|  |
| --- |
| **Title:**  How old is too old?Outcomes and poor prognostic factors in geriatric patients receiving intra-arterial thrombectomy for large vessel occlusion  **Authors:**  YU Stephanie Wing Yin, ZHAUNG Tin Fong, TSANG Chun-On Anderson, CHOI Olivia M.Y., LUI Wai Man  **Institution(s):**  Department of Neurosurgery, Queen Mary Hospital, Hong Kong.  **Abstract:**  ***Objective*:**  To review the clinical outcomes of patients aged 80 or above with large vessel occlusions in these geriatric patients and identify factors associated with poor prognosis.  ***Method:***  This is a retrospective case series including all patients aged 80 or above from 2018 to 2021, who underwent mechanical thrombectomy for large vessel occlusion in our centre. Demographics, procedural variables , mode of anaesthesia, clinical outcome measures were extracted. The rate of TICI 2B grade or above recanalization, symptomatic hemorrhage and favourable clinical outcome were identified.  ***Result:***  A total of 85 patients were identified. Mean age was 85.5 years old. 47% of patients were 85 or older. Median NIHSS score was 22, the median ASPECT score was 9. Only 75 patients underwent thrombectomy after diagnostic angiography was performed. Successful recanalization (TICI 2B/3) was achieved in patients (89.7%). Favourable outcome (modified Rankin Score 0-2 at 3 months) was observed in 26 patients out of 75 (35.1%). The mortality at 3 months was 29.7 %. Intraoperative complications occurred in 15% of patients, including embolization to new territory, vessel dissection, perforation with contrast extravasation and others. Significant hemorrhage occurred in 3.7 % of patients.  ***Conclusion:***  Mechanical thrombectomy in geriatric patients old than 80 years of age is feasible and safe. Acceptable clinical outcome occurred in 35.1% of patients. Therefore, mechanical thrombectomy should not be withheld from very elderly patients. |

(272 words)