Transvenous embolization in treatment of refractory carotid-cavernous sinus fistula

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Transvenous embolization in treatment of refractory carotid-cavernous sinus fistula: Purpose To investigate the effects of transvenous embolization in treatment of refractory carotid-cavernous sinus fistula (CCF). Materials and Methods Twenty-five patients of refractory CCF with 28 foci underwent transvenous embolization, femoral vein-inferior petrosal sinus approach was used in 16 of which, and femoral vein-facial vein-superior ophthalmic vein approach was used in 12 of which. The embolizing materials included controllable coils (GDC,EDC), free coil and silk. Three to twenty-four months after the treatment angiography was conducted on 10 patients and telephone follow-up was conducted on the other 18 patients. Results Immediate complete angiographic obliteration of the fistula was achieved in 20 patients. Residual shunting was left in 5 patients, 2 with pterygoid drainage and 3 with inferior petrosal sinus drainage. Headache and vomiting were the common symptoms after embolization. The angiography during follow-up showed that there were residual shunting in 4 patients, residual inferior petrosal drainage in 1 patient, and residual pterygoid drainage in 1 patient, and that no reoccurrence was found in the 6 patients with complete angiographic obliteration. The patients undergoing telephone follow-up reported that they had not any symptom. Conclusion Safe and effective, transvenous embolization can be the first choice after the failure in treatment of the carotid-cavernous sinus fistula.

Biography
T-F Li has completed his PhD at the age of 29 years from Zhengzhou University. He is an expert in interventional neuroradiology. He has published more than 10 papers in reputed journals

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