

Pipeline in Giant Unruptured ICA Aneurysm

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Disclosures

Medtronic/Covidien: Consultant, Speaker, Proctor
for Pipeline and Barrel

Stryker: Consultant, Speaker

Codman Neurovascular: Consultant, Speaker

Surpass, InNeuroCo: Stock holder

Giant Fusiform Aneurysms

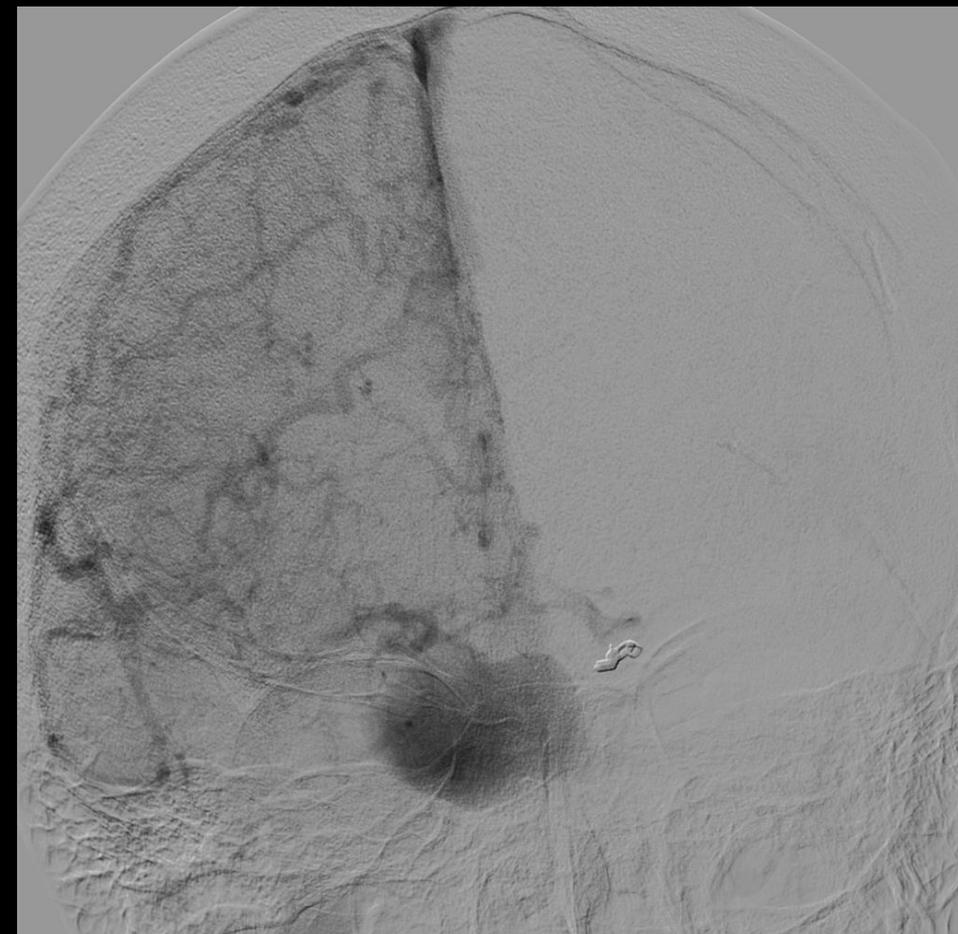
- Great result with PED implant
- Anchor PED distally, be ready to deploy multiple devices
- Angioplasty to insure distal and proximal wall apposition

Patient

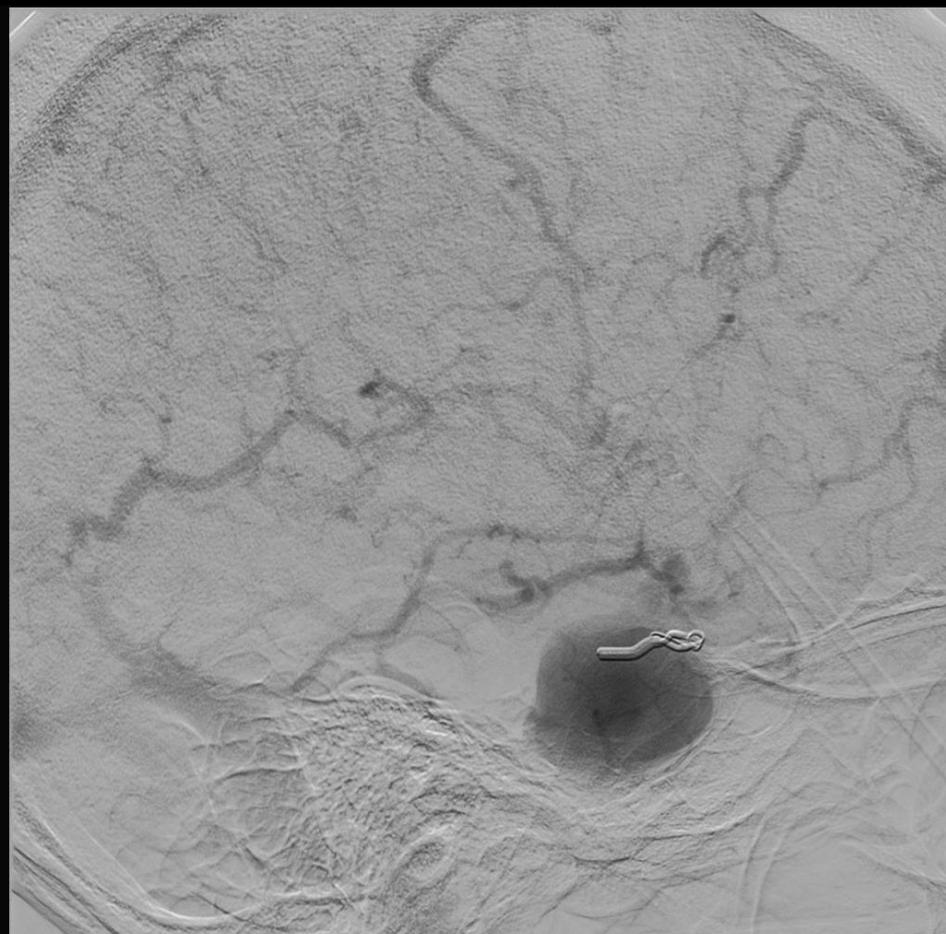
- 64 year old woman with severe headaches
- Found to have a large R ICA cavernous aneurysm
- Previously underwent clipping of a left Pcomm aneurysm
- Subsequently, developed right III and VI CN palsy
- Aneurysm was noted to be enlarged from previous studies







