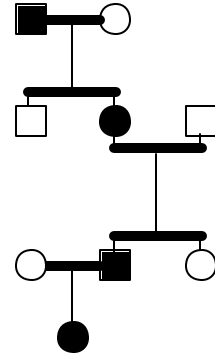


IVth HHT Scientific Conference

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ANEURYSMAL "SAC" INVOLUTION, A CRITICAL DETERMINANT OF OUTCOME AFTER EMBOLTHERAPY OF PULMONARY ARTERIOVENOUS MALFORMATION (PAVM)

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Background: Remy (1992) described thrombosis of the aneurysmal sac with or without residual scar as a critical determinant of outcome after successful embolotherapy of PAVM. This was corroborated by Lee (1997) in a study of 46 patients with large PAVM. In this study, 7 patients with persistent aneurysmal sac had recurrence and 2 of 7 sustained a clinical stroke some years after the first embolotherapy.

Methods: A prospective study was conducted with Human Investigation Committee approval. Chest radiography at 30 days and spiral chest CT (unenhanced), using 5 mm cuts, was obtained 6 months after embolotherapy in all patients

Results: 162 consecutive and previously unreported patients were treated between 1996 and 1999. Follow-up is complete (30 day chest radiograph and 6 month CT of lung) in 99/162 (61%) patients with 205 PAVM. Recurrence occurred in 21/99 (21%) patients and 21/205 (10%) PAVM. Recurrences were due to early deflation of a detachable balloon (1), insufficient coiling (15), pulmonary hypertension (2) and missed accessory artery (3). All recurrences were successfully retreated.

Conclusion: Persistence of the "aneurysmal sac" after technically successful embolotherapy is a good indicator of recurrent PAVM. Recurrences occurred in 10% of PAVM, despite modern techniques for closure. All were successfully retreated with involution of the aneurysmal sac.

Structured Scientific Programme: Friday 20th - Monday 23rd April 2001

Informal Collaborative Workshops: Tuesday 24th - Thursday 26th April 2001

Conference Venue: Hotel Semiramis Puerto de la Cruz, Canary Islands

Conference Chairman: Claire Shovlin

Scientific sub-committee: Michelle Letarte and Carmelo Bernabeu.

Clinical sub-committee: Bob White, Kees Westermann, Henri Plauchu, and Poul Vase