

## **Pre-Op & Tumour Embolization**

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The aim of pre-operative embolization of the tumour is to devascularize the tumor bed by filling intratumoral vascularization as deep as possible into the precapillary level to initiate tumor necrosis, decrease blood loss during surgery and thus make it easier and possibly, more radical, and in tumor of nasal cavity to stop epistaxis. The procedure is angiographically guided. Embolization of a tumor is performed by either an intraarterial catheterization approach or direct puncture of the tumor artery. Selection of one of these approaches depends of the location, and number of arterial feeders of the tumor

There are basically three main indications for head and neck vascularized tumor embolization: pre-operative embolization, palliative treatment, and to stop epistaxis. Pre-operative embolization is believed to reduce blood loss, shorten the operative procedure time and potentially increase the chances of radical surgical resection as well as decrease the incidence of tumor recurrence. Palliative treatment may led to a decrease in tumor mass with improvement of neurological symptoms due to intracranial expansion. In some cases, shrinkage of tumor may alleviate intractable pain.

Pre-operative embolization for hypervascular tumors is a well-established method. First of all, familiarity with the arterial anatomy of this region is fundamental for safe and successful treatment. Appropriate imaging work up and periprocedural detailed angiographic studies as well as careful selection of embolic agents help to decrease the ischemic complications.