



The memberships of the AANS/CNS Cerebrovascular Section, the Society of NeuroInterventional Surgery and the Society of Vascular & Interventional Neurology all care for patients with cerebrovascular disease and stroke. We feel that is important to acknowledge the difficult and disturbing times that we all are experiencing in the context of health. The acute stress of an international pandemic, ongoing unrest and the resulting discussions have created a rare American condition for your families and communities. That condition has accentuated a major weakness of the diverse population that we hold dear. Acts of violence and racism cause psychosocial stress that leads to poor well-being and cerebrovascular health, especially for communities of color. Given that heart disease and stroke are the leading causes of death for communities of color, our organizations are extremely disturbed by violent acts that cut to the core of the lives in our communities. We denounce the incidents of racism and all violence that continue to ravage our communities.

Parity and justice in medicine should be a goal of every man and woman who has dedicated their lives to a mission of healthcare. George Floyd and other human beings who remain nameless and faceless are not only our patients but are also our patients' brothers, sisters, mothers, fathers and neighbors. The senseless violence that we have all witnessed thus impacts the health and stroke risk of each one of OUR patients. The profound grief and stress triggered by these events contribute significantly to cerebrovascular risk. The Joint Cerebrovascular Section, the Society of NeuroInterventional Surgery and the Society of Vascular and Interventional Neurology feel it is vital that we acknowledge these episodes as causal agents for disparities that have been in our communities for decades, similar to poor access to nutrition and quality education. It is crucial, now more than ever, that we acknowledge and help to mitigate the [unacceptable disparities](#) facing our most vulnerable populations. We have the unprecedented opportunity to address these issues through policy and by working with affected communities and the healthcare providers who serve them. Healthcare forces have the unique and ethics bound power to produce long-lasting community change.

Our societies are committed to stand and link arms in solidarity with efforts to dismantle systems that maintain excess morbidity and mortality, especially among vulnerable populations and those historically oppressed. Indeed, our vast collective membership has taken an oath to act decisively and with kindness, compassion, and grace to keep our patients moving toward a more unified and healthy society.

Keep breathing,

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