Intraorbital ophthalmic artery aneurysm

2017

A 27-year-old male with no past medical history presented with three months of headaches. Imaging reveled a large dysplastic left A1-2 junction aneurysm and a smaller saccular right A1-2 junction aneurysm, with potentially adherent domes. Two fusiform aneurysms of the intraorbital segment of the left OA were also identified. The patient underwent coil-assisted Pipeline embolization of the left A1-A2 aneurysm, with complete obliteration and reconstitution of the normal parent vessel. The patient underwent coil embolization of the right A1-2 aneurysm 3 weeks later, and was found to have grown significantly at the time of treatment. Three-month follow-up demonstrated spontaneous resolution of the OA aneurysms, persistent obliteration of the left aneurysm and significant recurrence of the right aneurysm, which was treated with stent-assisted coil embolization. A second recurrence three months later was successfully treated with repeat coiling. At the time of this treatment, the patient was also found to have two de novo distal middle cerebral artery (MCA) and ACA dysplastic aneurysms which were not treated. Follow up angiography 6 weeks later demonstrated stable complete obliteration of the right A1-2 aneurysm and interval complete resolution of the dysplastic MCA aneurysm. The distal ACA aneurysm was observed to have minimally increased in size, however, the parent vessel showed signs of interval partial thrombosis with contrast stasis within the aneurysm. This final aneurysm is currently being followed with serial imaging. The patient remains neurologically intact with complete resolution of his headaches.

Scullen et al. present a young male with no past medical history who presented with multiple dysplastic aneurysms. Successful staged endovascular intervention resulted in obliteration of aneurysms with spontaneous obliteration of the intraorbital ophthalmic artery aneurysm observed at three months. We present this case to review the multiple challenges of managing complex ACA aneurysms and to highlight the utility of endovascular intervention in their treatment ¹⁾.

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Scullen T, Mathkour M, Lockwood J, Ott L, Medel R, Dumont AS, Amenta PS. Endovascular Management of Multiple Dysplastic Aneurysms in a Young Male With an Unknown Underlying Etiology: A Case Report and Review of the Literature. World Neurosurg. 2017 Dec 28. pii: S1878-8750(17)32245-3. doi: 10.1016/j.wneu.2017.12.129. [Epub ahead of print] PubMed PMID: 29289804.

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