Malignant middle cerebral artery territory infarction treatment

- Atrial myxoma and posterior circulation stroke
- Scorpion sting-induced malignant middle cerebral artery infarction
- No difference in 6-month functional outcome between early and late decompressive craniectomies following acute ischaemic stroke in a national neurosurgical centre: a single-centre retrospective case-cohort study
- Higher baseline subcortical net water uptake in computed tomography predicts malignant middle cerebral artery infarction in patients with acute ischemic stroke
- Computed tomography perfusion as an early predictor of malignant cerebral infarction
- Successive development of ischemic malignant strokes in a patient with multiple fusiform aneurysms: A case report
- Modifying skin flaps for achieving very large decompressive craniectomies in malignant middle cerebral artery territory infarcts: A technical note
- Mechanical Thrombectomy in a 12-Month-Old Infant with Acute Ischemic Stroke Possibly due to Internal Carotid Artery Dissection: A Case Report

see Acute ischemic stroke treatment.

Surgical treatment with ipsilateral decompressive hemicraniectomy (DHC) has been shown to dramatically improve survival rates. DHC currently lacks established inclusion criteria and additional research is needed to assess the impact of prognostic factors on functional outcome.

Decompressive craniectomy for malignant middle cerebral artery territory infarction

see Decompressive craniectomy for malignant middle cerebral artery territory infarction.