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# **THE TECHNICAL IMPORTANCE OF DECREASING THE TENSION INSIDE THE NECK AND DOME DURING ANEURYSM SURGERY SPECIALLY BIG AND GIANT ANEURYSMS**

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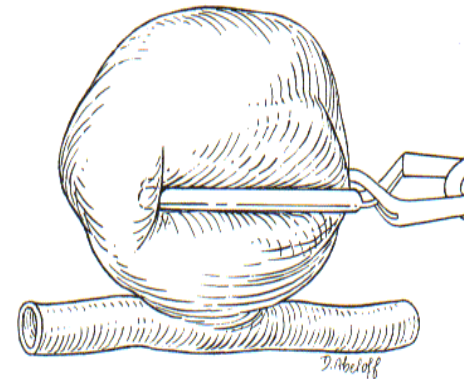
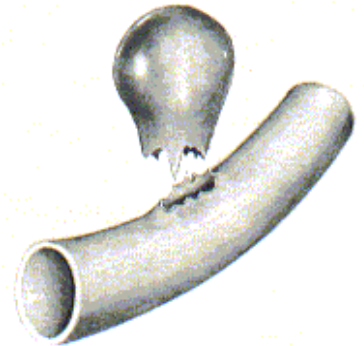
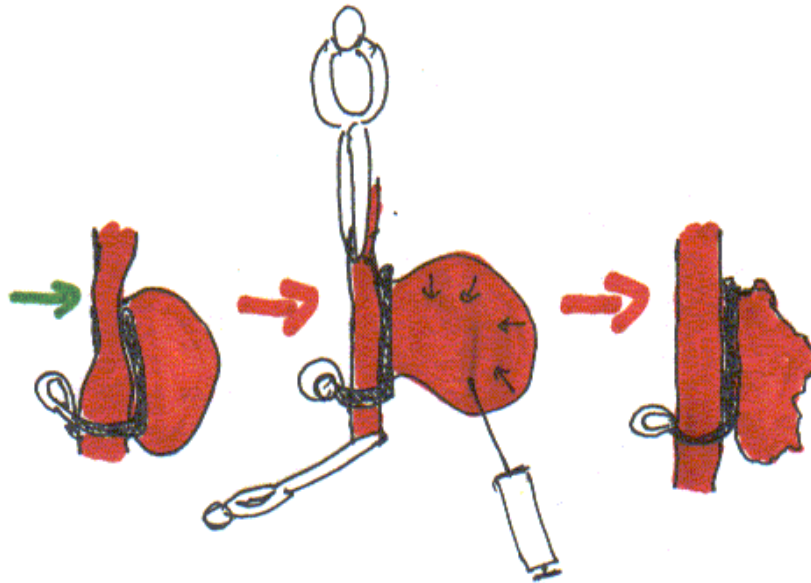
# Problems, that may happen during a very tense aneurysm neck and dome

