INTRODUCTION



New evidence and innovations for carotid disease and popliteal artery aneurysm management

On behalf of the Society for Vascular Surgery (SVS), it is our privilege to introduce two major contributions^{1,2} to the literature, which will provide guidance to vascular surgeons who treat patients with extracranial cerebrovascular disease and/or popliteal artery aneurysms. This Journal of Vascular Surgery supplement includes the Society for Vascular Surgery Clinical Practice Guidelines and Implementation Document on the Management of Extracranial Cerebrovascular Disease and Clinical Practice Guidelines on Popliteal Artery Aneurysms. We congratulate Dr Ali AbuRahma, SVS president, and Dr Alik Farber, who led the respective writing groups in the development of these instructional clinical practice documents, which offer recommendations to inform the diagnosis, evaluation, treatment options, and follow-up of patients affected with extracranial carotid or popliteal artery aneurysmal disease. The expert writing groups included world-renowned vascular surgeons who analyzed the most recent evidence and performed systematic reviews to bring forth these clinical practice guidelines (CPGs).

The Management of Extracranial Cerebrovascular Disease documents include an update of the 2011 CPGs, which is accompanied by an implementation document on the treatment of patients with extracranial carotid artery disease.³ These updated SVS guidelines provide graded evidence-based recommendations that address five key areas of patient care: the role of surgical therapy over medical therapy alone for asymptomatic low risk patients, the role of carotid endarterectomy vs stenting for symptomatic low risk patients, the optimal timing of interventions after acute stroke, screening for carotid artery stenosis in asymptomatic patients, and the sequence of carotid and coronary interventions for patients undergoing intervention for diseases in both vascular beds. The CPG is concise and practical and will be of great use to clinicians for real-time decision-making. Owing to the volume of the literature, information, and additional topics for which more detail is critical, the writing group also created a separate robust implementation document as a supporting companion resource.

The CPGs on *Popliteal Artery Aneurysms* present evidence and consensus-based recommendations regarding the evaluation of patients with popliteal aneurysms and size thresholds for repair. Recommendations for open surgical repair vs endovascular stent-graft repair are given for specific patient populations according to life expectancy, as are recommendations for urgent treatment of thrombosed popliteal aneurysms according to the Rutherford acute ischemia stage at presentation. This CPG is a unique contribution that has amassed the available data and current treatments for this disease process.

These CPGs and the implementation document represent countless hours of literature review, conference telephone calls, and consensus discussions and will provide vascular specialists with the latest evaluation and treatment recommendations to ensure the right care for the right patient at the right time.

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