

SURGEONS AS LEADERS IN CAS STUDIES

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CONFLICT OF INTEREST

- Boston Scientific Consultant
- Cordis Consultant
- Gore Consultant
- Medtronic Consultant
- Vessix Vascular Consultant

CAROTID REVASCULARIZATION HISTORY

- Since clinico-pathologic correlation of carotid stenosis with stroke surgeons have sought to reduce patients' risk
 - Eastcott, Pickering, Rob
 - DeBakey
- International trials for symptomatic patients
 - NASCET, ECST
- International trials for asymptomatic patients
 - VA, ACAS, ACST

SURGEONS AND CAROTID STENTING: HISTORY

- Initial stenting reports in 1996
 - Deithrich 1996
 - F. Criado 1997
 - Bergeron 2000
- Initial reports of protection for stenting
 - Ohki and Veith – ex vivo evaluation
 - Parodi – clinical evaluation
 - Parodi and E. Criado – proximal protection system

COMPARISONS OF CEA AND CAS

- Every large randomized trial of CAS vs CEA has major involvement of a renowned vascular surgeon
 - Leicester 1998– Bell
 - CAVATAS 2001– Gaines, Beard
 - Wallstent 2001– McCann
 - SAPPHIRE 2004– Ouriel
 - SPACE 2006,2007– Allenberg, Maurer
 - EVA 3S 2006– Becquemin
 - ICSS 2010– deBorst, Gaines
 - CREST 2010– Hobson, Moore

LARGE REGISTRIES

- All large registries of carotid stenting have had major involvement of surgeons
 - Global Registry 2003– Diethrich, Bergeron
 - CARESS 2004– all surgeons
 - CAPTURE 2007– Fairman
 - SAPPHIRE WW 2009– Massop, Solis

SURGEONS AS INVESTIGATORS USING NEW DEVICES

- Surgeons have a long history of interest in and evaluation of new devices
 - Priamus – Coppi, Moratto, Silingardi
 - Security – Parodi
 - BEACH - Ciocca
 - Viva – Eskandari
 - Create – F Criado
 - Archer - Fairman
 - Maveric – Deithrich, Molnar, Morrissey, Fairman
 - Capture – Fairman
 - EMPIRE – Clair
 - EPIC – Kwolek, Matsumura
 - PROOF – Kolvenback, Pinter

SURGEONS AS PRINCIPAL INVESTIGATORS IN CAS TRIALS

- CARESS 2004
 - First real world trial of carotid stenting
- CREST 2010
 - First large US randomized trial for carotid stenting
- EMPIRE 2010
 - Initial flow-reversal experience as alternate protection system
- ACT 1 In progress
 - Randomized, Low-risk carotid stenting
- ROADSTER Enrolling
 - Initial cervical access, flow-reversal to evaluate alternate protection

SURGEONS EVALUATING CAS

the short list of topics

- Carotid plaque morphology in CAS
 - Surface u/s
 - IVUS
 - OCT
- DWI in CAS
- TCD in CAS
- Timing of stroke in CAS
- Minimizing microembolization in CAS
- Age, sex, gender and ethnic effects on CAS
- Carotid protection systems
- Cost in CAS
- CAS and CABG
- Risk factors for CAS
- Simulation for CAS
- Need for protection devices in CAS
- Combination of CAS with open surgery

CONCLUSION

- Surgeons have accepted and embraced the concept
- Surgeons continue to evaluate the technique
 - To develop ways to improve its safety
 - To assess its ideal application
 - To determine the patients who would best benefit
- Surgeons want this procedure available for patients in a way that assures that the technique is applied by competent, knowledgeable physicians to patients who truly need this procedure