

Improved Outcomes of Carotid Endarterectomy: Does It Matter If a Vascular Surgeon Does the Operation?

NOTES

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Improved outcomes after carotid endarterectomy (CEA) have been related to preoperative, intraoperative, and postoperative patient and procedural variables. Outcomes have also been related to other factors that are not directly related to the patient or the procedure, such as performance of the procedure in high volume hospitals, by high-volume surgeons, and by surgeons specializing in vascular surgery. In the state of Connecticut, there were fewer cardiac complications after CEA when performed by vascular surgeons compared to CEA performed by general surgeons (0.8% vs 3.0%, $p < .0001$; multivariable logistic regression). These results suggest that increased referral to vascular surgeons could improve procedural safety. In addition, the practices of vascular surgeons with excellent outcomes after CEA need to be examined critically for these underlying factors that affect not only procedural results but long-term stroke-free survival.

References

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2. Teso D, Frattini JC, Dardik A. Improved outcomes of carotid endarterectomy: the critical role of vascular surgeons. *Semin Vasc Surg* 2004; 17:214–218.