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M.I. Vargas, J. Boto and Z. Kulcsar

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Is Catheter Angiography Still Necessary for the Follow-Up of Spinal Malformations after Treatment?

We read the recently published paper by Mathur et al¹ regarding the most appropriate technique to follow-up patients treated for spinal malformations, particularly dural fistula, and they propose to do this by MRA.

In our hospital, we follow-up these pathologies by MRA, and conventional angiography is performed only when there is a radioclinical discrepancy.

We understand the paper has limitations due to being a retrospective study; however, we have the following remarks:

- We believe the use of high field significantly improves the quality of MRA, particularly because of the size of the vessels. ^{2,3}
- The use of contrast medium with vascular remnant⁴ or a doubly concentrated contrast medium for dynamic sequences also improves the identification of lesions and allows better analysis of these lesions.
- Performing MIP and MPR reconstructions improves the accuracy of diagnosis.

Finally, we think that it is important to standardize the follow-up of these pathologies, as far as the type and quantity of contrast medium and type of field used. Although these pathologies are

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not frequent, most of them are curable, and they can cause considerable deficits with tremendous impact on the daily life of patients if not treated.

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⑤ J. Boto
⑥ Z. Kulcsar

Division of Neuroradiology

DISIM, Geneva University Hospital

Geneva. Switzerland