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Cystoperitoneal shunt

Similar to a ventriculoperitoneal shunt (VP Shunt), this procedure diverts fluid from the cysts, helping decrease the pressure in the brain. Typically, these cysts are first treated with an endoscopic fenestration procedure. Cystoperitoneal shunts are reserved for patients who do not find benefit with the fenestration alone. Programmable valves are used to help taper fluid drainage.

Though a common procedure, this device can have some complications during and after placement. These include catheter misplacement, catheter dislodgement, valve obstruction, shunt infection, over drainage, possible revision surgery or removal surgery, and intracranial bleeding (acute or delayed).

see Cystoperitoneal shunt for intracranial arachnoid cyst.

Case reports

Giant intrathoracic meningoceles are extremely rare, and the standard treatment for giant intrathoracic meningoceles remains controversial.

Tanaka et al present the case of a patient with giant intrathoracic meningoceles associated with neurofibromatosis type I. Our patient had poor respiratory function because of the giant intrathoracic meningocele, so we performed a cystoperitoneal shunt under local anesthesia. We describe our cystoperitoneal shunt technique using an adjustable-pressure valve. This simple, minimally invasive treatment is a valuable alternative treatment option in patients at high operative risk, especially those with low respiratory function ¹⁾.

1)

Tanaka K, Shimizu K, Kakegawa S, Oshima K, Takeyoshi I. Cystoperitoneal shunt for a giant intrathoracic meningocele under local anesthesia. Ann Thorac Surg. 2011 Jan;91(1):317-9. doi: 10.1016/j.athoracsur.2010.01.071. PubMed PMID: 21172550.

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