

STEPWISE RECOVERY OF THE VASCULAR BED IN THE ACUTE STAGE OF ISCHEMIC STROKE

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HISTORY AND PHYSICAL:

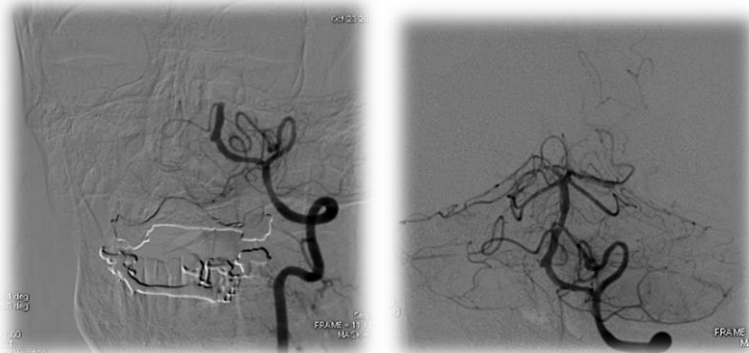
Male 53 y.o. patient was delivered to the hospital with stroke after 2 hours from symptom beginning. He complained on elements of dysarthria and hemiparesis. During hospitalization the scales were: GCS 13 point, NIHSS 10 points. CT scan showed thrombosis of the basil artery. Mechanical thrombectomy was performed using a «TrevoPro» stent retriever with a second traction. On CT control, we saw the ischemic zone of the right hemisphere of the cerebellum after 24 hours. Patient was discharged after 8 days with full regression of symptoms. Discharge scales were: mRS 1 point, NIHSS 0 point.

After 1,5 months patient was delivered to the hospital with stroke again. He complained on elements of dysarthria and light hemiparesis. During hospitalization the scales were: GCS 15 point, NIHSS 9 points. Symptoms regression after 60 minutes. On CT scan and CT perfusion, we did not see early ischemic changes. Taking into account the early period of recovery after a stroke of less than 3 months and positive dynamics in case of neurological status, the patient is recommended to use conservative therapy. On CT control, we saw no evidence of ischemia after 24 hours. Patient was discharged after 4 days with full regression of symptoms. Discharge scales were: mRS 1 point, NIHSS 0 point.

After 1 months patient was delivered to the hospital with stroke again. He complained on elements of dysarthria and hemiparesis. During hospitalization the scales were: GCS 13 point, NIHSS 15 points. The diagnosis was confirmed by CT scan and CT perfusion. Angiography showed: occlusion basil artery, stenosis of the internal carotid artery 80% to right, 90% to left. Stenting of the left internal carotid artery was performed. Regression of all symptoms intraoperatively. On CT control, we saw no evidence of ischemia after 24 hours. Patient was discharged after 10 days with full regression of symptoms.

After 1 month he was hospitalized according to the plan. Stenting of the right internal carotid artery was performed.

IMAGING:



First hospitalization: Mechanical thrombectomy was performed by stent-retriever «TrvoPro».



Third hospitalization: stenting of the "Acculink" 6x8x30 self-expanding stent of the left internal carotid artery was performed.

INDICATION FOR INTERVENTION:

Occlusion of basil artery and stenosis internal carotid artery.

INTERVENTION:

Stent-retriever «TrevoPro» 4.0x30.

Self-expanding stent «Acculink» 6x8x30.

LEARNING POINTS OF THE PROCEDURE:

1 hospitalization: Mechanical thrombectomy was performed by stent-retriever «TrvoPro».

3 hospitalization: Stenting of the "Acculink" 6x8x30 self-expanding stent of the left internal carotid artery was performed.

4 hospitalization: Stenting of the "Acculink" 6x8x30 self-expanding stent of the right internal carotid artery was performed.