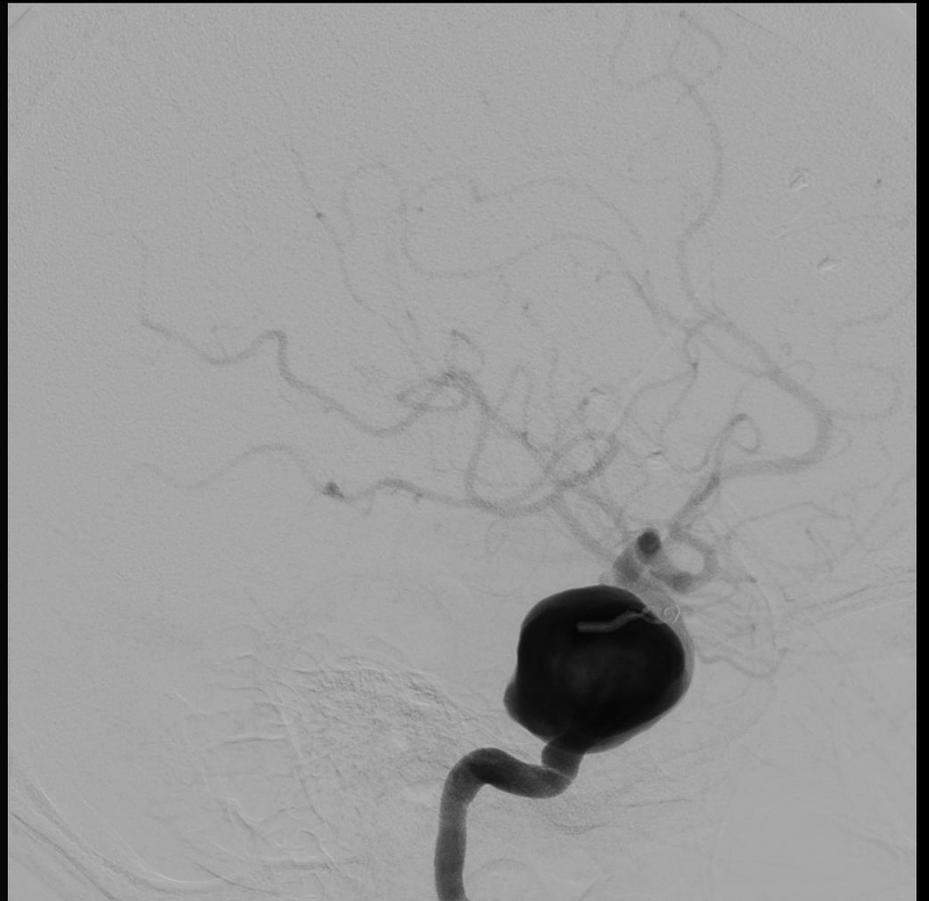
DSA – RICA AP



DSA – RICA Lat



DSA – LICA AP



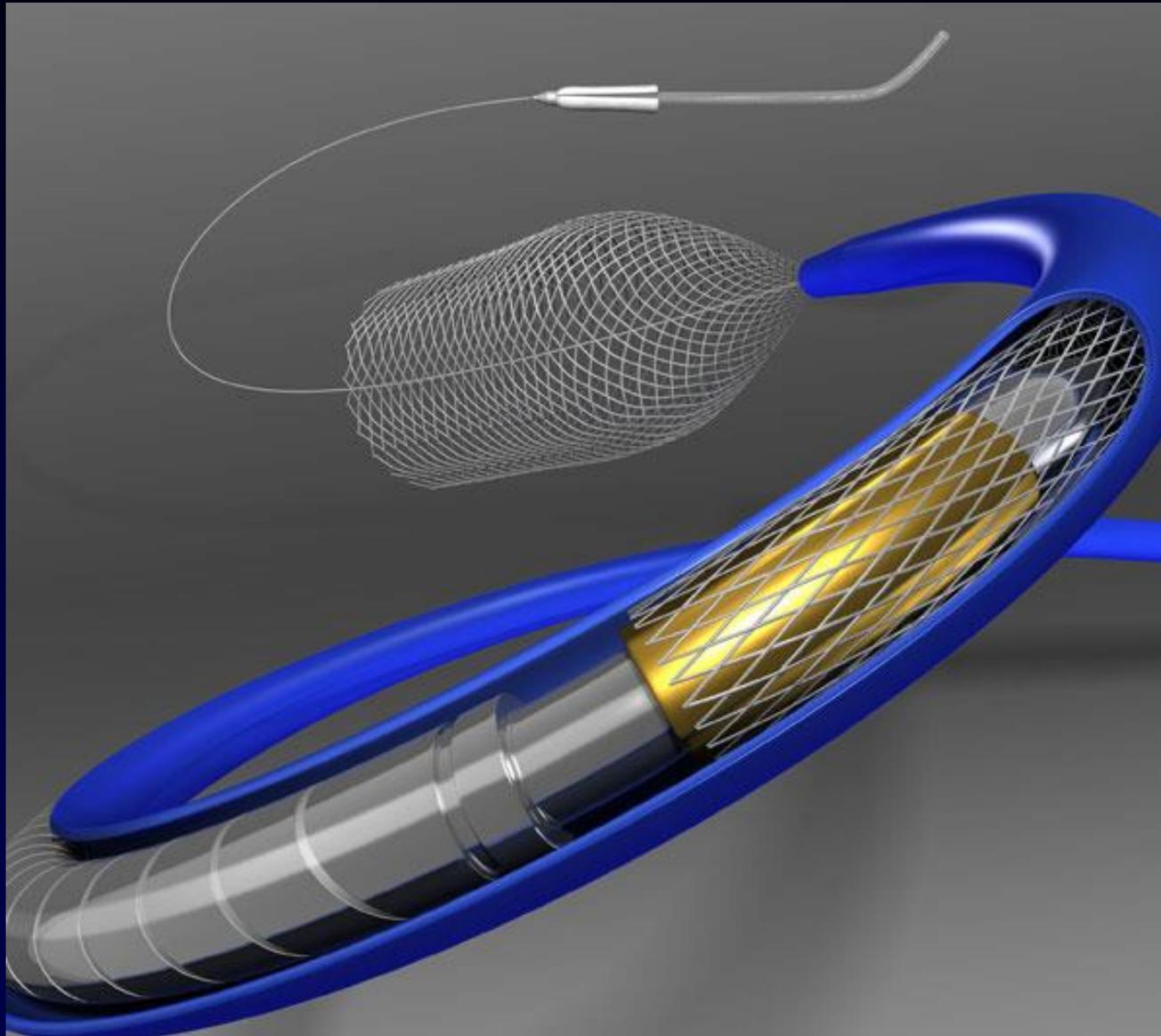
DSA – LICA Lat

Rot: RAO 8°
