

Stroke is the 3rd most common cause of death in the U.S with over 800,000 occurring every year. The financial impact of stroke is tremendous. In 2010 strokes cost the healthcare industry over 73.7 billion dollars.

A stroke is defined as the sudden death of brain cells due to lack of blood flow with symptoms lasting greater than 24 hours and can manifest by weakness, paralysis, or loss of sensation in an arm or leg. It may be manifest as slurring of speech, or even loss of vision in one eye. A TIA (transient ischemic attack) or “mini stroke” may present with the same symptoms – however the symptoms last less than 24 hours.

TIA's are a significant clinical entity. Once a TIA occurs there is a 10 % chance of a major stroke within the first year and an additional 6 % risk every year thereafter. A typical stroke on the other hand yields a 9 % risk of subsequent stroke every year.

Risk factors for stroke are the same for all vascular disease in general. The biggest risk factor is tobacco abuse, followed by diabetes, high blood pressure, elevated cholesterol levels, or an irregular heartbeat.

A very high percentage of strokes are due to disease of the carotid arteries. As a carotid artery becomes more blocked there is an increased chance of a blood clot or piece of the plaque traveling to the brain causing a stroke or TIA. As a vascular surgeon I specialize in the treatment of carotid disease and stroke prevention. The management of carotid disease can significantly reduce the risk of stroke. If a blockage is found by ultrasound, the decision of how to treat comes into play. Carotid disease can be treated either medically, by open surgery, or by stenting.

Several landmark studies and consensus statements have been performed directing how to treat carotid disease. In the group of patients who have suffered from a stroke or mini stroke, an open surgery should be considered if the blockage is greater than 50 %. In the group of patients with asymptomatic disease surgery is reserved for blockages over 60 %, and below this level we simply treat medically. Medical management of carotid disease includes lifestyle modification with smoking cessation, control of cholesterol levels, proper management of diabetes, high blood pressure, and very importantly being placed on an aspirin.

Carotid endarterectomy, or “cleaning out” of the carotid arteries is one of the most frequent surgeries I perform. The surgery itself takes only about 1 ½ hours to perform, and is done through a small neck incision. With the patient fully asleep under a general anesthetic, the carotid artery is dissected, opened and cleaned out. I then will close the artery to reestablish blood flow and close the incision. The patient will typically stay in the ICU monitored overnight and go home the very next day.

If a patient is felt to be too unhealthy for an open surgical treatment of carotid blockage, another option is a carotid stent. This procedure is a minimally invasive

treatment of carotid blockages reserved for patients who are felt to be too high of a surgical risk.

With proper management and surveillance of carotid disease the risk of stroke can be decreased dramatically. The treatment of carotid disease is one of my passions. When choosing a Vascular Surgeon it is important to consider the experience that physician has. I have extensive experience in treating carotid disease and since coming to Panama City 5 ½ years ago performed over 400 carotid surgeries with excellent results. I consider it an honor to serve the individuals of this community in preventing stroke and improving their quality of life. It is my desire to make the art of medicine personal again and treat each individual as though they were a part of my own family.