A 62-year-old man was admitted after recurrent transient left-sided weakness and sensory loss. Ultrasound (US) examination revealed a 70% narrowing of the right proximal internal carotid artery (ICA). Contrast-enhanced US suggested plaque neovascularization (figure, A). Carotid endarterectomy of the right ICA was performed. Immunohistochemistry of the specimen showed, corresponding to the US findings, extensive plaque neovascularization associated with dense macrophage infiltration (figure, B, C). Plaque neovascularization is associated with inflammation and plaque progression.1 The detection of plaque neovascularization by contrast-enhanced US could give further evidence of plaque vulnerability, but further study is needed to determine its value.

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