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/post 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 coils-assisted. 10 patients (66% were symptomatic, while 5 (33.3%) remained asymptomatic. Previous coiling was observed in 2 (11%) 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 17/18 (94.4%) and 11/18 (61.1%), respectively. Complete occlusion or 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: A VASCULAR ANOMALY ASSOCIATED WITH ANEURYSMS

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 aneurysm 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