Neck impossible to clip

Main artery stenosis due to clip migration

Rupture of aneurysm neck

Dome difficult to manage



**After decreasing the endoluminal tension, during temporary clipping, under brain protection, it's possible to:**

**Open the dome**

**Extirpation of endoluminal clots**

**Walls of dome more easy to dissect from neighbouring arteries**

**Neck relaxed**

**Dome more easy to mobilize**

**Easy and safety clipping of the neck**

**CEREBRAL PROTECTION  
VALPARAÍSO COCKTAIL**

**PROPOFOL 10 mg/Kg./hr.**



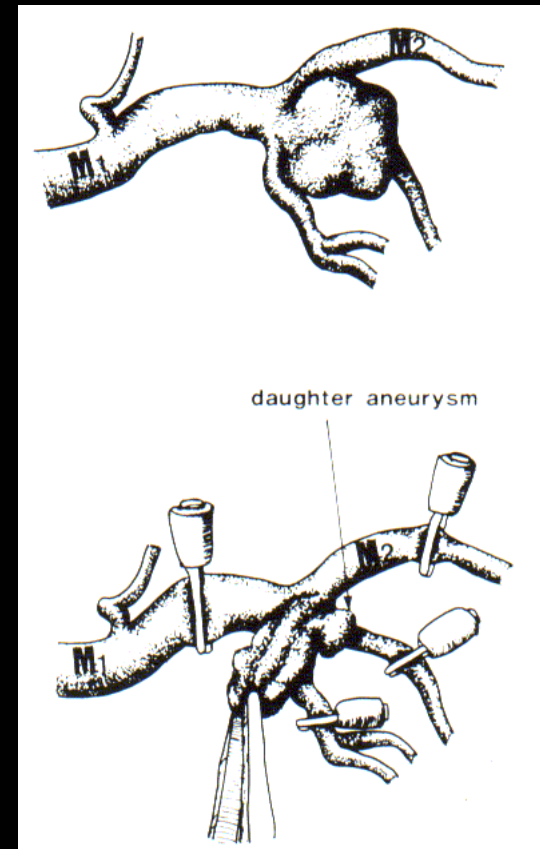
**DECREASE  
METABOLIC  
NEEDS**

**MANITOL 1gr/Kg/dosis, each 100 min**

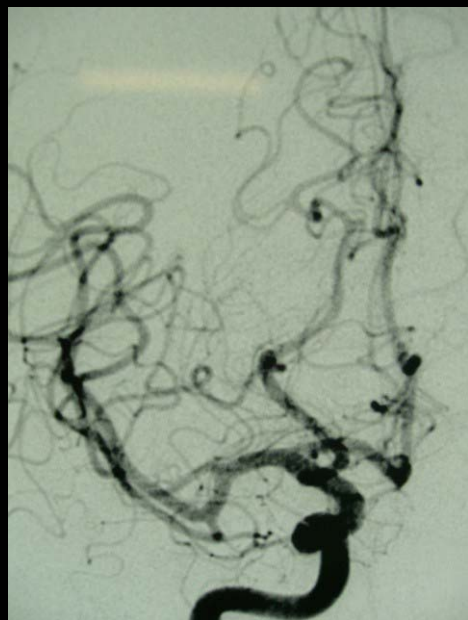


**COLLATERAL  
CBF**

**NIMODIPINE 2 mg/ hr continous I.V.**



# 1- Big Anterior Cerebral Artery Aneurysm - A2



Right A2



