Carotid Endarterectomy as the Method of Arterial Hypertension Treatment

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A great number of patients undergo the operation of carotid endarterectomy (CE) to prevent an ischemic stroke. Most of the patients with hemodynamically important stenosis have arterial hypertension (AH).

Aim of investigation:

To study the influence of carotid endarterectomy on blood pressure (BP).

Materials and methods:

It was studied 320 patients (middle age - $59,6\pm8,2$) with AH and hemodynamically important stenosis of carotid bifurcation. All the patients were performed the operation of CE. Before and after the operation it was made the 24-hours BP monitoring, ultrasonic investigation of carotid bifurcation. Additional investigations eliminated the probable reasons of the secondary AH.

Results:

AH in the patients with hemodynamically important stenosis was malignant: resistance to antihypertensive therapy, high degrees of AH (in 202 cases it was revealed the 3 degree), the tendency of BP rising in night hours (32,5% of night-peackers). After the CE operation we observed the stable tendency (duration more then 3 years of investigation) of positive transformation of AH degrees in mainly cases or even normalization of BP in 99 cases. After the CE in 257 (80,3%) patients we observed the depression of BP, in 58 (18,1%) cases BP was at the same level, and 5 (1,6%) we noticed the tendency of its rising.

Conclusion:

It's necessary to separate the cerebrovascular arterial hypertension as the independent form of the secondary arterial hypertension. The main reason for it is the fact that AH developes in the patients of hemodynamically important stenosis of carotid bifurcation and regress after the operation of CE. The operation of CE can be used as an effective treatment of the secondary cerebrovascular arterial hypertension. And the list of its indications should include the stenosis of carotid bifurcation more then 60% with combination of arterial hypertension.