

# Ventriculo-peritoneal Shunt versus Theco-peritoneal Shunt in Improving Visual Outcome in Patients with Idiopathic Intracranial Hypertension. A Systematic Review

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## Introduction

Idiopathic intracranial hypertension has an incidence of 1 to 3 people per 100,000 people per year, occurring most commonly in obese, young women. Several management options have been proposed. Conservative measures centre on weight loss. Pharmacological therapy includes mainly diuretics. Refractory sight-threatening cases demand surgical intervention, in the form of CSF diversion or optic nerve sheath fenestration. Other treatments include venous sinus stenting and bariatric surgery.

## Methods

A systematic review of published English literature from 1985 to 2014

## Conclusions

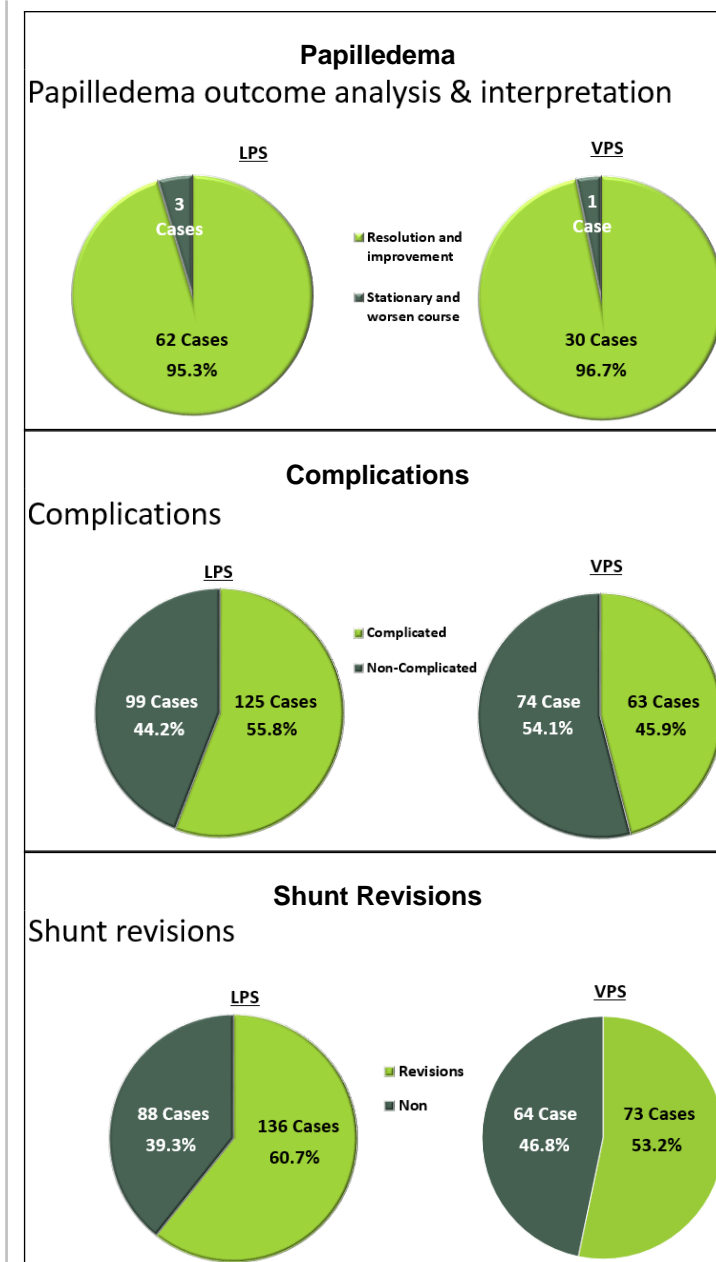
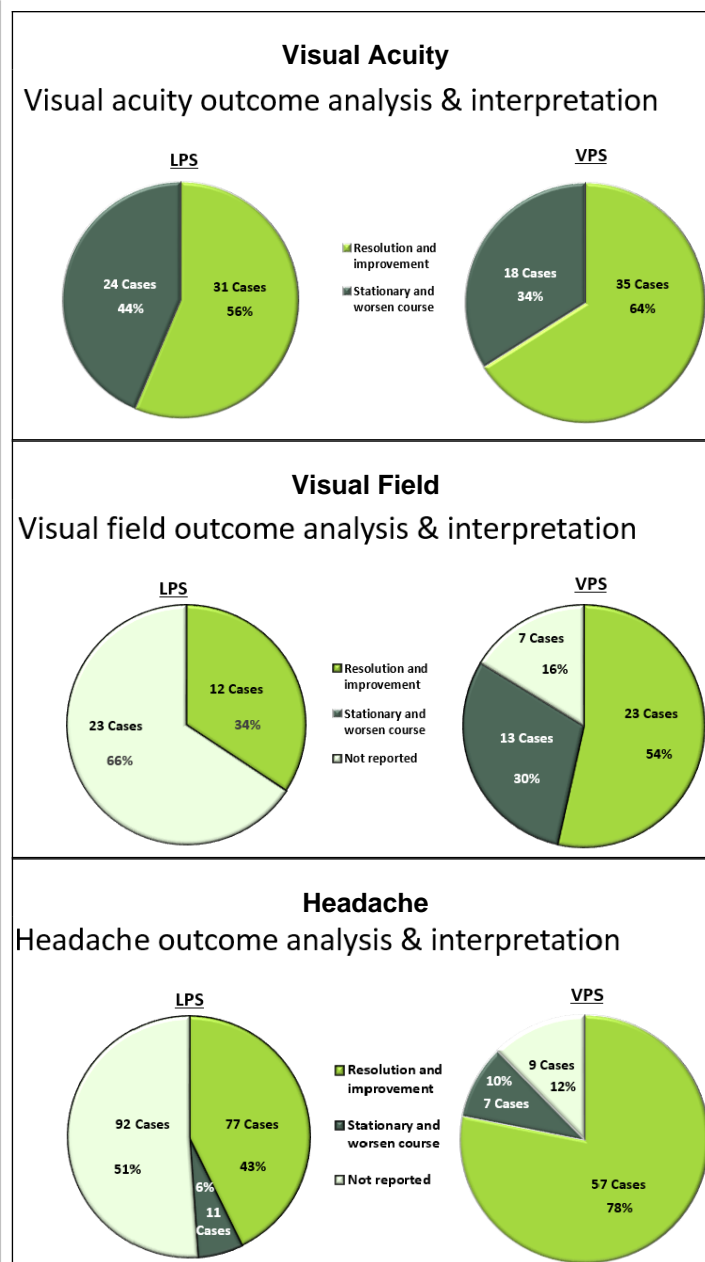
The choice of shunt type in managing IIH is still debatable, probably depending on local availability and expertise.

Obviously, there is no apparent difference between VPS and LPS in improving visual outcomes and headache. The concept of chronic CSF diversion is sufficient to manage the symptomatology of IIH regardless the type of shunt used.

Secondary outcomes shows that VPS has less complications rate, revision rate and less incidence of symptoms recurrence compared to LPS in the treatment of IIH.

## Results

Primary and secondary outcomes are best seen in attached graphics



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