## 2- Big Middle Cerebral Artery Aneurysm – wide neck

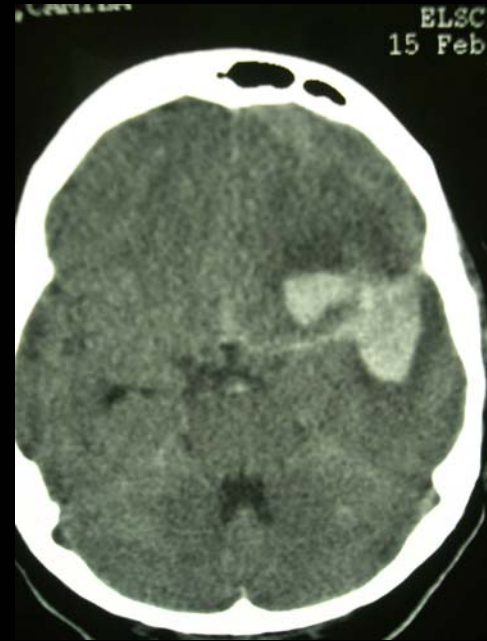
Anterior M2



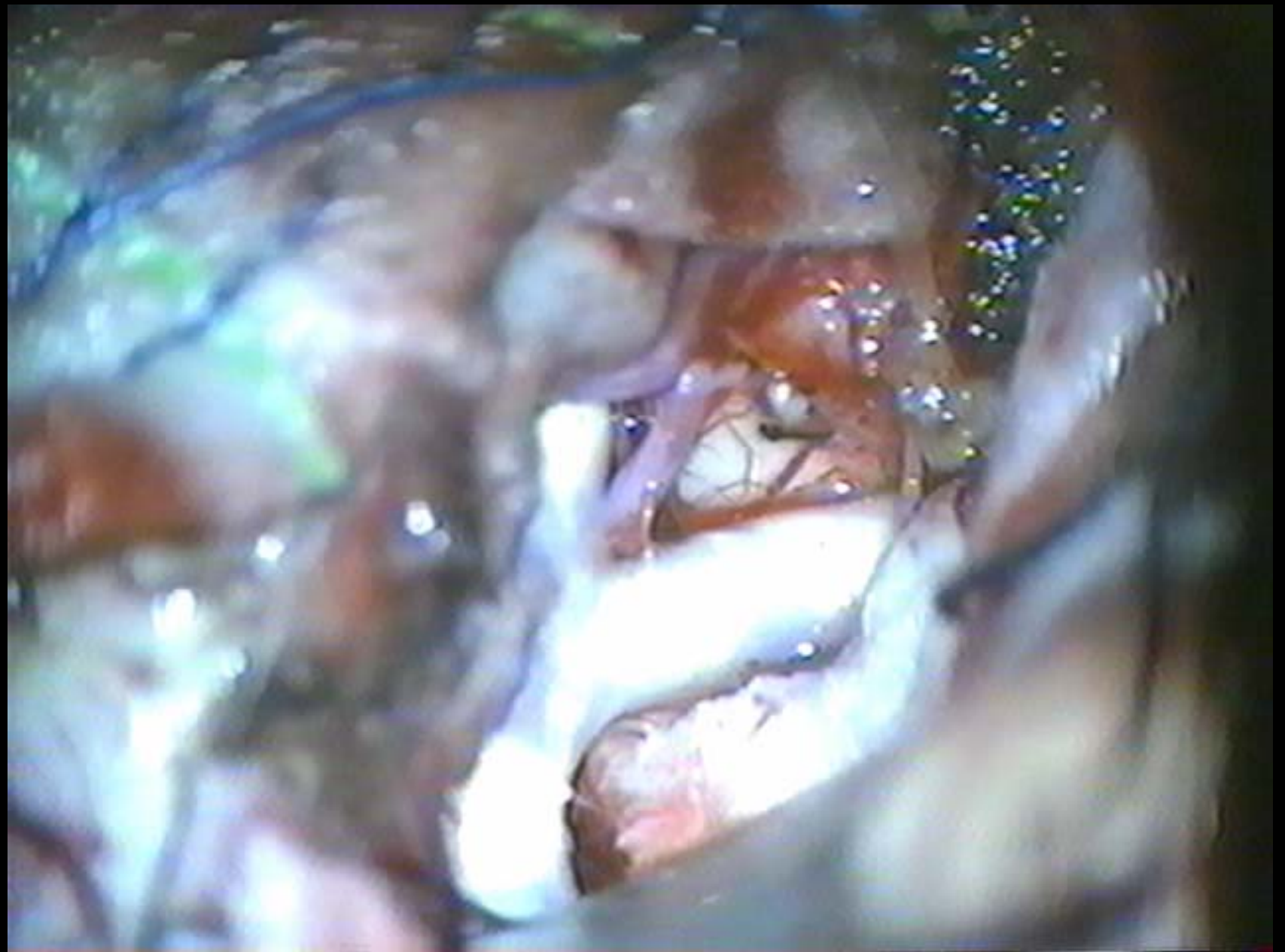
Posterior M2



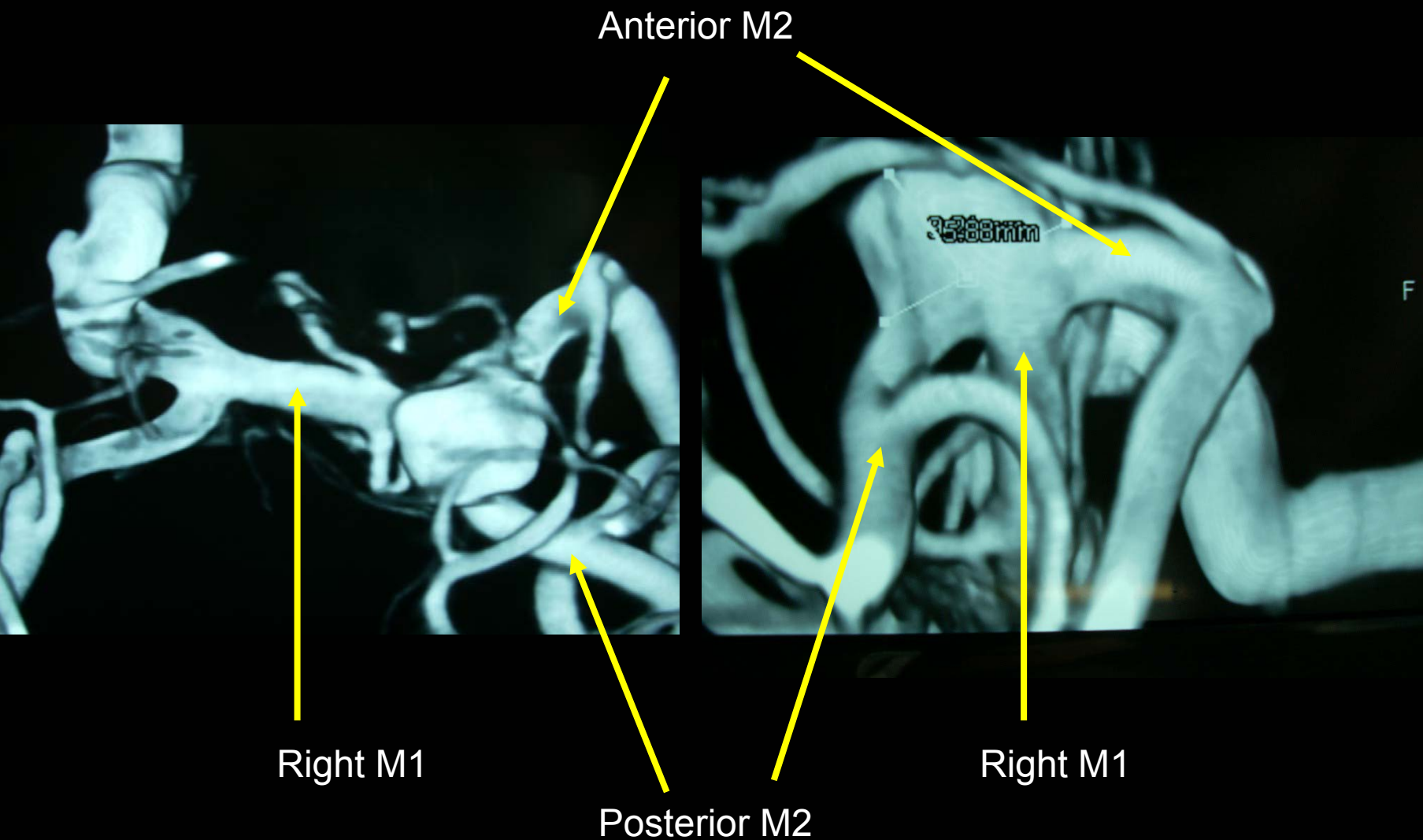
Left M1



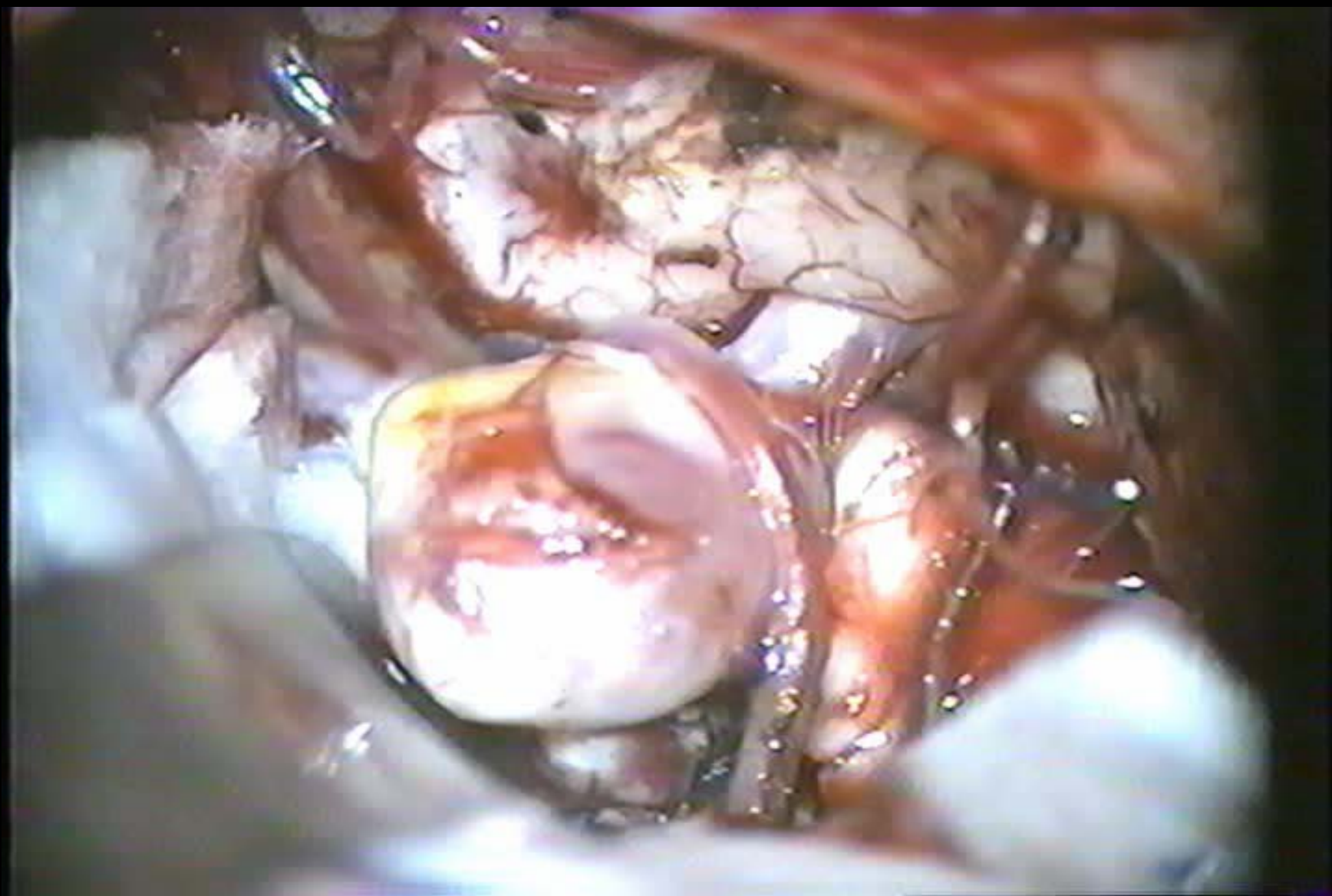




### 3- Big Middle Cerebral Artery Aneurysm – wide neck







Little it is learned with the victory, but much with the defeat  
Japanese proverb

