2010

2009-2011

In 2010, Michael T. Lawton et al introduced the Supplementary Spetzler-Martin AVM grading scale specifically to predict surgical outcomes in Ruptured cerebral arteriovenous malformation. The Supplemented Spetzler-Martin grading scale also included rupture status, age of the patient, and nidal architecture (diffuse versus focal). In the 300 patients in Lawton's 2010 study, the supplemental Spetzler-Martin grading scale demonstrated a stronger correlation with surgical outcomes than the initial Spetzler-Martin AVM grading system (ROC 0.78 vs 0.66).¹

In 2010, FLAIR imaging was added to the RANO criteria and was recommended for the assessment of the nonenhancing component of gliomas.²

Since 2010, surgical resection of insular gliomas is performed via transopercular approach by the Neurosurgery Clinic, Istanbul Training and Research Hospital, Departments of Neurosurgery, Cerrahpasa Medical Faculty, Istanbul University, Turkey.

Clinical, surgical and follow-up results were analyzed retrospectively.

The majority were low-grade (81.8%) and among them oligodendroglioma was the most common (n = 8). Half of the patients underwent awake craniotomy with cortical electrostimulation and total resection was achieved in 6 patients. Long-term follow-up showed the majority of patients (90.9%) were completely seizure free. Only one patient showed slight paresis on one upper extremity at the long-term follow-up.

Trans-opercular approach for insular gliomas is safe and maximal resection with minimal neurological deficits is possible. Use of ultrasonic aspirator and neuronavigation make surgery safer. Surgery-related complication is very rare. Future studies should contain larger number of patient and long-term follow-up in order to provide more accurate data.³

De Ridder et al. published in 2010 a cohort of 12 patients who underwent the so-called “burst stimulation”.⁴

World Neurosurgery is a bimonthly peer reviewed medical journal that was established in 1973 as Surgical Neurology before obtaining its current name in 2010. It is published by Elsevier and is the official journal of the World Federation of Neurosurgical Societies.

With the passage of the Affordable Care Act in 2010, healthcare metrics and patient outcomes, especially mortality rates, are increasingly emphasized as integral measures of overall quality of care.
and hospital reimbursements.  

In 2010, the O'Kelly-Marotta grading scale was proposed as a method of assessing the degree of angiographic filling and contrast stasis in the setting of intracranial aneurysms treated by endovascular flow diversion. Taking into account the dynamic nature of the contrast stasis, it is designed for use with cerebral angiography to predict aneurysm closure over time.