# Article information:

Endovascular Treatment of 300 Consecutive Middle Cerebral Artery Aneurysms: Clinical and Radiologic Outcomes - PMC  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7965808/>

# Article summary:

1. Endovascular treatment of middle cerebral artery (MCA) aneurysms is a safe and effective procedure with low rates of technical failure and re-treatment.

2. 295 patients with 300 MCA aneurysms were treated, including 244 ruptured aneurysms.

3. Complete occlusion or neck remnant was achieved in 91.4% of cases, with 79.4% of ruptured aneurysms having a favorable clinical outcome (Glasgow Outcome Scale score 4-5).

# Article rating:

May be slightly imbalanced: The article presents the information in a generally reliable way, but there are minor points of consideration that could be explored further or claims that are not fully backed by appropriate evidence. Some perspectives may also be omitted, and you are encouraged to use the research topics section to explore the topic further.

# Article analysis:

The article “Endovascular Treatment of 300 Consecutive Middle Cerebral Artery Aneurysms: Clinical and Radiologic Outcomes” is a retrospective analysis of a prospectively acquired data base that provides evidence for the safety and efficacy of endovascular treatment for MCA aneurysms. The authors provide detailed information on the patient population, endovascular procedure, results, and conclusions drawn from their study. The article appears to be well-researched and reliable in its reporting, as it includes relevant data from the International Subarachnoid Aneurysm Trial (ISAT) to support its claims. Furthermore, the authors provide detailed information on the patient population, endovascular procedure, results, and conclusions drawn from their study which adds to its trustworthiness.

However, there are some potential biases that should be noted when considering this article’s reliability. Firstly, the study is limited by its retrospective nature which may lead to selection bias due to incomplete or missing data points that could have affected the results reported in the article. Additionally, since all procedures were performed by three consultant interventional neuroradiologists with varying levels of experience when they started coiling patients within the study period, this could introduce bias into the results due to differences in technique between practitioners. Finally, since only 6 months and 2.5 years follow-up angiographic occlusion was assessed for each patient included in the study, longer term outcomes may not have been captured which could affect the accuracy of the reported results over time.

In conclusion, while this article appears to be well-researched and reliable in its reporting overall, there are some potential biases that should be taken into consideration when assessing its trustworthiness and reliability such as selection bias due to retrospective nature of study design as well as differences in technique between practitioners performing EVC procedures on patients included in this study.

# Topics for further research:

* Endovascular treatment of MCA aneurysms
* Long-term outcomes of endovascular treatment
* Selection bias in retrospective studies
* International Subarachnoid Aneurysm Trial (ISAT)
* Interventional neuroradiology techniques
* Angiographic occlusion follow-up

# Report location:

<https://www.fullpicture.app/item/3cf5b824e4b92e217abab89714bc227c>