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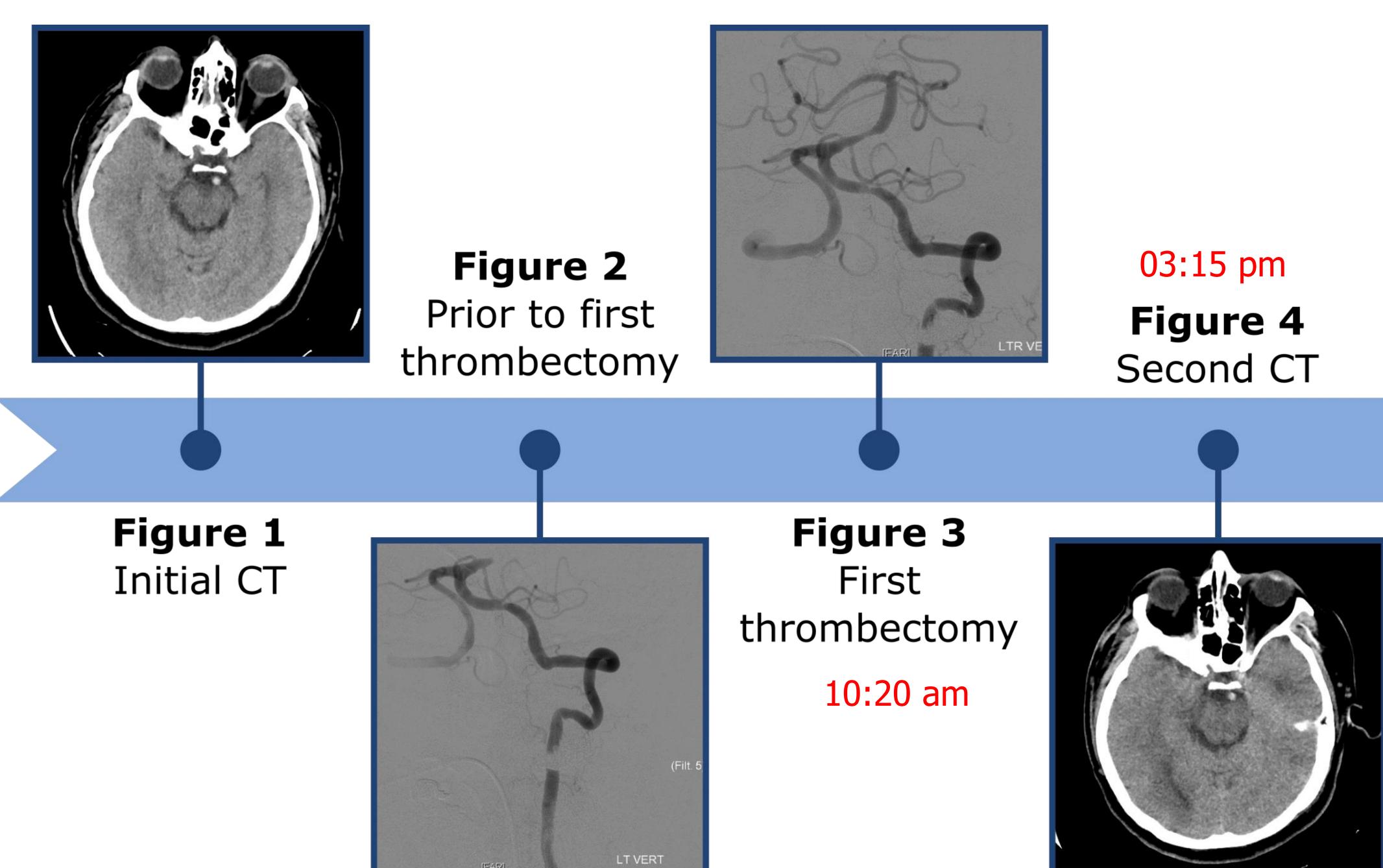
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# **RAPIDLY RECURRENT BASILAR ARTERY THROMBOSIS TREATED WITH EMERGENT MECHANICAL THROMBECTOMIES AND STENTING** MARK COHEN, MD AMNA IMRAN, MD ANKUR GARG, MD

# Introduction

Acute basilar artery thrombosis (BAT) is a life-threatening condition that can be treated by emergent mechanical thrombectomy (EMT). Recurrent acute BAT is a rare phenomenon. Here we describe a case of rapid recurrent acute BAT that was treated each time by EMT and finally by emergent basilar artery stenting with good outcome.

