Telescoping flow diversion stent

Dissecting aneurysm involving the posterior inferior cerebellar artery (PICA) are challenging because of its nature and anatomic relationship to medulla and lower cranial nerve.

Shin et al. introduced a case of ruptured dissecting aneurysm located at the proximal PICA treated with telescoping stents for flow diversion and dissection healing. A 49 years old female visited to the emergency room for ruptured dissecting aneurysm at right proximal PICA. Telescoping stent was deployed along the right vertebral artery to PICA covering the dissecting aneurysm bleb using two Low-profile Visualized Intraluminal Support Jr (LVIS Jr) stents. Three months follow up angiography revealed a disappearance of aneurysm bleb and healing of dissection by parent artery remodeling. Telescoping stent with LVIS Jr may be an effective treatment for dissecting aneurysm with small diameter (<2 mm) parent artery. Convenient navigation and targeted telescoping stent for minimizing metal coverage at perforating arteries are an advantage for this method [1].

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Shin HK, Koo HW, Sohn MJ, Park YK. Flow diversion via telescoping stent with Low-profile Visualized Intraluminal Support Junior for treatment of ruptured dissecting aneurysm located at proximal posterior inferior cerebellar artery. J Cerebrovasc Endovasc Neurosurg. 2021 Jun 10. doi: 10.7461/jcen.2021.E2020.08.003. Epub ahead of print. PMID: 34107595.