Summary:
we report a monocentric retrospective observational study of Carotid Angioplasty Stenting (CAS) about 118 asymptomatic patients with severe carotid artery stenosis . In this series, we have studied our results in relation to data from the literature . In term of endpoints, we studied 30-day cumulative morbidity and mortality rate ( 30-day mortality, 30-day stroke,30-day myocardial infarction ).

Methods:
Between 2016 and January 2022 we performed 118 CAS in 102 patients. The criteria of inclusion were severe asymptomatic atherosclerotic unilateral or bilateral internal carotid artery stenosis ( >70% NASCET) , neither stroke or neurological symptom within the preceding 6 months and anatomical suitability for CAS. We excluded the patients who had had a previous ipsilateral carotid endarterectomy or stenting or radiation-induced carotid stenosis and dysplasia disease. All patients was assessed by duplex sonography using NASCET criteria and CT confirmation with a study of aortic arch. All the patient agreed to have a CAS after fair information of the benefits risks. All had a test for silent myocardial infarction before CAS. All procedures were performed according to the same protocol, using the same devices. All procedures were performed with local anesthesia and all received 1 mg/ kg of Heparin at the beginning of the intervention. The double antiplatelet therapy was systematic before and one month after CAS. All the procedures were closed with vessel closure devices.

Results :
Our biostatistician is in process of establishing all final results will be presented to you .
We had to give up twice during the procedure in the impossibility of crossing the lesion on the internal carotid once and because of crossing the left common carotid artery another time . no patients had had a disabling stroke during procedure. One patient presented with a stroke 5 days after procedure . there was stent thrombosis but fully recovered in two days .
All patients have benefited from a duplex sonography at one month.

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