

**Introduction**

Intracranial aneurysms are found in almost 6% of the population, most being unruptured and asymptomatic .

Recent advances in non- invasive imaging , provides us with the necessary tools to screen patients and manage accordingly .

Due to their unpredictable course and risk of rupture, early intervention is crucial .

Given the fact that most cases are elective procedures , the option of coiling under Local anesthesia helps to facilitate the timely management of these patients.

**Methods**

we retrospectively reviewed our patients from February 2016 to February 2018 ,that underwent intracranial aneurysm coiling under local anesthesia to assess for procedural difficulties , post coiling angiographic images , peri - procedural complications , clinical outcome (immediate and at 90 days ) and follow up imaging .

**Results**

Over the 24 month period, a total of 64 patients harboring 76 aneurysms were treated in King Fahad Hospital of the University- Khobar, and King Fahad Specialist Hospital - Dammam . After obtaining informed consent, 19 patients were submitted to coiling under local anesthesia. The most frequent location was Anterior communicating artery aneurysm (ACom) Followed by Posterior communicating artery aneurysm (PCom) then followed by Basilar artery ,Superior cerebellar artery, Superior hypophyseal artery, Carotid terminus and Vertebral artery aneurysms. All patients were grade 1 and 2 WFNS SAH. 16 patients had an uneventful coiling achieving RROG of 1 and 2. 3 patients suffered an intra-procedural complicated

**Conclusions**

Coiling under local anesthesia is safe and feasible in low grade SAH patient.

**Learning Objectives**

To identify the feasibility and safety of coiling intracranial aneurysms under local anesthesia

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