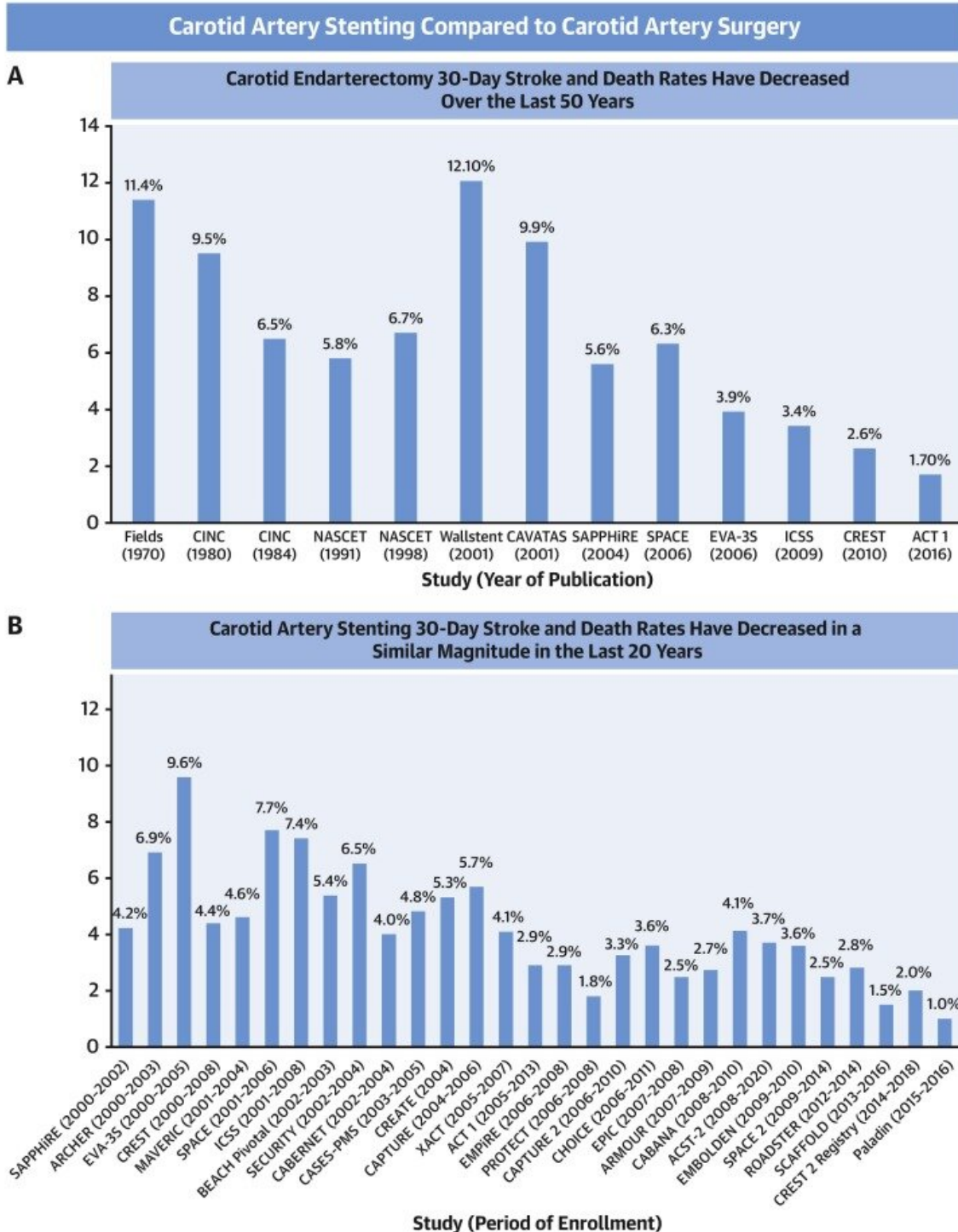


New study makes case for expanding coverage for carotid artery stenting

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CENTRAL ILLUSTRATION: A Comparison of Carotid Artery Stenting With Carotid Endarterectomy



White CJ, et al. J Am Coll Cardiol. 2022;80(2):155-170.

Credit: Christopher J. White et al, *Journal of the American College of Cardiology* (2022). DOI: 10.1016/j.jacc.2022.05.007

Research from Ochsner Health published in the *Journal of the American College of Cardiology* is likely to influence expanded insurance coverage for carotid artery stenting.

When it comes to options for cardiac patients, carotid artery stenting is a procedure that can improve [blood flow](#) to the [brain](#). Significant advances in the field of carotid artery stenting have occurred, which are detailed in the new paper, "Carotid Artery Stenting."

"Carotid artery stenting is a minimally invasive procedure compared to open [surgery](#)," explains first author Christopher White, MD, System Chairman for Cardiovascular Disease Director and Director of John Ochsner Heart & Vascular Institute. "Overall, stenting and surgery are equivalent in patients who are good candidates for both, and the patient and their doctor should discuss which one is better for the individual patient."

The paper analyzes several large, multicenter randomized controlled trials encompassing data from over 25 years and more than 10,000 patients to demonstrate that [carotid artery](#) stenting can be just as effective as surgery when it comes to long-term [stroke prevention](#) and durability.

The paper suggests that the current CMS coverage decision regarding carotid stenting is outdated and places Medicare patients at a disadvantage by restricting their options for less invasive treatment, and recommends expanding coverage to be equivalent to open surgery.

"The current literature supports equivalent results for carotid stenting and carotid surgery in patients who are suitable candidates for both procedures," says White. "Some patients will not be good candidates for stenting and should receive surgery, while some patients will be poor candidates for surgery and should receive stents."

Current coverage is likely to be expanded in the near future to include coverage for carotid [stenting](#) that is equal to carotid surgery for:

- those who are symptomatic with a carotid stenosis $\geq 50\%$ and $\leq 99\%$
- those who are asymptomatic patients with carotid stenosis $\geq 70\%$ and $\leq 99\%$.

"We believe our multidisciplinary paper, written by neurologists, neurosurgeons, vascular surgeons, and cardiologists, will be an important summary of the most recent evidence that will support CMS in reimbursing both procedures on an equal basis," says White.

More information: Christopher J. White et al, Carotid Artery Stenting, *Journal of the American College of Cardiology* (2022). [DOI: 10.1016/j.jacc.2022.05.007](#)

Provided by Ochsner Health System

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