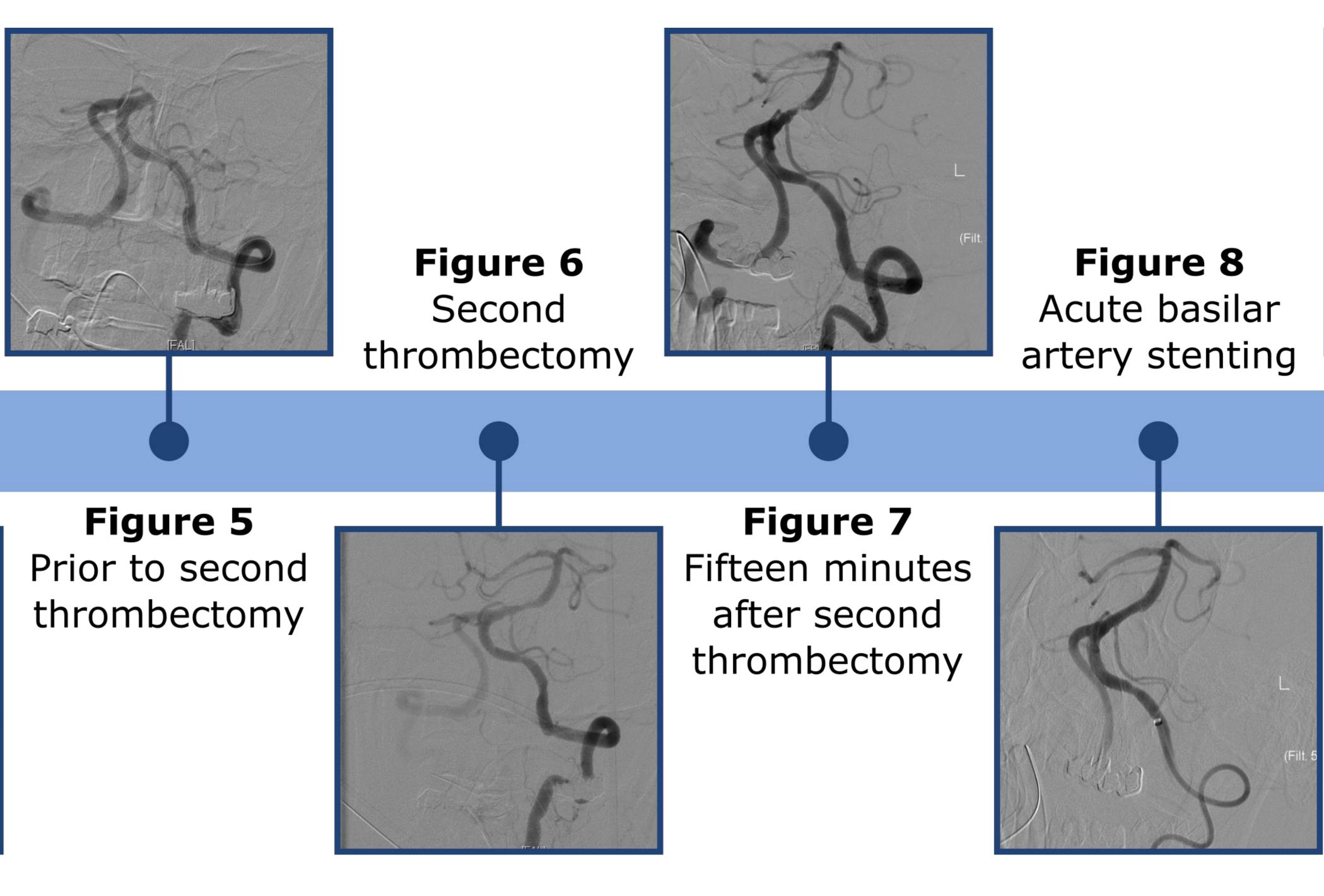


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66-year old male with PMH significant for HTN, HLD, and DM presents with acute upper extremity ataxia, dysarthria, and right-sided numbness. NIHSS was 13. Initial imaging revealed a hyperdense basilar artery (Fig. 1). Successful thrombectomy was performed, and severe basilar artery stenosis was noted afterwards. Several hours later he was worse with right hemiparesis and severe dysarthria. Repeat imaging again showed a hyperdense basilar artery (Fig. 4), concerning for re-thrombosis. Angiogram confirmed recurrent thrombosis which was again successfully recanalized. Persistent high-grade stenosis at the proximal basilary artery was determined to be the site of thrombus formation. He was anticoagulated with heparin 7500 U and another angiogram was obtained 15 minutes post-thrombectomy with repeat thrombosis again visualized at the site of stenosis. We made the decision to proceed with emergent stenting as a life-saving measure.



### **Case Presentation**



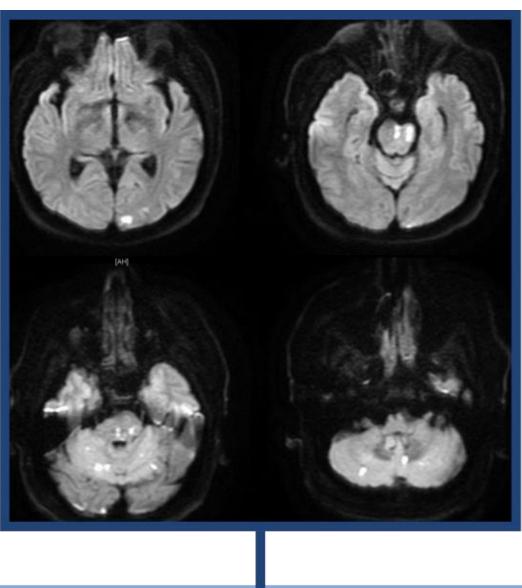


Figure 9 Subsequent MRIs