Ang: Caud 6°



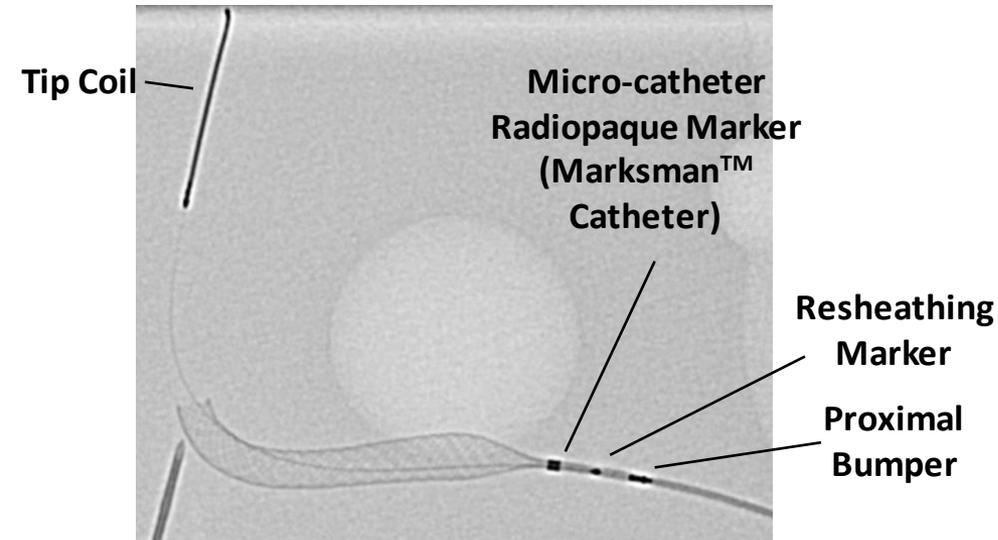
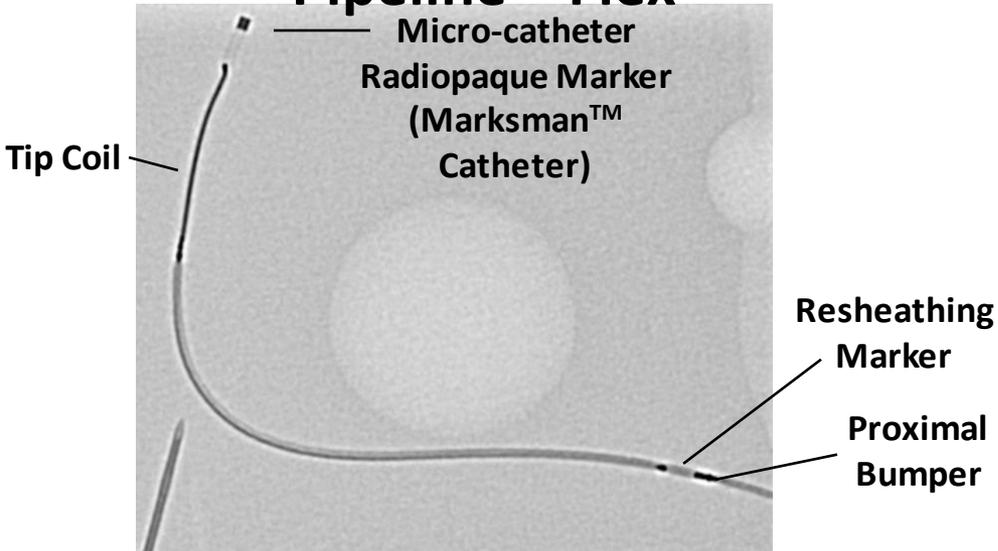
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Pipeline FLEX

