

Introduction

Moyamoya angiopathy most often presents in young people in the second and third decade of life. Though uncommon, it can present itself later in life. Here we present our results of moyamoya patients over the age of 50 treated with surgical revascularization via either direct bypass or indirect bypass (encephaloduroarteriosynagiosis)

Methods

A retrospective review was conducted to identify all patients with moyamoya disease treated with surgical revascularization at our institution from 2002 to present.

Results

We identified 35 patients with moyamoya angiopathy over the age of 50 treated with surgical revascularization for 45 affected hemispheres. The average age was 58 +/- 7 years. Twenty-five of the affected hemispheres were treated with indirect bypasses while the other twenty were treated with direct bypasses. Three patients (9.1%) suffered a surgical complication. Average follow up was 23.7 months and 4 patients were lost to follow up. At last follow up, 14 of the 20 direct bypasses were patent. Two patients had a new ischemic stroke in a treated hemisphere with a new event rate of 4.4%. With regards to functional outcome, there was one mortality (2.9%), 17 patients (49%) were the same, 11 patients (31%) improved, and 2 were worse (5.7%.)

Conclusions

Though uncommon, moyamoya angiopathy can present in older adults. Our results suggest that surgical revascularization is an excellent treatment option with good functional outcomes and an acceptable complication rate.

Learning Objectives

By the conclusion of this session, participants should be able to describe the efficacy and complication rates of STA to MCA bypass for older patients with Moyamoya angiopathy

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