Anaesthesia for Carotid Endarterectomy (Dr Mark Stoneham) 21/09/2011

Preoperative assessment of patients undergoing CEA

- Contralateral stenosis
- Blood pressure control
- Presentation of neurological deficit
- Indications for surgery over medical therapy

Knowledge of surgical techniques for carotid surgery and implications for anaesthesia

- Standard endarterectomy
- Eversion technique
- Patch angioplasty
- Carotid shunting

Complications of surgery:

- Stroke
- Myocardial infarction
- Nerve injury
- Postoperative wound haematoma management

Comparison of regional and general anaesthetic techniques

- GALA trial
- Benefits of general anaesthesia
- Benefits of regional anaesthesia
- Stroke / MI / mortality rates for GA and LA techniques
Local anaesthetic techniques: methods, complications, limitations

- Cervical plexus block techniques: deep, superficial, intermediate, combined
- Cervical epidural analgesia

General anaesthetic techniques:

- Choice of techniques: inhalational vs TIVA
- Avoidance of nitrous oxide
- Airway management
- Augmentation of blood pressure

Cerebral protection

- Management of cerebral ischaemia during cross-clamping

Techniques for cerebral monitoring during carotid cross-clamping

- Awake patient
- Carotid stump pressure monitoring
- Transcranial Doppler
- EEG
- SSEP
- Near infrared spectroscopy / cerebral oximetry

Peri-operative blood pressure control

- Normal limits
- Intraoperative control
- Vasoactive drug selection
- Postoperative BP control

Postoperative management

- Location: PACU / HDU / ICU
- Cerebral hyperperfusion syndrome
- Airway compromise
- Pain control
- Management of new neurological deficit

Carotid stenting