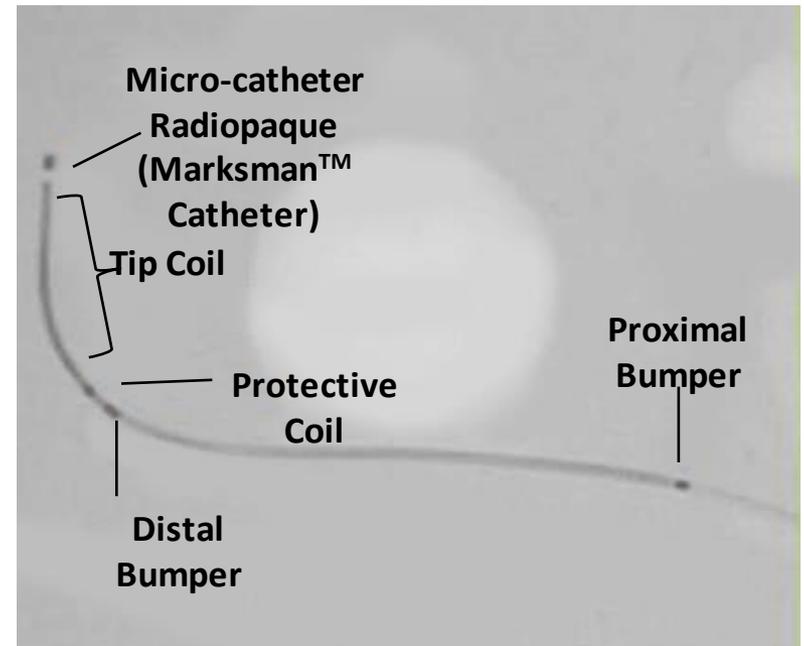


Under Fluoroscopy

Pipeline™ Flex

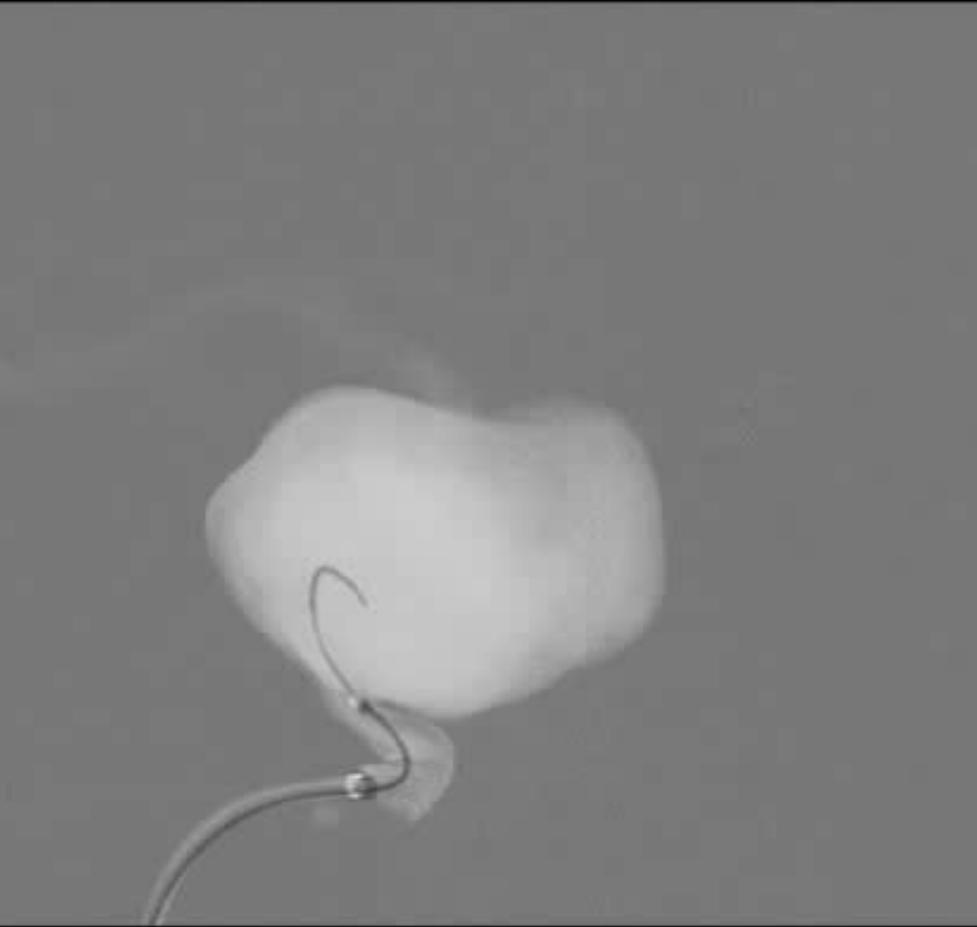


Classic PED

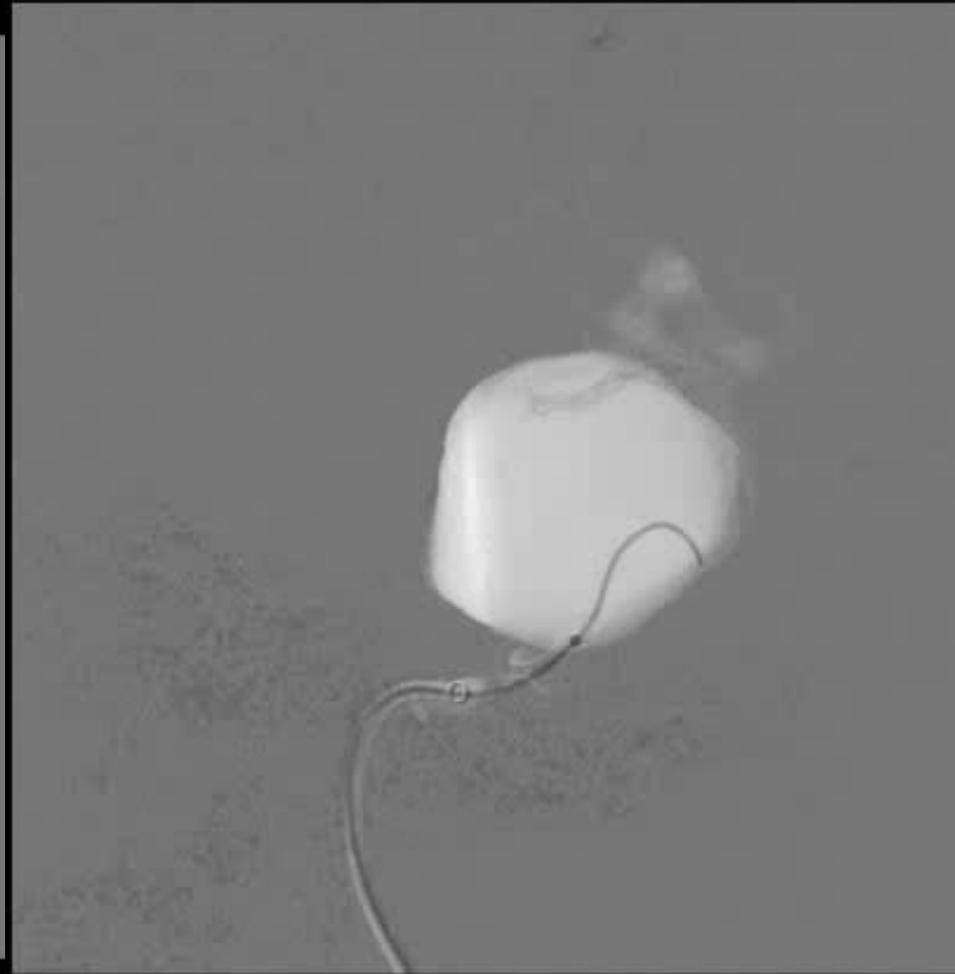


Set up

- Neuron Max
- Navien 00.58''
- Marksman
- Synchro 0.014''



