

Pediatric posterior fossa arteriovenous malformation treatment

Microsurgical [resection](#) remains a good option for [posterior fossa arteriovenous malformation treatment](#) in one setting. The drawback of [endovascular embolization](#) is the lower rates of [nidus obliteration](#). Although [stereotactic radiosurgery](#) is a safe alternative, it takes several years to achieve the treatment goal all the while predisposing the patient to the risk of [arteriovenous malformation rupture](#).

Accurate [localization](#) and visualization remain challenging for microsurgical [treatment](#) of [posterior fossa AVMs](#).

Small size of a [nidus](#), [prone position](#), and proximity to [eloquent areas](#) make these lesions particularly difficult to localize and resect.

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