



Rupture from cavernous internal carotid artery pseudoaneurysm 11 years after transsphenoidal surgery

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Abstract:

Carotid artery pseudoaneurysm is a rare complication of transsphenoidal surgery, usually diagnosed within 90 days post procedure. Pseudoaneurysm rupture may present with severe epistaxis or carotid cavernous fistula (CCF) with significant morbidity and mortality. We present a case of epistaxis from pseudoaneurysm rupture over a decade after transsphenoidal surgery. The pseudoaneurysm was treated with staged balloon-assisted coiling, endonasal mucosal flap repair and interval flow-diverting stent insertion. This case illustrates that pseudoaneurysms develop and rupture regardless of postoperative time course after transsphenoidal surgery, and the treatment complexities involving combined endovascular and endonasal techniques.

Biography:

Dr Morrison completed his Doctor of Medicine at the University of New South Wales in 2017. He is currently a neurosurgery registrar at Royal Prince Alfred Hospital in Sydney. In 2019 he was awarded NSW Junior Medical Officer of the Year.

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2. Morrison, Thomas & Bolger, Douglas. (2012). Wet season range fidelity in a tropical migratory ungulate. *The Journal of animal ecology*. 81. 543-52. 10.1111/j.1365-2656.2011.01941.x.
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4. Bolger, Douglas & Newmark, William & Morrison, Thomas & Doak, Daniel. (2008). The need for integrative approaches to understand and conserve migratory ungulates. *Ecology letters*. 11. 63-77. 10.1111/j.1461-0248.2007.01109.x.

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