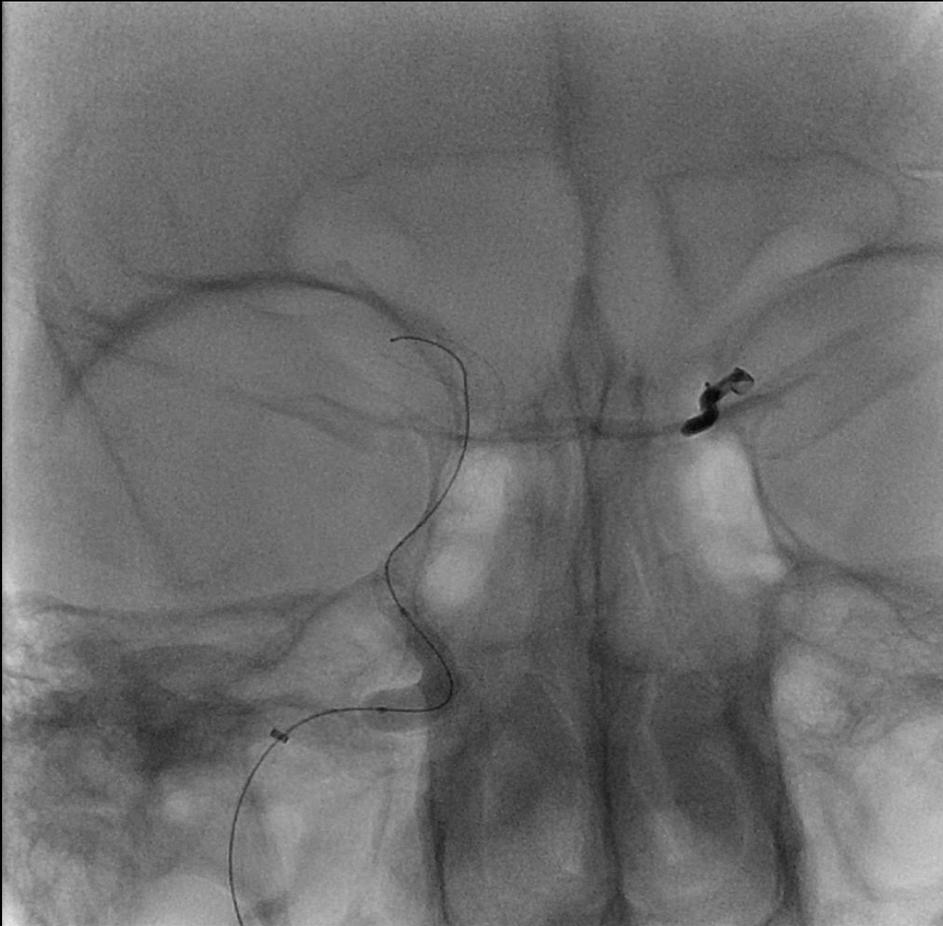
DSA – RICA AP



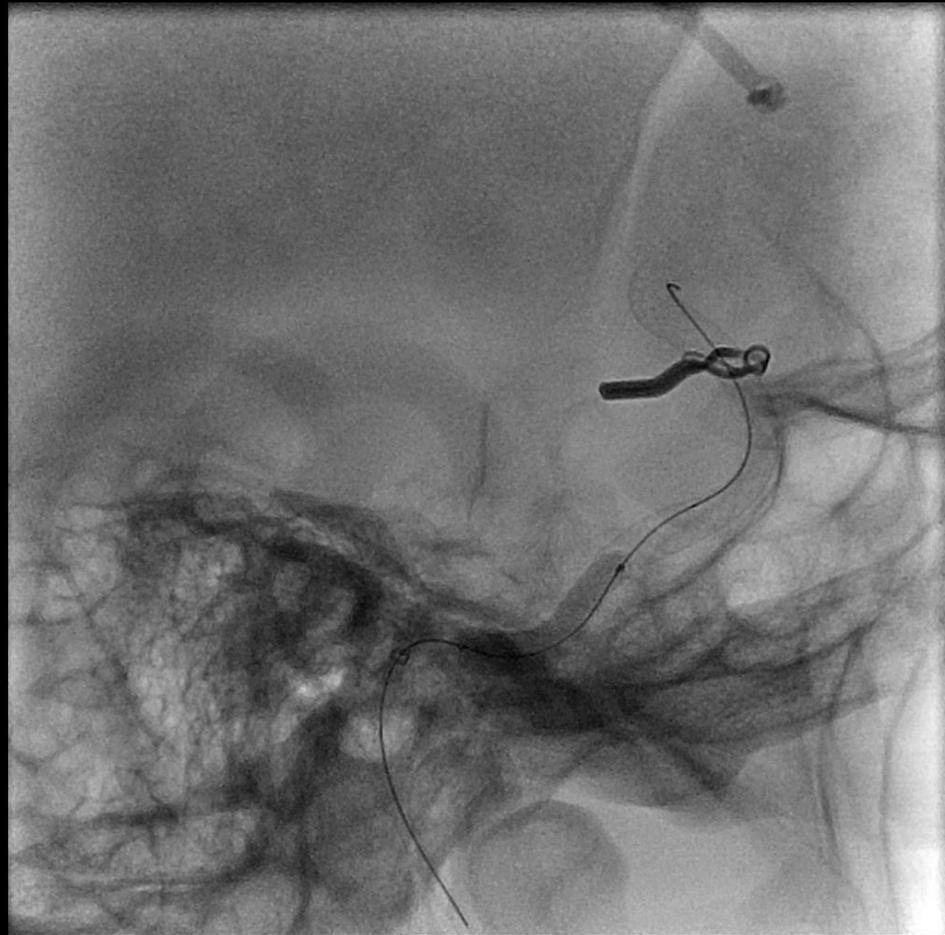
DSA – RICA Lat

Patient

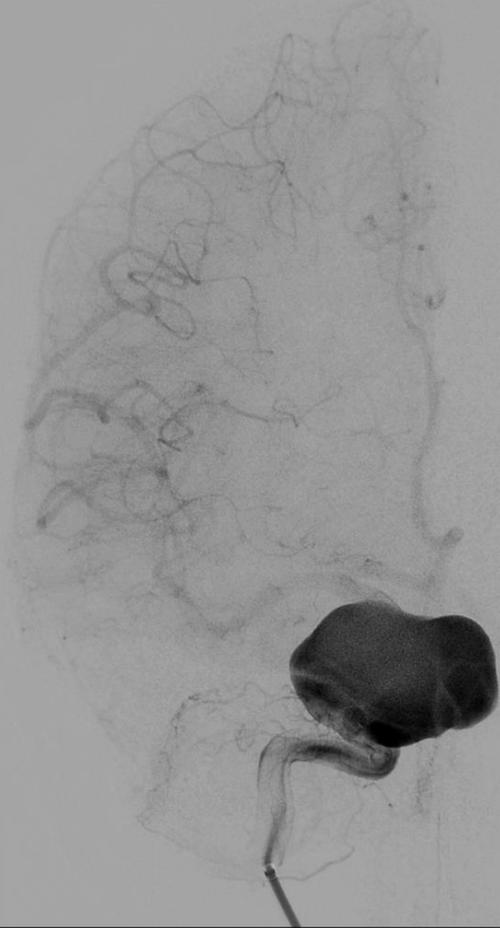
- PED Flex 4 x 35 mm
- Subsequently a 4 x 25 mm was deployed inside the first PED



