

PubMed and other databases was conducted for studies from all available dates.

Conclusion The adoption of TRA for neuroendovascular procedures has been increasing in popularity as a primary method to perform both diagnostic and therapeutic procedures. We observed a preference towards the transradial approach in our patients who underwent angiograms through both access sites.

Disclosure of Interest Nothing to disclose

P038/315 CLINICAL OUTCOME OF EPIDURAL BLOOD PATCH IN LOW CSF PRESSURE

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Introduction Epidural blood patch (EBP) involves injecting autologous blood into the epidural space, with the aim of sealing off the site of cerebrospinal fluid (CSF) leak secondary to dura tear, as well as increase the intracranial pressure by mass effect causing CSF from the spinal compartment to enter the intracranial compartment. Current evidence demonstrates efficacy of EBP in managing low CSF pressure syndrome, which could be secondary to various etiology including post dura puncture, as well as spontaneous intracranial hypotension (SIH).

Aim of Study We aim to report our local pathway and outcomes in performing EBP in a tertiary centre.

Methods Retrospective data analysis performed to identify all patients treated with EBP our center. Total of 110 procedures were identified over the past 5 years. Outcomes are categorized as complete, partial (more than 3 months), inadequate (0–3 months), or no relief. Patients should at least return to their daily activities to be considered as a relief to symptoms. Other data collection includes basic demographics and indication for referrals.

Results Patients recorded were predominantly female (74 vs 36). Median age is 44 years old. Most common indication for referral includes SIH, post dura puncture headache (PDPH) or low pressure headaches. 29 cases had complete response, 28 had partial response, 26 had inadequate response and 27 had no response.

Conclusion Our experience demonstrates the role of EBP in managing patients with low CSF pressure symptoms in our center, with approximately 50% of cases reporting at least more than 3 months symptom relief.

Disclosure of Interest Nothing to disclose for all authors.

P039/328 ENDOVASCULAR TREATMENT IN CEREBRAL VENOUS THROMBOSIS: SAFETY AND EFFICACY IN AN INTERNATIONAL TWO-CENTER REGISTRY

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Introduction The standard acute treatment of Cerebral Venous Thrombosis (CVT) is anticoagulation. After several uncontrolled studies and one randomized clinical trial, there is still uncertainty regarding the role of endovascular treatment (EVT) in this scenario.

Aim of Study To evaluate safety and efficacy of EVT in CVT combined with best medical care.

Methods We performed a retrospective analysis of an international two-center registry.

Results EVT was performed in 20% (12/58) of CVT patients with a median time from diagnosis to treatment of 4.5h (1.25–28.5). Compared to medical therapy alone, EVT patients had higher baseline NIHSS [median 5.5 (2–17) vs 0 (0–3) p=0.004] and basal CT showed higher rates of intracerebral hemorrhage (41.7% vs 6.4%, p=0.006). EVT was performed using transjugular access in half of the patients and transfemoral access in the other half. Aspiration with large bore catheters was performed in every case with angioplasty in 7 out of 12 patients and stenting in 3 out of 12 patients. Recanalization was achieved in 75% of the patients with a median time from puncture to recanalization of 90 (74.3–157.5) minutes. No postprocedural complications were observed. We found a significant improvement from baseline to discharge median NIHSS in patients submitted to EVT [5.5 (2–17) vs 1(0–3.75) p<0.001].

Conclusion In our series, endovascular treatments in CVT combined with anticoagulation was safe and efficacious as evidenced by angiographic findings and clinical improvement.

Disclosure of Interest Nothing to disclose

4. Ischemic stroke

P040/41 IMAGING STUDY IN STROKE DIAGNOSIS AND TREATMENT IN A REFERRAL CENTER CHILE

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Imaging study in Stroke diagnosis and treatment in a referral center in Chile.

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Introduction For the development of the work of nurses, technologists, technicians Angiosuite staff. It is necessary to identify the main characteristics of diagnostic imaging, treatment, and follow-up in acute ischemic accidents. This paper aims to present a literature review and based on our own experience in the use of tools, imaging updates and development, focusing the presentation on the central data of the images that should be known.

Aim of Study The main objective is to share the main topics of imaging visualization in ischemic stroke.

Methods We review the latest publications related to Stroke imaging, and compare them with our patient database, on this thorough review we reach some relevant conclusions to share, the main features that we must learn and review in each patient. To obtain the best possible result.

Results Angiosuite the review of more than 3 years of treatment and diagnosis of patients affected with Stroke. With its main imaging features.