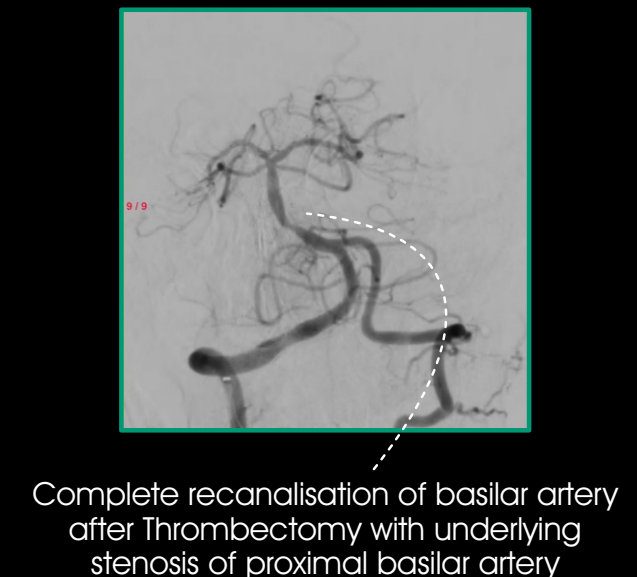
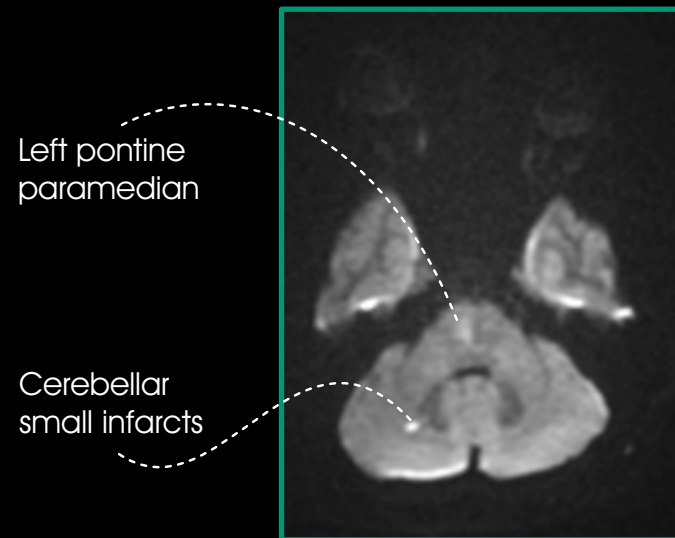


Case 3: Basilar Thrombectomy & Stenting

50 YEAR OLD MALE

- Presented with right upper & lower limb weakness grade 2 with severe slurring of speech & difficulty in swallowing 12 hours prior to admission
- MRI showed left pontine and bilateral cerebellar infarcts
- MRI angiogram showed basilar artery total occlusion
- There was significant clinical and radiological miss match suggesting penumbra hence patient was immediately taken to cath lab and underwent mechanical thrombectomy, there was complete recanalisation however there was underlying proximal basilar artery stenosis.

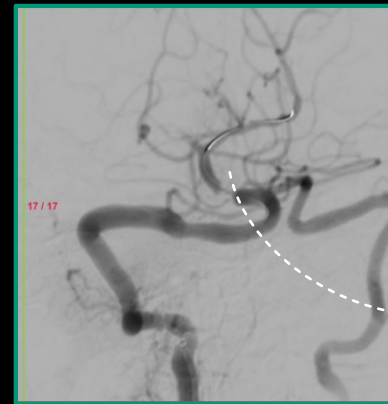




Scan/click to view
Cath Images

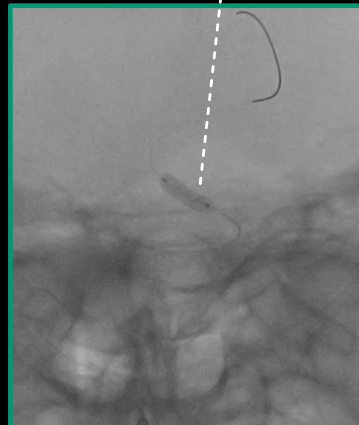
- Patient improved almost completely except mild dysarthria
- Next day morning patient deteriorated again, became deeply drowsy with quadriparesis grade 1-2
- Patient was intubated and again shifted to Cath lab - there was re-occlusion of the basilar artery
- He again underwent thrombectomy followed by basilar angioplasty and stenting in view of underlying stenosis

Basilar Artery
Total re-occlusion



Re-canalisation of Basilar
artery with underlying Severe
stenosis of proximal basilar artery

Balloon Angioplasty



Post Angioplasty



Post Stenting





Scan/click to view is
Patient's clinical status

- There was no further deterioration
- Patient was extubated after 6 days after stabilization
- On discharge patient was able to stand with support had left sided weakness, significant gait ataxia and severe dysarthria
- He improved almost completely over a period of 6 weeks



Six weeks follow up

ENDOVASCULAR TREATMENT OF ANEURYSM

Endovascular treatment for aneurysms involves using minimally invasive techniques to treat a weakened or bulging area in a blood vessel, known as an aneurysm. The most common type of aneurysm treated with endovascular techniques is a cerebral or intracranial aneurysm, which occurs in blood vessels within the brain.

This technique for aneurysms is less invasive than traditional surgical approaches, and it often results in shorter recovery times for patients. The specific technique chosen depends on factors such as the size and location of the aneurysm, as well as the patient's overall health. The choice between endovascular treatment and open surgery is typically made by a multidisciplinary team of interventional neurologist, neurosurgeons and other specialists based on the individual characteristics of the aneurysm and the patient.