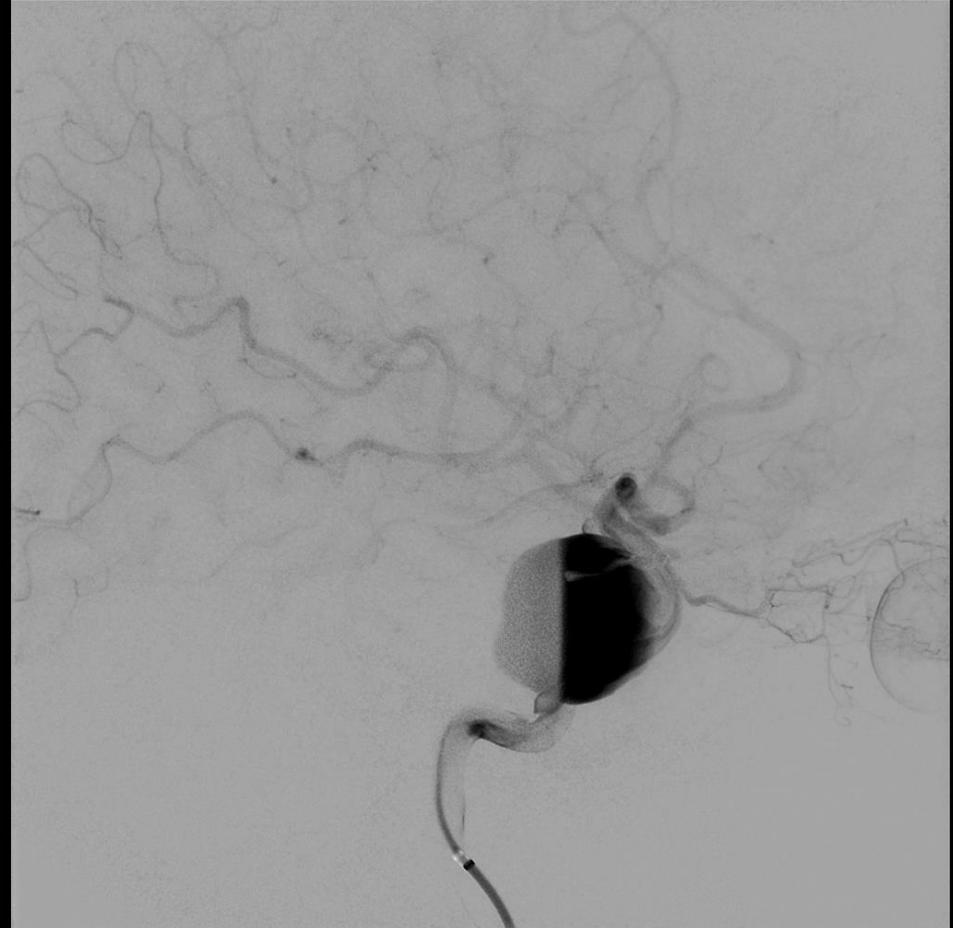
DSA – RICA AP



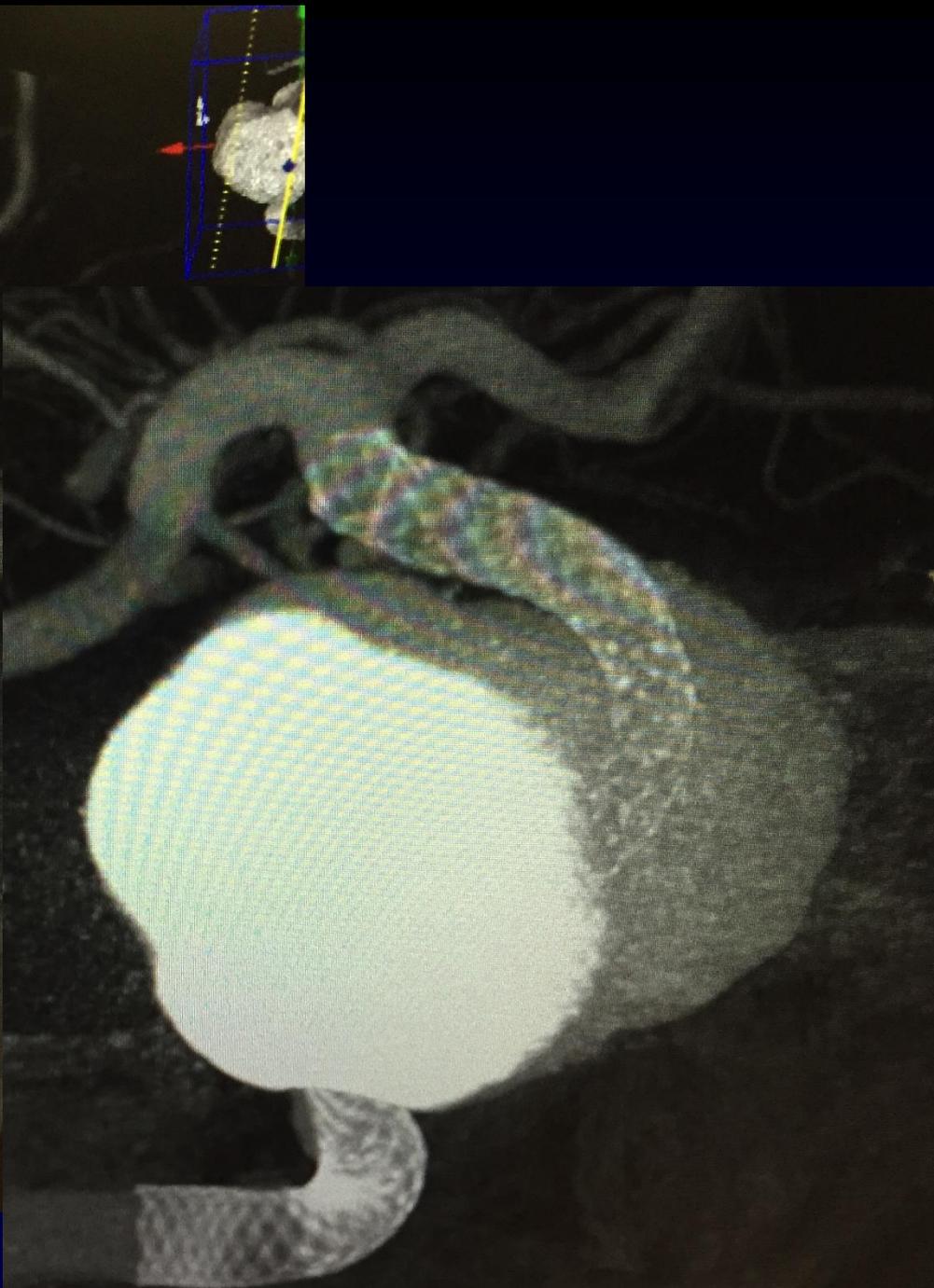
