Giant basilar bifurcation aneurysm-is there any solution?

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Giant basilar bifurcation aneurysms are among the most challenging lesions whether with surgery and/or endo-vascular treatment. In view of the poor natural course of these lesions, aggressive treatment aiming for prevent bleeding and relief of mass effect have been recommended.

Both reconstructive (clipping, coiling, stent-assisted coiling, flow diversion), deconstructive techniques including parent artery occlusion in conjunction with / without bypass surgery and strategies of flow modification are available for the treatment of giant basilar bifurcation aneurysms. Sometimes, microsurgical and endo-vascular techniques are being used as a complementary strategies.

In this presentation, I would like to propose as follows. 1. We have to treat these lesions very aggressively before they become to monster. 2. Whenever possible, treat them as soon as possible before rupture 3. We may use FD options, however, follow-up should be very aggressively and we have to be ready to retreat them before they became monster. Peri-operative use of anti-platetlets, anti-coagulation therapy, optimal BP control and use of steroid also need to be emphasized.