Surgical Treatment of Distal Cerebral Aneurysms.

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Introduction: Distal cerebral aneurysms are rare lesions (<10% among all intracranial aneurysms). Published experience surgical treatment them is usually very limited.

Purpose: Examine results surgical treatment patients with distal cerebral aneurysms.

Methods: We reported our surgical experience treatment and clinical outcomes for 100 patients with distal cerebral aneurysms treated in our department between January 2000 and December 2016. All analysis was retrospective.
Results.

**Site**
- MCA (20%)
- ACA (62%)
- PCA (12%)

- PICA - 5%
- SCA - 1%

**Shape**
- Saccular / fusiform
  - 86%
  - 14%

**Size**
- Proximal: 9 mm
- Distal: 6 mm
- mediana

**Operation**
1. Clipping - 80%
2. Trapping - 12%
3. Trapping + revascularization - 5%
4. Wrapping - 3%

**Results**
- MCA, PICA: better
- ACA, PCA: worse

- GOS I: 71%
- GOS II: 18%
- GOS III: 11%
- GOS IV-V: 71%
Results.

**Bypass**
5%

**Neuronavigation**
25%

Minimal Dissection
Conclusion.

1. The A3 segment ACA and M2 segment MCA were the most common sites of distal aneurysms.

2. Distal aneurysms can be difficult for surgical treatment because of their increased fusiform morphology.

3. Microsurgical treatment for patients with distal cerebral aneurysms can have a good outcome with correctly selected techniques (neuronavigation, revascularization methods et al.).

4. Algorithm of treatment is determined by the anatomical location, shape of the aneurysms and clinical condition of the patient.