Clip reconstruction of giant vertebral artery aneurysm after failed flow reduction therapy

Toshikazu Kimura, M.D.,1 Taichi Kin, M.D., Ph.D.,2 Masaaki Shojima, M.D., Ph.D.,2 and Akio Morita, M.D., Ph.D.3

1Department of Neurosurgery, NTT Medical Center Tokyo; 2Department of Neurosurgery, the University of Tokyo Hospital; 3Department of Neurosurgery, Nippon Medical School Hospital

Flow reduction therapy is sometimes utilized for difficult aneurysms, but it does not always work. A 42-year-old man presented with headache, dizziness, and slight gait disturbance due to left thrombosed giant vertebral aneurysm. Clip ligation of the VA after the PICA origin was performed for flow reduction based on the CFD analysis. Two months later, the aneurysm showed minor hemorrhage and hydrocephalus, and thrombectomy and clip reconstruction of the VA was performed. He returned to work with slight ipsilateral facial palsy (House & Brackmann grade 2).

The video can be found here: http://youtu.be/-AUVk6nxefQ.

KEYWORDS anterior petrosal approach; transcondylar approach; thrombosed giant aneurysm; vertebral artery aneurysm; video