lumbar spine(45.4%) were the most frequently treated levels. Lung(27.1%), breast(24.3%), genitourinary(11%), gastrointestinal(9.3%), and prostate cancers(5.2%) were the most prevalent primary tumors.Geographically, the majority of studies originated from Europe(39.7%), followed by China(29.4%) and the USA(26.5%).

Conclusion This analysis demonstrates the widespread adoption of ablation techniques for treating spinal metastases across various countries and cancer types. The global reach of these techniques highlights the need for a multidisciplinary approach involving radiation oncologists, surgeons, and neurointerventional radiologists for optimal management of these complex patients.

Disclosure of Interest no.

3.1. Innovation

P170 SINGLE ANTI-PLATELET THERAPY AFTER IMPLANTATION OF THE NOVEL DERIVO FLOW DIVERTING STENT WITH HEAL TECHNOLOGY: THE SAFE STUDY

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Introduction Flow diversion has well established for the treatment of cerebral aneurysms, however, the need for dual antiplatelet therapy is a significantly limiting factor.

Reduction of the essential antiplatelet regimen may enable flow diversion for currently ineligible patient groups e.g. in the acute setting and/or under multimedication and might further reduce the risk of treatment-related adverse events.

Aim of Study The aim of the study was to observe the angiographic and clinical outcome of the endovascular treatment with the novel Derivo with Heal technology under prasugrel monotherapy.

Methods Between December 2022 and December 2023 patients were prospectively included. Demographic data, procedural details, antiplatelet regimen and adverse events were recorded.

Results 33 lesions were successfully treated with the D2heal under prasugrel monotherapy.

Directly treatment-related adverse events were observed in five patients. Four were resulting from insufficiency of the femoral closure device and were resolved by stenting. In another, treatment of a giant inflammatory ICA aneurysm causing progredient vision loss was performed uneventfully. The patient presented hemiparesis and aphasia due to SAH postinterventionally. The neurologic deficits were completely regredient until discharge.

Immediately after the implantation, a high percentage (44%) of the lesions remained unaltered in flow. At the first angiographic follow up proposed 3 months after the intervention 53% of the lesions were completely occluded; 43% showed diminished flow. Only 4% (n=1) showed no changes in perfusion.

Conclusion The D2heal under prasugrel monotherapy is safe and efficient. No increase in risk of ischaemia was observed. However, multicentric studies are warranted.

3.5. Miscellaneous

P171 THE SAFETY OF CEREBRAL ANGIOGRAPHY IN THE HANDS OF EXPERIENCED PRACTITIONERS: A RETROSPECTIVE EVALUATION OF INCIDENCE AND CLINICAL SIGNIFICANCE OF ISCHEMIC LESIONS

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Introduction The safety of diagnostic cerebral angiography, a commonly used procedure, has been a topic of ongoing discussion in the medical community. While the procedure is invaluable for diagnosing a variety of cerebral conditions, concerns about its safety persist, particularly regarding the risk of ischemia.

Aim of Study This retrospective study aimed to evaluate the safety of diagnostic cerebral angiography by an experienced physician.

Methods A retrospective study was conducted on 300 consecutive patients who underwent diagnostic cerebral angiography. All procedures were performed by the same experienced physician using the same technique. Diffusion-weighted magnetic resonance imaging (MRI) was conducted within 24 hours post-angiography.

Results Post-angiography, diffusion-weighted MRI identified 22 bright lesions (median 1.3 lesions per patient) in 17 patients, indicative of embolic events. Importantly, no new neurological deficits were observed following any angiographic procedure. The frequency of lesions in diagnostic angiography was significantly higher in male patients and those with a history of cervical and intracranial atherosclerosis. The frequency of lesions correlated also with fluoroscopy time.

Conclusion The incidence of silent embolism is significantly lower than that reported in the existing literature proving that the cerebral angiography is a safe diagnostic method in an optimal setting and experienced hands.

Disclosure of Interest no.

3.1. Innovation

P172 STENTING OF SYMPTOMATIC CEREBRAL SINUS STENOSIS WITH THE LASER CUT SELF-EXPANDING SUPER LARGE ACCLINO STENT – INITIAL EXPERIENCE

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Introduction Lateral sinus stenosis represent a cause for intracranial hypertension and pulsatile tinnitus. Extrinsic aswell as intrinsic stenosis may be the target of endovascular treatment.

Aim of Study To present the initial experience of sinus stenosis treatment with the novel self-expanding large Acclino stent.

Methods Patient history, clinical findings and procedural data were reviewed. Diagnostic workup comprised neurological examination and in case of suspected intracranial hypertension