## Carotid artery endarterectomy complications

see Vernet's syndrome.

Stroke in the immediate postoperative period after carotid endarterectomy is a rare complication. Many centers have begun incorporating angiography before surgical re-exploration, which has the advantage of confirming carotid occlusion and treating tandem intracranial lesions if present.

Emergent endovascular evaluation in the setting of acute postcarotid endarterectomy thrombosis is a safe and timely treatment option, with the benefit of detecting and treating embolic intracranial lesions. Immediate angiography and intervention in this rare surgical complication show promising initial results 1).

## Cranial nerve palsy (CNP) and neck haematoma

CNP remains relatively common after CEA, but is rarely disabling. Women should be warned about an increased risk. Attention to haemostasis might reduce the incidence of CNP <sup>2)</sup>.

## Ischemic brain lesions

Brain lesions on diffusion-weighted imaging (DWI) are frequently found after carotid artery stenting (CAS), but their clinical relevance remains unclear.

Ischemic brain lesions discovered on DWI after CAS seem to be a marker of increased risk for recurrent cerebrovascular events. Patients with periprocedural DWI lesions might benefit from more aggressive and prolonged antiplatelet therapy after CAS. (A Randomised Comparison of the Risks, Benefits and Cost Effectiveness of Primary Carotid Stenting With Carotid Endarterectomy: International Carotid Stenting Study; ISRCTN25337470) 3).

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