

NASCET

The North American Symptomatic Carotid Endarterectomy Trial (NASCET) ¹⁾ found that for patients with a hemispheric or retinal TIA or a mild (non-disabling) stroke within 120 days and ipsilateral high-grade stenosis (>70%), that carotid endarterectomy (CEA) reduced the rate of fatal and non-fatal strokes (by 17% at 18 months) and death from any cause (by 7% at 18 months) when compared to best medical management (when surgery was performed with perioperative risk of stroke or death of 5.8%). Results were twice as good for patients with stenosis from 90–99% than for those with 70–79%. Furthermore, with CEA the frequency of major functional impairment was reduced at 2 years ²⁾.

¹⁾

The North American Symptomatic Carotid Endarterectomy Trial. Beneficial Effect of Carotid Endarterectomy in Symptomatic Patients with High-Grade Carotid Stenosis. N Engl J Med. 1991; 325:445–453

²⁾

Haynes RB, Taylor DW, Sackett DL, et al. Prevention of Functional Impairment by Endarterectomy for Symptomatic High-Grade Stenosis. Lancet. 1994; 351:1379–1387

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