

Patient Information

## Neurosurgery

# Cavernoma

### What is a Cavernoma?

Cavernoma are abnormal clusters of vessels with small bubbles filled with blood. They are mainly found in the brain and spinal cord. Cavernoma is also known as cerebral cavernous malformation (CCM)

### Who is at risk?

People are at risk if they have a family history of cavernomas, with every child of someone with a cavernoma having a 50% chance of inheriting the condition. Cavernomas also occur more commonly in people who have received radiation treatment of the brain.

### What are the symptoms?

Most of the time, cavernomas cause no symptoms at all and are only diagnosed after having an MRI scan for another reason. Symptoms may occur depending on the location of the cavernoma.

These can include:

- Seizures
- Headaches
- Visual problems
- Memory problems
- Stroke like symptoms (speech disturbances, limb weakness, facial droop)



## What tests will I have?

**CT scan:** A CT scan is an X-ray examination that gives much more information than a normal X-ray. It produces detailed cross sectional images of your organs, blood vessels and bones.

**MRI scan:** An MRI scan gives much more information than a CT scan. It uses strong magnetic fields and radio waves to produce very detailed pictures of the brain and other organs.

**Angiogram:** An Angiogram is when a tube (catheter) is inserted into your groin and fed through the artery to the arteries in the brain. A dye is injected through the tube (catheter) into the blood vessels to show us where the Aneurysm is situated.

## What treatment will I receive?

Treatment varies from person to person due to the wide variation in symptoms, location and size of the cavernoma. Your consultant will discuss your individual options with you. Treatments may include:

### Coiling

This is a way of treating Cavernomas without the need for a Craniotomy (a surgical operation in which a bone flap is temporarily removed from the skull to access the brain.) The Neuro-Radiologist will approach the Cavernoma from inside the blood vessel. Small metal coils are inserted into the Cavernoma through the arteries that run from the groin to the brain. The coils remain there for life. The coils prevent blood flowing into the Cavernoma and therefore reduce the risk of a bleed or re-bleed. **(Ask for additional information)**

### Stereotactic Radiosurgery

This is offered to patients where by the Cavernoma is difficult to reach. Firstly an angiogram is carried out to locate the Cavernoma then a beam of high energy sources are focused on the Cavernoma. This radiation causes the Cavernoma to shrink and clot off.

## **Common complications alongside a cavernoma?**

**Hemorrhage** – The cells that line a cavernoma are often thinner than those lining normal blood vessels which means cavernomas are prone to leaking blood. A cavernoma can rupture at any time and bleed into the brain.

**(An additional information leaflet will be provided)**

## **Sources of further information**

### **Cavernoma Alliance UK**

[www.cavernoma.org.uk](http://www.cavernoma.org.uk)

Telephone: 01305 213876

### **British Brain and Spine Foundation**

3.36 Canterbury Court

Kennington Park

1-3 Brixton Road

Crammer Road

London. SW9 6DE

[www.brainandspine.org.uk](http://www.brainandspine.org.uk)

Telephone: 0808 808 1000 (Information and support on neurological disorders for patients, carers and health professionals)

### **Headway National Contact**

Freephone 0808 800 2244 Monday to Friday 9-5pm

[helpline@headway.org.uk](mailto:helpline@headway.org.uk)

Local Support groups for Headway for further information email:

[headwaycw@aol.com](mailto:headwaycw@aol.com)

### **NHS Choices**

[www.nhs.co.uk](http://www.nhs.co.uk)

## Patient Information

The Trust has access to interpreting and translation services. If you need this information in another language or format please ask and we will do our best to meet your needs.

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