SELECTION OF TREATMENT METHODS FOR BLEEDING ANEURYSMS

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Whether to treat bleeding aneurysms surgically or by endovascular occlusion is a frequent subject of debate between neurosurgeons and radiologists. The aim was to take a general position on when to apply which method through the overview of the results that have been achieved so far. However, each patient must be seen as an individual in order for the right decision to be made.

A prospective study of 336 patients who were treated at the Clinic of Neurosurgery in Niš for a ruptured aneurysm in the period between January 2007 and December 2010 has been conducted. Hunt-Hess grading system was used and the patients who were treated were those with grade I, II and III.

Out of 336 bleeding aneurysms, embolization was used to treat 154 of them, whereas 282 patients underwent operative treatment.

Embolization was a method of choice when dealing with aneurysms in the basilar flow, as well as in the initial segment of the carotid flow. Better results were obtained in patients treated, either surgically or endovascularly, 72 hours after the bleeding.


Key words: bleeding aneurysm, endovascular occlusion, clipping aneurysm, embolization, basilar artery, middle cerebral artery