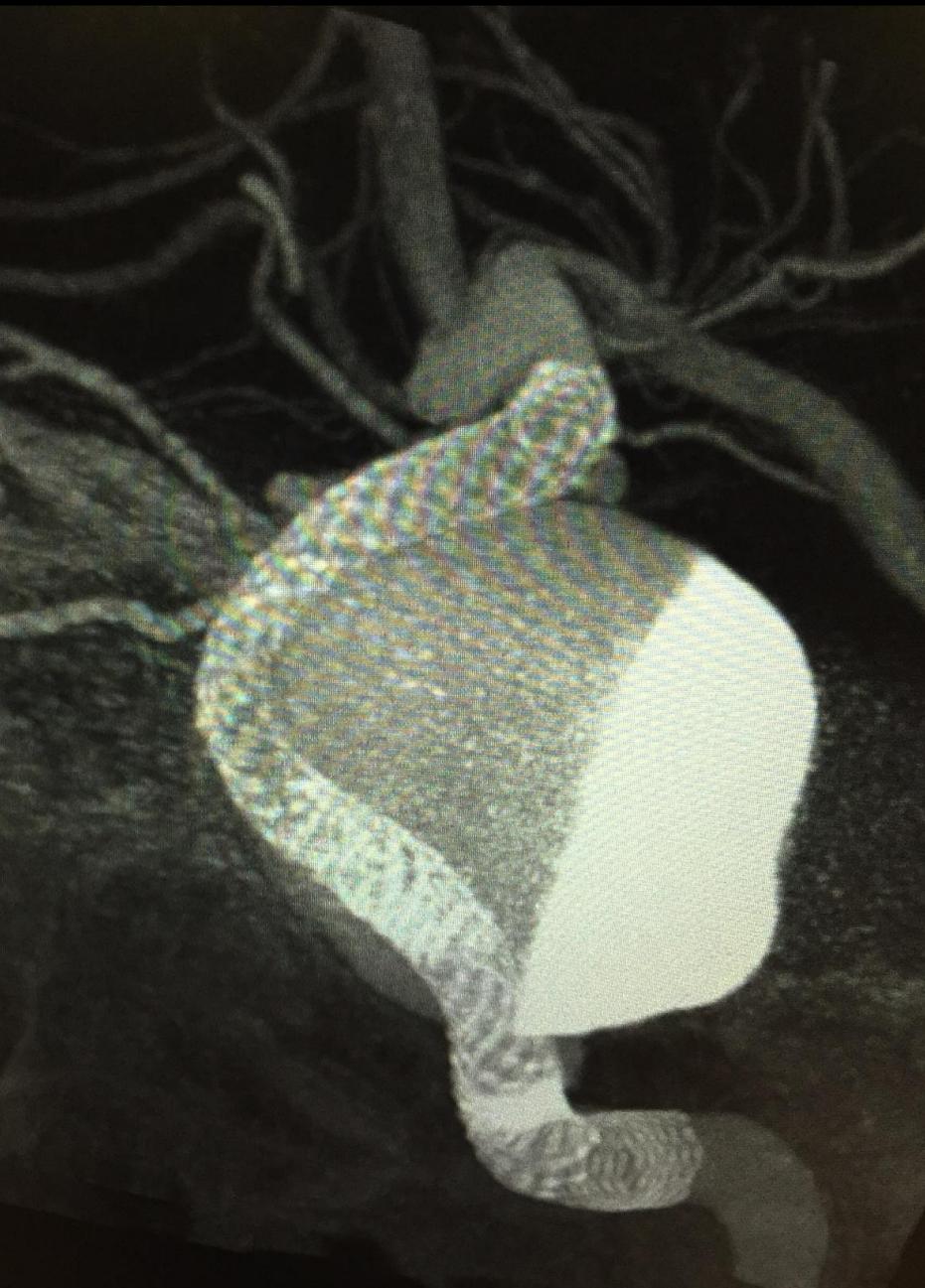
DSA – RICA Lat



