

of patients in the standing position, unless it is absolutely certain that the calf muscles are not at all contracted during MRI acquisition, the observed phenomena are not related to the external compression exerted by medical compression stockings.

As reported recently,⁵ we support the statement recommending that “the compartment pressure surrounding the deep veins has to be taken into account” for future investigations.

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Re: “Editor’s Choice – Cerebral Hyperperfusion Syndrome after Carotid Artery Stenting: A Systematic Review and Meta-analysis”

We have read the meta-analysis by Huibers et al.¹ regarding cerebral hyperperfusion syndrome (CHS) after carotid artery stenting, but some points should be addressed.

Firstly, the authors found that CHS is a frequent complication after carotid artery stenting (CAS) leading to a high stroke rate.¹ However, they provide no data on peri-operative medication. The type/duration of antiplatelet and antihypertensive treatment should be evaluated for everyday clinical practice. Moreover, post-intervention monitoring protocols were not investigated, although guidelines strongly recommend a standardised monitoring protocol for the first 24 h.²

Secondly, no pooled disabling stroke/mortality and no intracranial haemorrhage (ICH) risks were reported. In a recent review of ours, ICH was significantly associated with a higher mortality in patients with CHS (pooled OR = 386.977).³ Additionally, Abreu et al.⁴ found a 38% ICH risk and an associated mortality of 51%, with ICH being more frequent after CAS than after endarterectomy. Therefore, such outcomes should also be reported in systematic reviews.

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The Many Faces of Frailty in Vascular Surgery

We read with great interest the systematic review and meta-analysis by Wang et al., on the impact of frailty on the outcome of elderly patients after major vascular surgery.¹ The authors present a nice detailed overview of current frailty papers. In their extensive analysis they evaluate multiple frailty tools, both single and multi-domain assessment tools, in major vascular surgery.

As described in the article, frailty is a syndrome defined as increased vulnerability because of a decline in reserve and