

News

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****Surgery to reduce stroke risk under
investigation at UT Southwestern

DALLAS -- Researchers at The University of Texas Southwestern Medical Center at Dallas are taking part in a major North American study of carotid endarterectomy, a surgical procedure for removing cholesterol-laden plaque from the carotid arteries of the neck.

Currently in widespread use, the endarterectomy often can reduce the risk of stroke and stroke-related death by clearing away deposits that obstruct vital blood flow to the brain. However, questions exist about whether the operation, which carries its own risks, is used too freely.

As part of a 45-center National Institutes of Health trial, researchers at UT Southwestern will assess the use of surgery plus medical management versus medical management alone in 3000 patients. Medical management will include controlling risk factors, such as hypertension and smoking, and taking aspirin (300 mg per day, the equivalent of one 5-grain tablet). Each patient will be chosen randomly for one arm of the study or the other and will be followed for five years.

The researchers also will compare specific groups of patients to see if some benefit more than others. These groups include patients with severe, as opposed to moderate, narrowing of carotid arteries and those with and without ulceration in the diseased arteries.

"We hope to develop criteria for selecting patients who would benefit most from a carotid endarterectomy," says Dr. Patrick Clagett, professor of surgery at UT Southwestern and head of the research team. Clagett, who is chief of vascular surgery at UT Southwestern, will conduct the endarterectomy trials at the Dallas Veteran's Administration Medical Center and at Parkland Memorial Hospital.

He says that patient volunteers participating in the study are those with symptoms of carotid disease -- those who have recently suffered a mild transient stroke, called a transient ischemic attack (TIA), or a partial (non-disabling) stroke brought about by narrowing of one or both carotid arteries on either side of the neck.

(More)

Working with Clagett on the study are neurologist Dr. Elliott Ross and surgeons Drs. Daniel Fisher, Richard Fry and William Fry. Also on the research team is nurse-coordinator Laura Coopender in the Department of Surgery.

Clagett explains that the carotid endarterectomy is generally accepted as an effective method of preventing strokes in patients with blocked carotid arteries. In 1984, for example, the operation was performed over 125,000 times in the United States. Many physicians believe the frequency of the operation will increase in the future.

Most authorities agree that the operation reduces the risk of stroke by about two thirds compared with leaving the carotid disease untreated. In patients who receive no treatment for narrowing arteries, the risk of stroke is 6 percent per year.

The operation is not without significant risks, however. The risk of stroke and death caused by the operation is 1.5 percent to 4.5 percent in specialized medical centers and 6 percent to 11.4 percent in the general medical community.

Medical management, too, has been found effective in preventing strokes and death, says Clagett. Five major studies have shown that aspirin therapy can reduce the TIA rate to 4-5 percent per year and stroke or stroke-related death to about 5 percent per year.

"Whether the results with medical therapy are equivalent to, superior to or inferior to surgical therapy is unknown," says Clagett. "That is what we hope to establish with this trial."

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Note: The University of Texas Southwestern Medical Center at Dallas comprises Southwestern Medical School, Southwestern Graduate School of Biomedical Sciences and Southwestern Allied Health Sciences School. The name was recently changed from The University of Texas Health Science Center at Dallas.