

WEB Colombian Multicenter Experience (WEB.COM) : Clinical and Radiological Mid-term results in the Treatment of Intracranial Aneurysms.

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Introduction

Woven EndoBridge (WEB) is a novel device for the treatment of ruptured and unruptured aneurysm. Few reports have evaluated the safety and feasibility of the WEB device for intracranial bifurcation aneurysms. To our knowledge none experience in Latin America has been reported. In the present study, we present a multi-center early experience and mid-term follow data for patients treated with WEB.

Methods

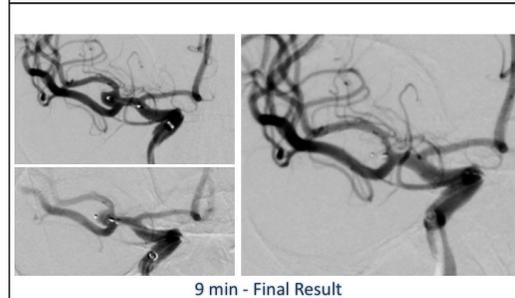
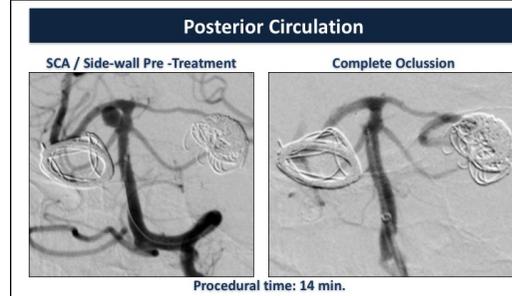
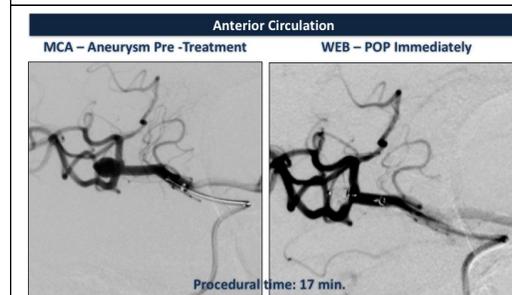
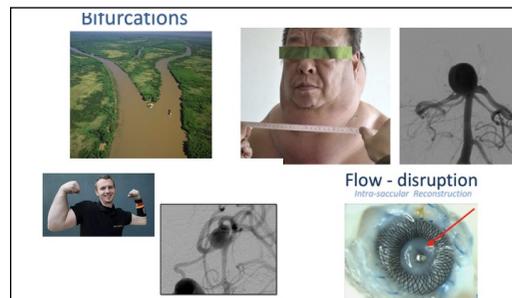
21 consecutive patients with 21 intracranial aneurysms underwent endovascular treatment using WEB between March 2016 and September 2017 in three different centers. We retrospectively evaluated the angiographic results at the end of the procedure and at follow-up, technical considerations, the clinical status and complications

Results

All attempted cases were treated. Neither technical failure nor rupture was encountered. Aneurysm locations were internal carotid artery bifurcation (n=3), middle cerebral artery (n =13), anterior communicating artery (n= 2), Basilar Trunk (n =1) and basilar tip (n= 2). Three patients were treated in the setting of acute subarachnoid hemorrhage. After the initial procedure, total occlusion was achieved in 14 aneurysms. Four cases with neck-remnant and three aneurysms still showed perfusion of the sac at the end of the procedure. Follow-up angiography was available in 15 patients, showing complete aneurysm exclusion and 1 a stable neck remnant.

Conclusions

This series is at the moment the only, multicenter, Latin American experience of patients treated with WEB. The treatment shows a good safety and efficacy in the endovascular treatment of intracranial aneurysms.



Final Messages

Conventional therapies for WNBAs are associated with relatively low rates of complete occlusion and peri-procedural complications are not uncommon. Newer therapies are needed for the treatment of these aneurysms. Until a 'gold standard' treatment strategy is established, **different devices like WEB intra-saccular disrupters** can be evaluated in selected patients.



Conclusion

Clinical Evidence have showed that flow disruption represents a safe and efficient endovascular approach to treat complex **ruptured** and **unruptured** wide neck bifurcation IA. It may be used as a stand-alone technique or in conjunction with other endovascular techniques.

Neurovascular devices and techniques are evolving rapidly. These new technologies **must be evaluated within clinical trials** to ensure that they are safe and effective, as well as to gain appropriate regulatory clearances.

Learning Objectives

Introduce WEB technology, learn about intra saccular approach



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Aneurysms EVT
We have enough ?

