Background FD had shown to be effective in excluding different types of vascular pathology (mainly aneurismatic dilation). New generation, low profile FD stents, are allowing treatment of aneurysm/dissection, lying over small, distal parent arteries. Aim To analyze and report the initial experience using the DmFD.

Methods Between April 2021 and April 2022, 15 patients were prospectively treated using the DmFD. Baseline clinical status, aneurysm morphology/morphometry, intra procedural technical details, modified Rankin Scale (mRS) at admission/discharge, follow up magnetic resonance imaging and angiographic results after treatment were collected.

Results 15 patients (60% female; mean 42.3yo, range: 28–78yo) and 18 aneurysm were embolized, either alone or coil-assisted. 10 patients (66.6%) were symptomatic, while 5 (33.3%) remained asymptomatic. Previous coiling was observed in 2 (11.1%) cases, and concomitant coiling in 1 (5.5%). Adverse events included, 1 (5.5%) guidewire perforation and in-stent thrombosis in 1 (5.5%). At discharge, 86.6% and 13.4% mRS of 0 and 1 respectively, was observed. Median Follow up of 7.5 months was achieved, by MRI/DSA in 100% of the patients. In MRI, complete occlusion or a small remnant was observed in 83% (15/18) or a small aneurysmal remnant, OKM C1-C3 respectively. Complete occlusion OKM D was observed in 80% (14/18) and 11.1% (2/18), respectively. Complete occlusion OKM D was observed in 83.3% (15/18) or a small aneurysmal remnant, OKM C1-C3 in 5,55% (1/18) under DSA. No mortality related case was observed during Follow Up.

Conclusion The DmFD showed to be safe and effective, with high occlusion rates and low complication adverse events. Longer Follow up and bigger cohorts of patient is needed.

REFERENCES

Do you have any conflict of interest to declare?: No

Twig-like MCA is an extremely rare entity, believed to result from the persistence of the fetal intracranial arterial network that normally merges into a definitive MCA. This vascular lesion is frequently misdiagnosed, and seems to be related to a higher incidence of aneurysms and susceptibility to both ischemic and hemorrhagic strokes.

We report a case of a 37-year-old woman who was submitted to endovascular treatment of an AComA ruptured aneurism associated with a left twig-like MCA.

This case highlights the clinical impact of twig-like MCA and emphasizes its uncertain follow-up strategy.

REFERENCES

Do you have any conflict of interest to declare?: No