

# Chronic Cerebral Ischemia Treatment

see also [Acute Ischemic Stroke Treatment](#).

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[Carotid artery stenting](#)

## Revascularization for Chronic Cerebral Ischemia Treatment

[Revascularization for Chronic Cerebral Ischemia Treatment](#).

## Stem Cell Treatment for Ischemic Stroke Recovery

The role of cellular [transplantation](#) to promote [functional recovery](#) after [stroke](#) has been evaluated over the last two decades. Preclinical studies first established the potential for cultured [neuronal](#) cells derived from a [teratocarcinoma](#) cell line to be tested for safety and efficacy in the treatment of human [stroke](#). In [animal models](#) of stroke that caused reproducible learning and motor deficits, injection of neuronal cells resulted in a return of learning behavior, retention time, and motor function. [Clinical trials](#) followed. Additional work with cells derived from a bone marrow neuroprogenitor line, fetal cortical stem cells, and other cell sources showed promise in preclinical studies and then these cells were tested in clinical studies <sup>1)</sup>.

## Normobaric oxygen

A [prospective randomized trial](#) (NCT03745092) enrolled 50 [cases](#) of CCI patients, which were divided into NBO (8 L/min of oxygen supplement) group and control group (room air) randomly, and also enrolled 21 healthy volunteers. Two times of 30-min EEG recordings with the interval of 45min of NBO or room air were analyzed quantitatively.

The CCI-mediated EEG presented with two patterns of electrical activities: high-power oscillations (high-power EEG, n = 26) and paroxysmal slow activities under the normal-power background (normal-power EEG, n = 24). The fronto-central absolute power (AP) of the beta, alpha, theta, and delta in the high-power EEG was higher than that in healthy EEG ( $p < 0.05$ ). The fronto-central theta/alpha, delta/alpha and  $(\text{delta} + \text{theta})/(\text{alpha} + \text{beta})$  ratios in the normal-power EEG were higher than those in healthy EEG ( $p < 0.05$ ). The high-power EEG in NBO group had higher fronto-central AP reduction rates than those in control group ( $p < 0.05$ ). NBO remarkably reduced the fronto-central theta/alpha, delta/alpha, and  $(\text{delta} + \text{theta})/(\text{alpha} + \text{beta})$  ratios in the normal-power EEG ( $p < 0.05$ ).

NBO rapidly ameliorates CCI-mediated EEG anomalies, including attenuation of the abnormal high-power oscillations and the paroxysmal slow activities associated with CCI <sup>2)</sup>.

<sup>1)</sup>

Kondziolka D. Stem Cell Treatment for Ischemic Stroke Recovery. Semin Neurol. 2021 Jan 27. doi: 10.1055/s-0040-1722640. Epub ahead of print. PMID: 33506475.

2)

Ding JY, Liu Y, Rajah GB, Chen ZY, Zhang SY, Ding YC, Ji XM, Meng R. Normobaric oxygen may correct chronic cerebral ischemia-mediated EEG anomalies. CNS Neurosci Ther. 2021 Jul 9. doi: 10.1111/cns.13703. Epub ahead of print. PMID: 34242498.

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