

MAGIC-MT: Managing Non-Acute Subdural Hematoma Using Liquid Materials: A Chinese Randomized Trial of MMA Treatment

RESULTS: In participants with symptomatic non-acute subdural hematoma (SDH), the use of middle meningeal artery (MMA) embolization resulted in less hematoma recurrence and progression compared to standard care alone.

PURPOSE: To demonstrate that performing additional MMA embolization using Onyx in patients with non-acute symptomatic SDH leads to a reduction in hematoma recurrence for those undergoing surgical treatment and a decrease in hematoma progression for those managed conservatively.

TRIAL DESIGN: multi-center, prospective, randomized (1:1) controlled trial (n=727)

	Embolization (n=360)	Usual Care (n=362)	Odds Ratio (95%CI)	P value
Primary Endpoint- no. (%)	26 (7.2)	44 (12.2)	-4.93 (-9.37 to 0.63)	0.02
<ul style="list-style-type: none"> Any death Symptomatic SDH recurrence Symptomatic SDH progression 	2 (0.6) 17 (4.7) 7 (1.9)	8 (2.2) 19 (5.2) 17 (4.7)		
Safety Outcome				
Serious adverse events within 90 days	24 (6.7)	42 (11.6)	0.54 (0.32 to 0.92)	0.02

Key Takeaways: Incorporating middle meningeal artery embolization in patients with symptomatic non-acute subdural hematoma could lead to better treatment outcomes and potentially improved prognosis.