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Transvenous embolization in treatment of refractory carotid-cavernous sinus fistula

Teng-Fei Li

Zhengzhou University, China

Transvenous embolization in treatment of refractory carotid-cavernous sinus fistula: Purpose To investigate the effects of transvenous embolization in treatment of refractory carotid-cavernous sinus fistula (CCF). Materials and Methods Twenty-five patients of refractory CCF with 28 foci underwent transvenous embolization, femoral vein-inferior petrosal sinus approach was used in 16 of which, and femoral vein-facial vein-superior ophthalmic vein approach was used in 12 of which. The embolizing materials included controlllable coils (GDC,EDC), free coil and silk. Three to twenty-four months after the treatment angiography was conducted on 10 patients and telephone follow-up was conducted on the other 18 patients. Results Immediate complete angiographic obliteration of the fistula was achieved in 20 patients. Residual shunting was left in 5 patients, 2 with pterygoid drainage and 3 with inferior petrosal sinus drainage. Headache and vomiting were the common symptoms after embolization. The angiography during follow-up showed that there were residual shunting in 4 patients, residual inferior petrosal drainage in 1 patient, and residual pterygoid drainage in 1 patient, and that no reoccurrence was found in the 6 patients with complete angiographic obliteration. The patients undergoing telephone follow-up reported that they had not any symptom. Conclusion Safe and effective, transvenous embolization can be the first choice after the failure in treatment of the carotid-cavernous sinus fistula.

Biography

T-F Li has completed his PhD at the age of 29 years from Zheng zhou University. He is an expert in interventional neuradiology. He has published more than 10 papers in reputed journals

soulma@126.com

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