

Aneurysm

- [Continuous Intravenous Nimodipine Infusion With Ethanol as Carrier in Aneurysmal Subarachnoid Hemorrhage Does Not Result in Measurable Cerebral Ethanol Levels](#)
- [A Case of a Non-giant Intracranial Aneurysm with Spontaneous Occlusion Directly Observed during Clipping Surgery](#)
- [Rothia Aeria Bacteremia Complicated by Cerebral Mycotic Aneurysms: A Case Report](#)
- [Animal model of a bovine pericardial patch for thoracoabdominal aortic aneurysms: step by step](#)
- [Incessant atrial tachycardia associated to atrial septal aneurysm treated by pulsed field ablation](#)
- [Blood-Brain Barrier Disruption Predicts Poor Outcome in Subarachnoid Hemorrhage: A Dynamic Contrast-Enhanced MRI Study](#)
- [Defining popliteal artery aneurysm: a systematic review of the morphological assessment used for diagnosis and treatment](#)
- [ROLE OF FRAILTY IN PREDICTING OUTCOMES AFTER SURGICAL REPAIR OF ABDOMINAL AORTIC ANEURYSM: A SYSTEMATIC REVIEW AND META-ANALYSIS](#)



An aneurysm or aneurism (from Greek: ἀνεύρυσμα, aneurusma, “dilation”, from ἀνευρύνειν, aneurunein, “to dilate”) is a localized, blood-filled balloon-like bulge in the wall of a blood vessel.

Aneurysms can occur in any blood vessel with examples including aneurysms of the circle of Willis in the brain, aortic aneurysms affecting the thoracic aorta, and abdominal aortic aneurysms. Aneurysms can also occur within the heart itself.

Rupture

As an aneurysm increases in size, the risk of rupture increases.

A [ruptured aneurysm](#) can lead to bleeding and subsequent hypovolemic shock, leading to death. Aneurysms are a result of a weakened blood vessel wall, and can be a result of a hereditary condition or an acquired disease.

The most frequent location is the [arterial bifurcation](#).

Classification

see [Aneurysm classification](#)

Parts

[Dome](#)

Pathogenesis

see [Intracranial aneurysm pathogenesis](#).

Conditions associated with aneurysms

see [Conditions associated with aneurysms](#)

Treatment

Evolving endovascular technologies need to be integrated into the microsurgical management of aneurysms. Multimodality approaches are best used with complex aneurysms in which conventional therapy with a single modality has failed. Revascularization remains a unique surgical contribution to the overall management of aneurysms with which current endovascular techniques cannot be used. Multimodality management should be considered an elegant addition to the therapeutic armamentarium that, through simplification and increased safety, improves the treatment of complex aneurysms beyond what is achievable by performing clipping or coiling alone ¹⁾.

Aneurysm models

[Aneurysm model](#)

¹⁾

Lawton MT, Quinones-Hinojosa A, Sanai N, Malek JY, Dowd CF. Combined microsurgical and endovascular management of complex intracranial aneurysms. *Neurosurgery*. 2008 Jun;62(6 Suppl 3):1503-15. doi: 10.1227/01.neu.0000333814.02649.a0. PubMed PMID: 18695569.

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