

Venous infarction

Every venous structure should be preserved even if they seem to lack significant function. This will help prevent complications associated with delayed lobar parenchymal hemorrhage that can be attributed to [venous infarction](#).

The incidence of venous infarction after surgical resection of meningioma is low, but its occurrence can necessitate additional surgical procedures and long hospital stay.

Sacrifice of the [straight sinus](#) is associated with an unpredictable risk of venous infarction.

Venous infarction was the most frequent complication in a study of parasagittal meningioma, developed in 12 (9.2%) patients. The outcome after removal of parasagittal meningiomas was related to the patient condition prior to surgery ($p = 0.000$), postoperative complications ($p = 0.001$), tumor site ($p = 0.05$) and invasion of SSS by the tumor ($p = 0.04$). Venous infarction was the most frequent postoperative complication. It is possible to reach total meningioma's removal by ablation of SSS and replacing it by peripheral venous ¹⁾.

¹⁾

Skudas G, Tamasauskas A. [Prognosis of the surgical treatment of parasagittal meningioma]. Medicina (Kaunas). 2002;38(11):1089-96. Lithuanian. PubMed PMID: 12532723.

From:

<https://neurosurgerywiki.com/wiki/> - **Neurosurgery Wiki**

Permanent link:

https://neurosurgerywiki.com/wiki/doku.php?id=venous_infarction

Last update: **2024/06/07 02:58**