DSA – LICA AP

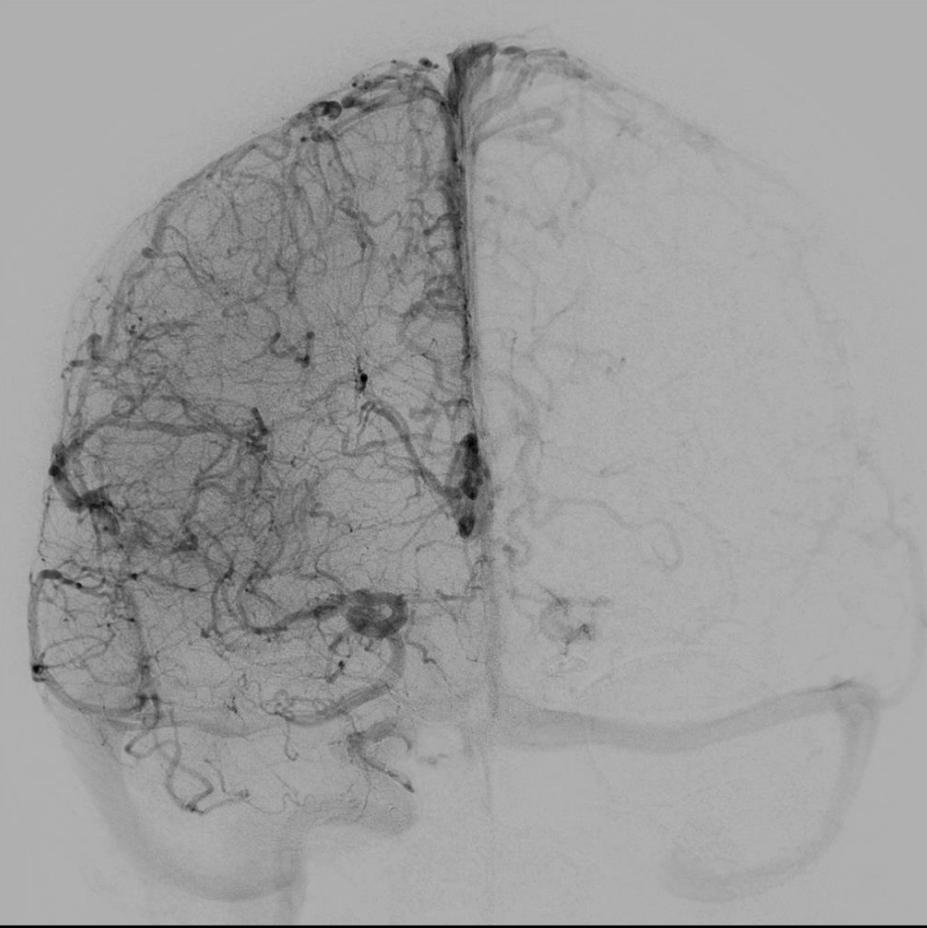


DSA – LICA Lat

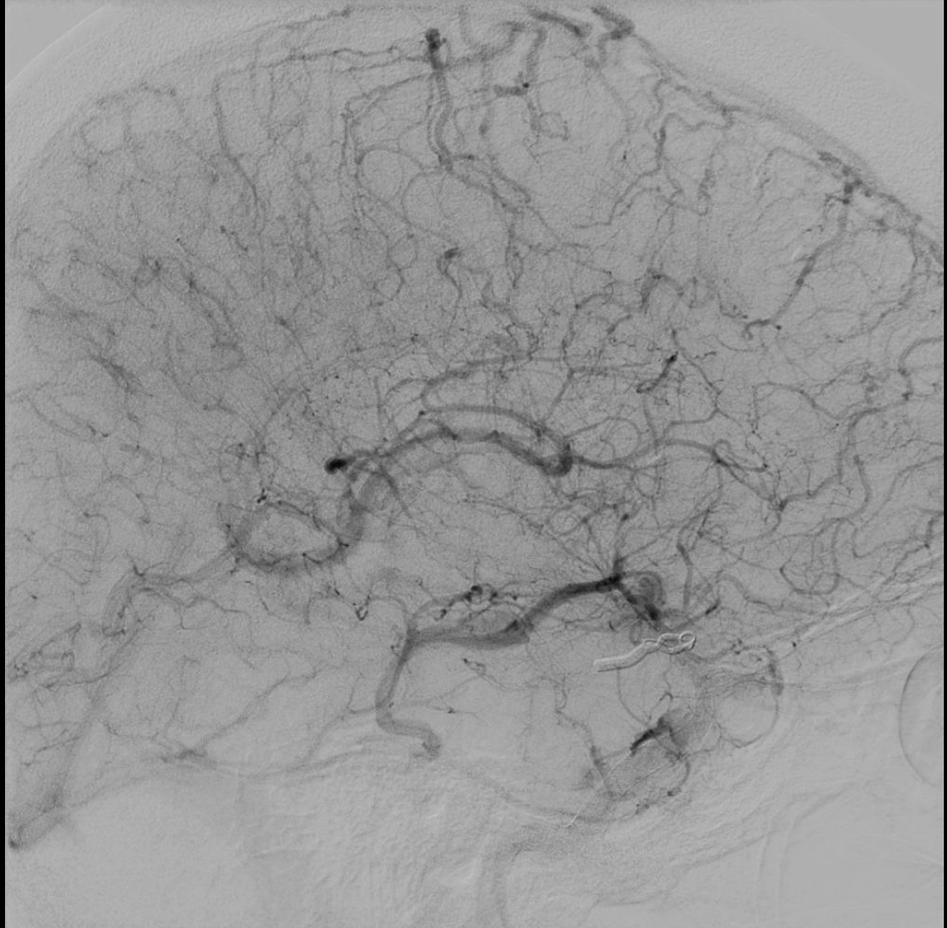


Follow-Up

- 30 days later she underwent treatment of a regrowth of the previously clipped Left Pcomm aneurysm
- Therefore angiography of the right ICA was performed



DSA – LICA AP



DSA – LICA Lat