

论文

血管内栓塞治疗颅内小动脉瘤性蛛网膜下腔出血预后的研究

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摘要:

目的 探讨电解脱性微弹簧圈(GDC)血管内栓塞治疗颅内小动脉瘤性蛛网膜下腔出血的患者预后。方法 本组 63 例均证实为颅内小动脉瘤性蛛网膜下腔出血,均行GDC血管内栓塞治疗,观察GDC血管内栓塞治疗并发症的发生情况,栓塞结束后临床随访结果和影像学随访结果。观察患者性别、年龄、动脉瘤部位、Hunt-Hess分级、Fisher分级、症状性脑血管痉挛、手术时间、急性脑积水程度、迟发性脑积水程度、术后颅内压力与临床预后的关系。结果 63例患者中,栓塞治疗中1例弹簧圈部分脱出瘤腔,无术中动脉瘤破裂和无动脉栓塞或血栓发生。临床随访恢复良好39例,轻、中度残疾22例,重度残疾或死亡2例,均无栓塞后动脉瘤再次破裂出血;影像学随访42例,1例动脉瘤栓塞术后瘤颈复发,41例动脉瘤均保持手术栓塞结束当时的状态。影响患者临床预后因素依次是:① 症状性脑血管痉挛;② 发病后的Hunt-Hess分级;③ 术后颅内压力。结论 GDC血管内栓塞治疗小动脉瘤性蛛网膜下腔出血是安全和有效的治疗方法,症状性脑血管痉挛是影响小动脉瘤性蛛网膜下腔出血预后的决定性因素。

关键词: 小动脉瘤性蛛网膜下腔出血;GDC血管内栓塞治疗;临床随访;影像学随访

Prognosis of subarachnoid hemorrhage due to small ruptured intracranial aneurysms treated by Guglielmi detachable coils endovascular embolization

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Abstract:

Objective To explore the prognosis of subarachnoid hemorrhage due to small ruptured intracranial aneurysms treated by Guglielmi detachable coils (GDC) endovascular embolization. Methods 63 cases of subarachnoid hemorrhage due to small ruptured intracranial aneurysms were treated by GDC endovascular embolization. The complications during the treatment, clinical follow up outcome and angiographic follow-up outcome were recorded. The data including age, sex, aneurysm location, neurological grade according to Hunt and Hess and Fisher grade, presence of symptomatic cerebral vasospasm, treatment time, acute hydrocephalus classification, delayed hydrocephalus classification and postoperative intracranial pressure were obtained and retrospectively analyzed in order to find the relations with clinical follow-up outcome. Results Coil protrusion occurred in 1 case, but no aneurysm rupture or thromboembolism occurred during the treatment. The clinical follow-up of the 63 patients showed that no rebleeding occurred, favorable recovery occurred in 39, mild or moderate disability occurred in 12, and severe disability or death occurred in 2. The angiographic follow-up of 42 patients showed that 1 presented neck recanalization of coiled aneurysm and 41 maintained the status of immediate imaging presence after embolization. The presence of symptomatic cerebral vasospasm, Hunt and Hess grade and postoperative intracranial pressure had important predictive value for the clinical outcome. Conclusions GDC endovascular embolization is safe and effective in the treatment of subarachnoid hemorrhage due to small ruptured intracranial aneurysms, and the presence of symptomatic cerebral vasospasm is a leading factor in deciding the outcome of this disease.

Keywords: Subarachnoid hemorrhage due to small ruptured intracranial aneurysms; Guglielmi detachable coils endovascular embolization treatment; Clinical follow-up; Angiographic follow-up

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