



Six Things Employees Need to Know About Stents (Part 2)

Al Lewis, Quizzify Founder and MIIA Health Care Consultant

This is the second half of “Six Things Employees Need to Know about Stents”, from January’s Well Aware article covering the first three. By way of review – and [click through for more info](#) – the three previous need-to-knows are:

- (1) Hospitals often offer “free” screenings to try to increase business if the screening “finds” something.
- (2) Diet-and-exercise improvements, plus appropriate drugs provide equivalent outcomes for most patients.
- (3) Long-term outcomes for patients with stable angina are the same, stent or no stent.

Starting off with #4

- (4) **Stents for peripheral artery disease (PAD) - for the arteries in your legs - are about as effective as simply increasing the amount of walking you do.**

This may be the single most overused procedure in all of surgery, though there is plenty of competition for this honor. As [mentioned in the link](#), stopping smoking and walking every day can help to control PAD. It is also important to partner with your doctor to help control other risk factors, such as diabetes, high blood pressure, and high cholesterol.

Even if you have symptoms, you may be better off not having a procedure. Studies show that walking every day can relieve symptoms just as well as stents, in many cases. Discuss this alternative with your doctor before having a stent inserted.

(5) Stents create a long-term commitment.

Stents are not a one-and-done procedure, like an appendectomy. Your appendix isn't going to grow back after it is removed. But your arteries could clog right back up again after they are cleared – and some people's do. Your odds of having this happen are lower if you take meds as prescribed. However, those meds come with their own side effects. If you are taking anti-clotting medicines – even something as simple as a little aspirin – your risk of bleeding goes way up, if you are in an accident. We've all seen doctor shows on TV where someone shouts: "He's a bleeder!" Well, that could be you.

(6) Stents create their own set of risks.

Someone fiddles with blood vessels surrounding your heart...and then you spend the rest of your life with little tubes in those vessels. How could anything possibly go wrong?

Heart surgery (or surgery in general) comes with many risks. In addition to re-narrowing of the blood vessels, blood clots can form at the site of the stent. Or the reverse, bleeding.

Further, one study found that stents may actually increase your risk of heart attacks in the short term.

So, as with everything else in Quizzify (except for whole-body scans, where we do just say no), we don't just say no. We say: "Consider both the risks and especially the alternatives, and discuss them with a trusted advisor and/or your primary care physician."

And as we and other experts say about many drugs, tests and procedures: "Just because it's health care doesn't mean it's good for you."