noted (4 cases of stable residual aneurysmal filling and 4 of aneurysmal recanalization). Two of those recurrent aneurysms were retreated by coil embolization. The overall directly procedural-related complication rate was 4.7%, including one death. Seven cases of in-stent-stenosis (12.3%; morbidity n=0) were detected on long-term follow-up with 6 of them when using the kissing-Y stenting technique.

Conclusions Endovascular treatment of various complex intracranial aneurysms using the Acandis Acclino stent systems is safe and efficient with high aneurysm occlusion rates combined with low complication rates at long-term follow-up. Overall, rates of in-stent-stenosis are low but seem to depend on the treatment technique (single stent-assisted versus kissing-Y stenting with coiling).

REFERENCES

- Goertz L, Smyk MA, Siebert E, et al. Low-profile laser-cut stents for endovascular treatment of intracranial aneurysms: incidence, clinical presentation and risk factors of thromboembolic events. *Clin Neuroradiol* 2021 Mar;31(1):107–115. doi:10.1007/s00062-019-00874-1
- Brassel F, Grieb D, Meila D, et al. Endovascular treatment of complex intracranial aneurysms using acandis acclino stents. *J Neurointerv Surg* 2017 Sep;9(9):854–859. doi:10.1136/neurintsurg-2016-012571
- Tureli D, Sabel S, Senol S, et al. Stent-assisted coil embolization of challenging intracranial aneurysms: initial and mid-term results with low-profile ACCLINO devices. *Acta Neurochir (Wien)* 2016 Aug;158(8):1545–53. doi:10.1007/s00701-016-2839-8

Disclosure Nothing to disclose

EP08

THE POWER OF INFORMATION: WEB DEVICE IN-VIVO EVALUATION WITH ENDOVASCULAR HIGH FREQUENCY OPTICAL COHERENCE TOMOGRAPHY (HF-OCT) TECHNOLOGY: FIRST IN HUMANS EXPERIENCE

B Pabon, M Patiño, V Torres, N Serna, J Pelaez, O Vargas, J Mejia. *Angioteam, Medellín, Colombia*

10.1136/neurintsurg-2021-ESMINT.8

Introduction WEB (Woven Endobridge, Sequent Medical, Aliso Viejo, California, USA) device represents a new generation of the called “endosaccular flow disruption” devices which have been designed for the treatment of wide-neck bifurcation aneurysms (WNBA). early clinical experiences have reported a good safety and effectiveness profile. Current limitations during the endovascular treatment of those WNBA using conventional approaches such as high recanalization rates, significant thromboembolic complications and need for re-treatments may be overcome using this braided technology.

Materials and Methods High-frequency optical coherence tomography (HF-OCT) consists of an endovascular catheter-based imaging technique that has been validated in either peripheral and interventional cardiology fields. OCT technology combines the use of infrared light and tridimensional reconstruction, allowing the evaluation (micron-scale level) of the inner wall of the vessel, intravascular devices implanted as well as associated hemodynamic and biological responses.

Discussion We report here, the intracranial use of OCT to evaluate the effect of a carefully selected patient with a WNBA located in posterior circulation treated with WEB technology. We describe for the first time in humans these technical and angiographic aspects intra-procedural as well as the visualization close to the histology of the findings immediately after WEB deployment.

REFERENCE

- Vardar Z, et al. High-resolution image-guided WEB aneurysm embolization by high-frequency optical coherence tomography. *J Neurointerv Surg* 2020. PMID: 32989033.

Disclosure Boris Pabon proctorship con MEDTRONIC, Microvention Consultant MIVI

EP09*

GRINT: GUIDELINES FOR REPORTING IN INTERVENTIONAL NEUROLOGICAL THERAPY – FLOW DIVERTERS

¹M Ten Brinck, ²C Taschner, ³W van Zwam, ¹H Boogaarts. ¹Radboud UMC, Nijmegen, The Netherlands; ²Freiburg University Hospital, Freiburg, Germany; ³Maastricht UMC, Maastricht, The Netherlands

10.1136/neurintsurg-2021-ESMINT.9

Introduction Studies presenting clinical and imaging outcomes regarding flow diverter treatment for intracranial aneurysms lack uniformity. This especially applies to studies reporting off-label use. Reporting guidelines like STROBE have been developed to make methodological aspects of observational studies more uniform but they do not address topic-related issues. For example, they do not give recommendations for outcome measures. Lack of uniform outcome measures affects comparability of published studies.

Aim of the Study To set up guidelines for reporting methods and outcomes in studies investigating flow diversion treatment of intracranial aneurysms.

Methods First a literature review was performed on clinical and radiological outcome measures including timing of outcome. Next a consensus statement on preferred primary outcome measures and methods was developed by experienced clinicians.

Results Outcome measures are categorized in procedural, post procedural (≤30 days) and follow up. Both clinical and radiological outcome measures are proposed.

Conclusions Uniform reporting of methods and results of neuro interventional therapy will enhance comparability of studies. In this study we will provide recommendations for the reporting of methods and outcome measures regarding flow diverter treatment.

REFERENCES

Note: This is work in progress and final recommendations have not (yet) been made. The goal of the proposed abstract/presentation is to raise and enhance awareness of this topic and thereby initiate formation of a committee/workgroup to further work on these plans.

Disclosure Nothing to disclose

EP10*

ACCURACY EVALUATION OF DERIVO FLOW DIVERTER DEPLOYED LENGTH PREDICTIONS WITH PRESIZE NEUROVASCULAR AND COMPARISON OF DEVICE SIZE SELECTION BETWEEN TRADITIONAL PLANNING AND SIMULATIONS

¹NT Ngo, ¹F Flottmann, ²F Iori, ²M Bonfanti, ²K Spranger, ¹J Fiehler, ¹M Bester. ¹Department of Diagnostic and Interventional Neuroradiology, University Medical Center Hamburg-Eppendorf, Hamburg, Germany; ²Oxford Heartbeat Ltd, London, UK

10.1136/neurintsurg-2021-ESMINT.10