Neurological complications are common during cardiac procedures. The type of procedure influences the profile of neurological complications and their management. In this article, we review the different neurological complications encountered following cardiac procedures, and treatment strategies for managing those complications.

Recent clinical trials have expanded the time window of eligibility for mechanical thrombectomy and intravenous thrombolysis. As a result, more options are now available for the treatment of periprocedural strokes. Early recognition of neurological complications, particularly stroke, will allow more patients to be treated effectively. The expanded window for intravenous thrombolysis and mechanical thrombectomy using advanced neuroimaging for selection provides more opportunities for treatment of periprocedural stroke. There is a paucity of data on the management of cerebrovascular complications, such as ischemic and hemorrhagic strokes, in the setting of left ventricular assist device or mechanical valve¹⁾.

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