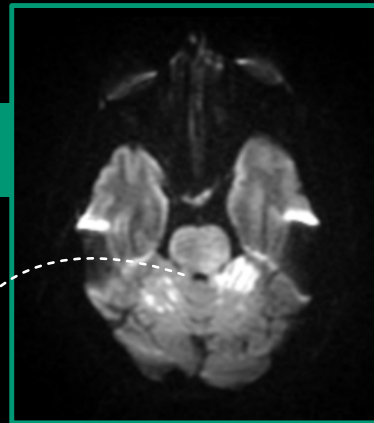


# Case 2: Basilar Thrombectomy

## 67 YEAR OLD MALE

- Presented with acute onset giddiness, vomiting followed by altered sensorium 1 hour prior to admission
- On examination
- BP was 200/130, breathing heavily
- He was unconscious, pupils - reacting to light
- Quadriplegia with decerebration on painful stimulus
- He was emergently intubated and ventilated
- MRI showed posterior circulation stroke - bilateral cerebellar and brain stem infarcts
- MR Angiogram - There was total occlusion of basilar artery

Diffusion weight images shows acute bilateral cerebellar and brainstem infarcts



Bilateral Cerebellar &  
Pontine Infarcts



Basilar Artery Total  
Occlusion

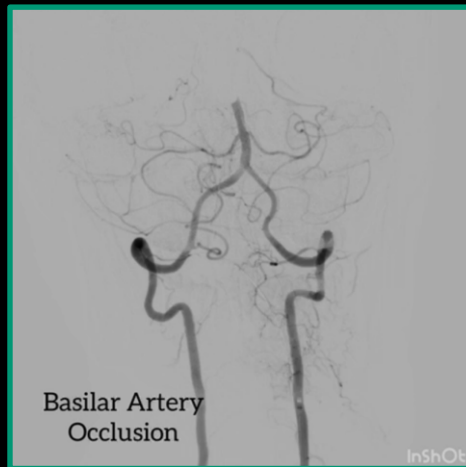


Scan/click to view  
Cath Images



Scan/click to view is  
Patient's clinical status

- He was immediately shifted to Cath lab - his DSA showed basilar total occlusion
- He Underwent Mechanical Thrombectomy (Video)
- He improved gradually over 3-4 days
- Extubated on 3rd day
- Discharged on 6th day without any focal deficits



one month follow up  
no deficits

