

ASSESSMENT OF LUMBOPERITONEAL SHUNT NEED IN IDIOPATHIC INTRACRANIAL HYPERTENSION

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Idiopathic intracranial hypertension (IIH) is a disease which sometimes needs Lumboperitoneal Shunt operation because of its effect of visual field loss. Surgeons never want to perform this operation immediately, especially to fat women group, because of long term complications and need of repetition. This research analyzes patients with Intracranial Hypertension who have been treated in our clinics for 3 years retrospectively.

According to Modified Dandy Criteria 15 IIH patients whom Lumboperitoneal Shunt operation wasn't recommended, have been followed in our clinics from 2007 to 2010. Demographical and clinical characteristics are recorded. Clinic, visual field are measured in 3-6 monthly intervals. We use SPSS for Windows 15.0 for statistical analysis.

Mean age is 26, 53(± 11 , 96), between 11 and 49. All are women. All have headache, 8(53, 3%) have visual field loss. Mean following time is 23, 6(± 18 , 13) months, from 2 to 55. There is no secondary etiology. Laboratory results are normal. Cranial MRI, 3(20%) have empty sella, others are normal. MRI Venographies are normal. Mean BMI is 26, 33(± 5 , 63), 5(33, 3%) obese, 3(20%) overweight, 7(46%) normal. Mean CSF Pressure is 392, 00(± 144 , 03), patients' with visual field loss is 407, 50(± 142 , 40), others' is 374, 29(± 155 , 11). LP and Acetazolamide are given as treatment. Headache is revealed in all, visual field is revealed in 4 of them, the other 4 remain same. Mean CSF Pressure of patients' whom visual field is revealed, is 377, 50(± 150 , 638), unrevealed ones' is 437, 50(± 149 , 08).

In conclusion, these findings show that we should be careful while examining the patients with IIH for Lumboperitoneal Shunt operation, as we're thinking of complications.