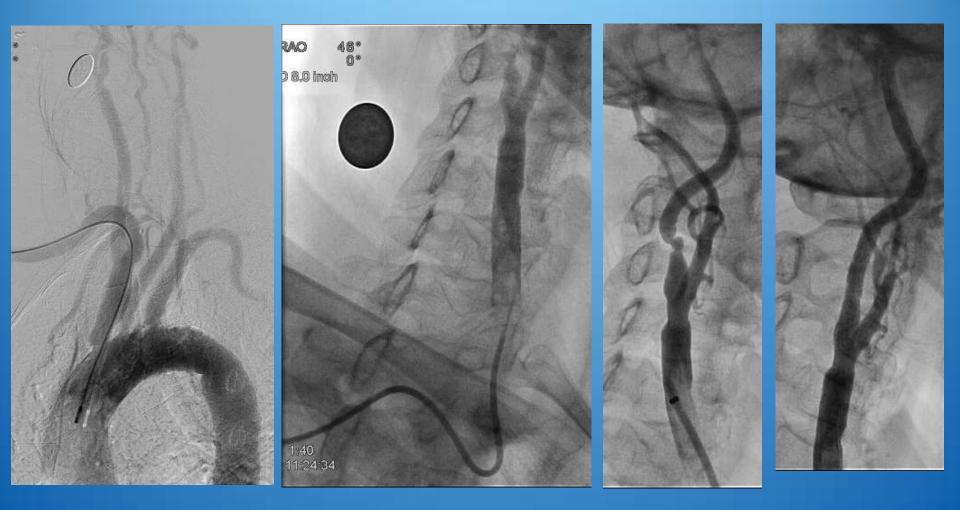
Why am I listening to this old lady's neck?

What is the Easiest Target for a Malpractice Attorney?

The lack of an appropriate indication.

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 Customized embolic protection
 Customized revescularization

Aortic and Bilateral Iliac Occlusion Brachial Artery Access

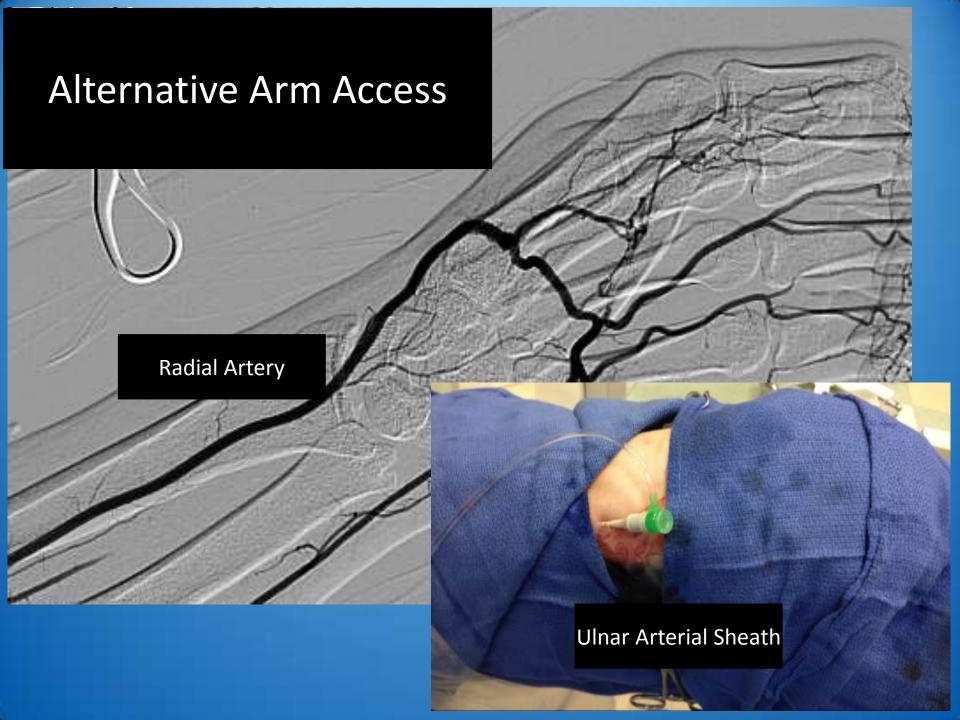


Arch

Simmons Catheter

Ansel Sheath

Final



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Anatomy Defines Protection





Proximal

Anatomy Defines Protection



Distal

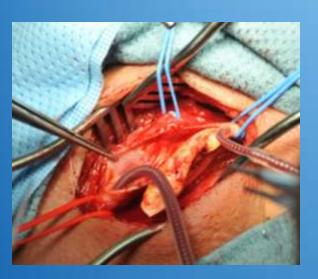
Anatomy Defines Protection



Typical Device Cost: Filter \$1380 - \$1550 US; Proximal protection \$1650

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Stenting is not Always the Best Option!



Endarterectomy

- Dense calcification, especially circumferential
- Renal insufficiency
- Tortuous vessels
- Access problems
- When institutional surgical expertise exceeds interventional



Customized Care is the Best Care

- Stenting, surgery, or medications only
- Arm or leg access
- Proximal or distal protection
- Etc