

hospital size were independently associated with EVS utilization. EVS increased significantly and continuously from 2010 to 2017 (p for trend <0.001) whereas shunting and ONF use remained stable (Abstract 24 figure 1). Length of hospital stay was considerably lower following EVS (median 1, IQR 1-2) as compared to ONF (median 4, IQR 2-7) and shunting procedures (median 2, IQR 1-4) ($p<0.01$).

Conclusion This study presents novel population-level data on national trends in the frequency and characteristics of venous stenting in IIH. EVS was associated with shortest length of hospital stay. A continuous increase in venous stenting with a relative stable use of shunting and ONF suggests an increasing role for endovascular therapies in IIH.

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P-025

LARGE SCALE, CT EVALUATION CAN IMPROVE ACCESS TO IMAGING STUDIES WITHIN MULTI-CENTER STROKE TRIALS

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Introduction Artificial intelligence (AI) can automate the detection and triage of Intracerebral Hemorrhage (ICH). Early Minimally Invasive Removal of IntraCerebral Hemorrhage (ENRICH) is a RCT evaluating the efficacy of minimally invasive surgery (MIS) for ICH. AI ENRICH is a prospective trial operating within and in parallel to the ENRICH trial that utilizes an AI application, Viz RECRUIT ICH Volume, to

identify and segment ICH to quickly identify potentially eligible subjects.

Methods Non-contrast CT scans performed at 5 participating US hospitals were evaluated specifically for a parenchymal hemorrhage by Viz RECRUIT ICH Volume. Participating health care professionals downloaded a phone application that allowed users to be notified for any hemorrhage ≥ 5 mL. Time metrics included the onset of CT scan, phone alert, and user recognition of that alert.

Results Over a combined period of 374 days, 24,137 CT scans were evaluated by the Viz ICH VOLUME application. Of these, 817 CT scans were determined to contain an ICH yielding a total of 154 patients that met ENRICH criteria for trial inclusion (30-80 mL). The median time from CT scan to cell phone notification was 2.6 minutes. The median time from cell phone notification to the user viewing the CT scan was 2.95 minutes.

Conclusions Viz ICH VOLUME can screen large numbers of CT scans and send alerts within minutes to medical professionals searching for clinical trial candidates in time-sensitive environments. Studies relying on radiographic selection criteria may benefit from automated screening.

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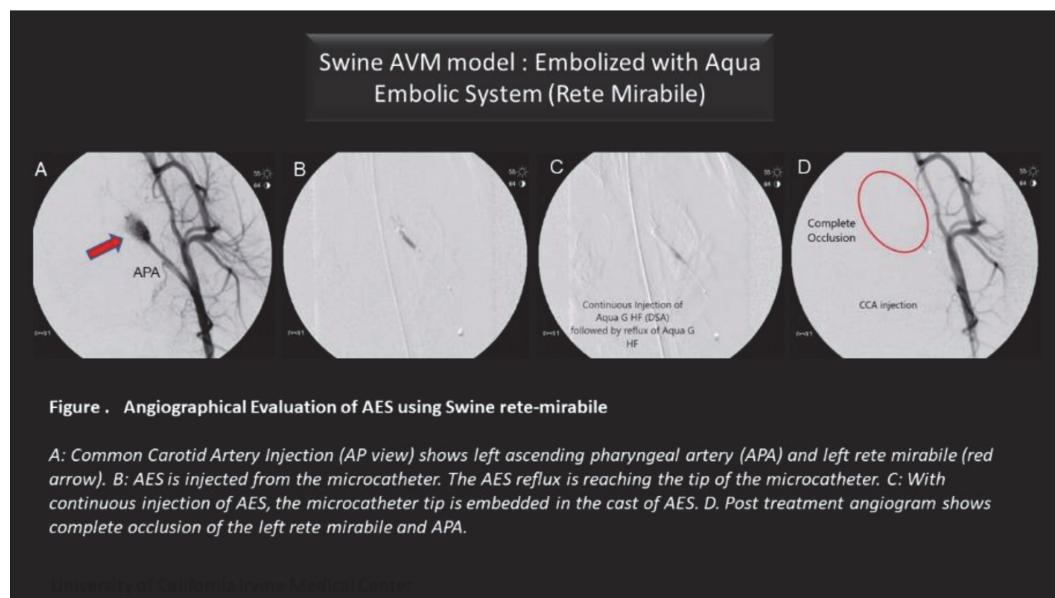
P-026

AQUA EMBOLIC SYSTEM: EVALUATING THE PERFORMANCE OF A NEW LIQUID EMBOLIC SYSTEM USING A SWINE AVM MODEL

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Introduction Currently available Liquid Embolic Materials (LEMs) have limitations of potential catheter entrapment or



Abstract P-026 Figure 1 Angiographical evaluation of AES using swine rete-mirabile