Top Ten Things To Know
Indications For The Performance Of Intracranial Endovascular Neurointerventional Procedures

1. Intracranial endovascular interventions treat cerebrovascular diseases using minimally invasive intravascular techniques.

2. This paper covers recommendations for treatment of:
   - Cerebral aneurysms (ruptured and unruptured)
   - Endovascular cerebral revascularization using stent-angioplasty
   - Acute ischemic stroke
   - Arteriovenous malformations (AVM) and dural fistulas

3. Endovascular coil occlusion of aneurysms is appropriate for patients with a ruptured cerebral artery aneurysm deemed treatable either by endovascular coiling or by surgical clipping.

4. Treatment decisions for unruptured cerebral aneurysms depend on several factors such as: aneurysm size, prior subarachnoid hemorrhage history, patient age, family history of cerebral aneurysms, & whether multiple aneurysms or other cerebrovascular disorders are present.

5. Endovascular revascularization by intravascular balloon angioplasty and/or stenting may be considered for patients with symptomatic severe intracranial stenoses (>70% luminal narrowing) despite optimal medical therapy.

6. Intra-arterial thrombolysis is indicated for treatment of selected patients with major stroke of <6 hours duration due to an occlusion of the middle cerebral artery.

7. Intra-arterial thrombolysis is reasonable for patients who have contraindications to use of IV thrombolysis such as recent surgery.

8. The availability of intra-arterial thrombolysis should generally not preclude the intravenous administration of rt-PA in otherwise eligible patients.

9. Endovascular techniques for treatment of arteriovenous malformations and dural arteriovenous fistulas may be considered in certain circumstances.

10. Endovascular treatment for dural fistulas may be curative, although it is usually adjunctive therapy for pial brain AVMs.


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