

# Arterial Radioanatomy of the Cranio-Cervical Junction

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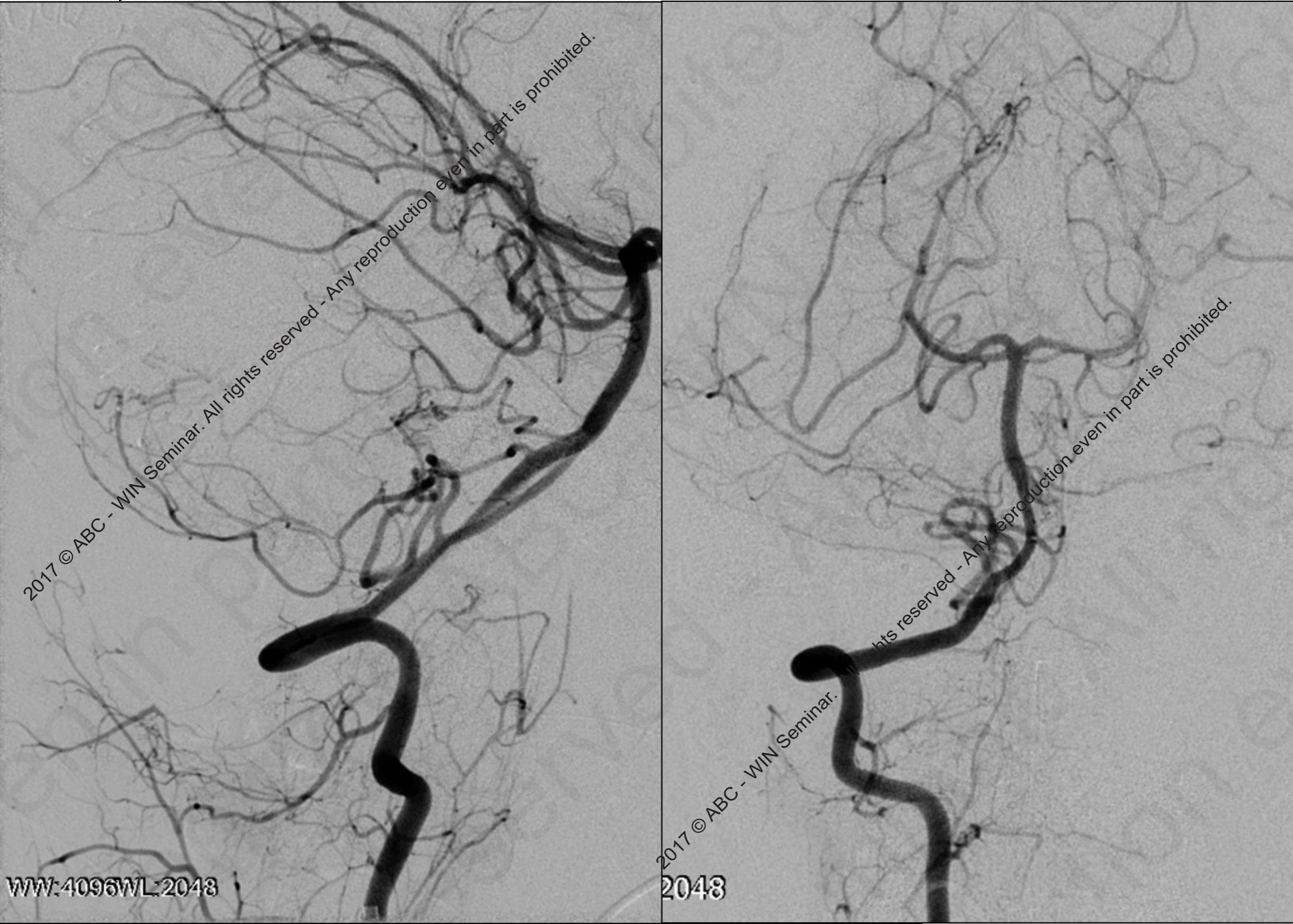
# **Introduction 1**

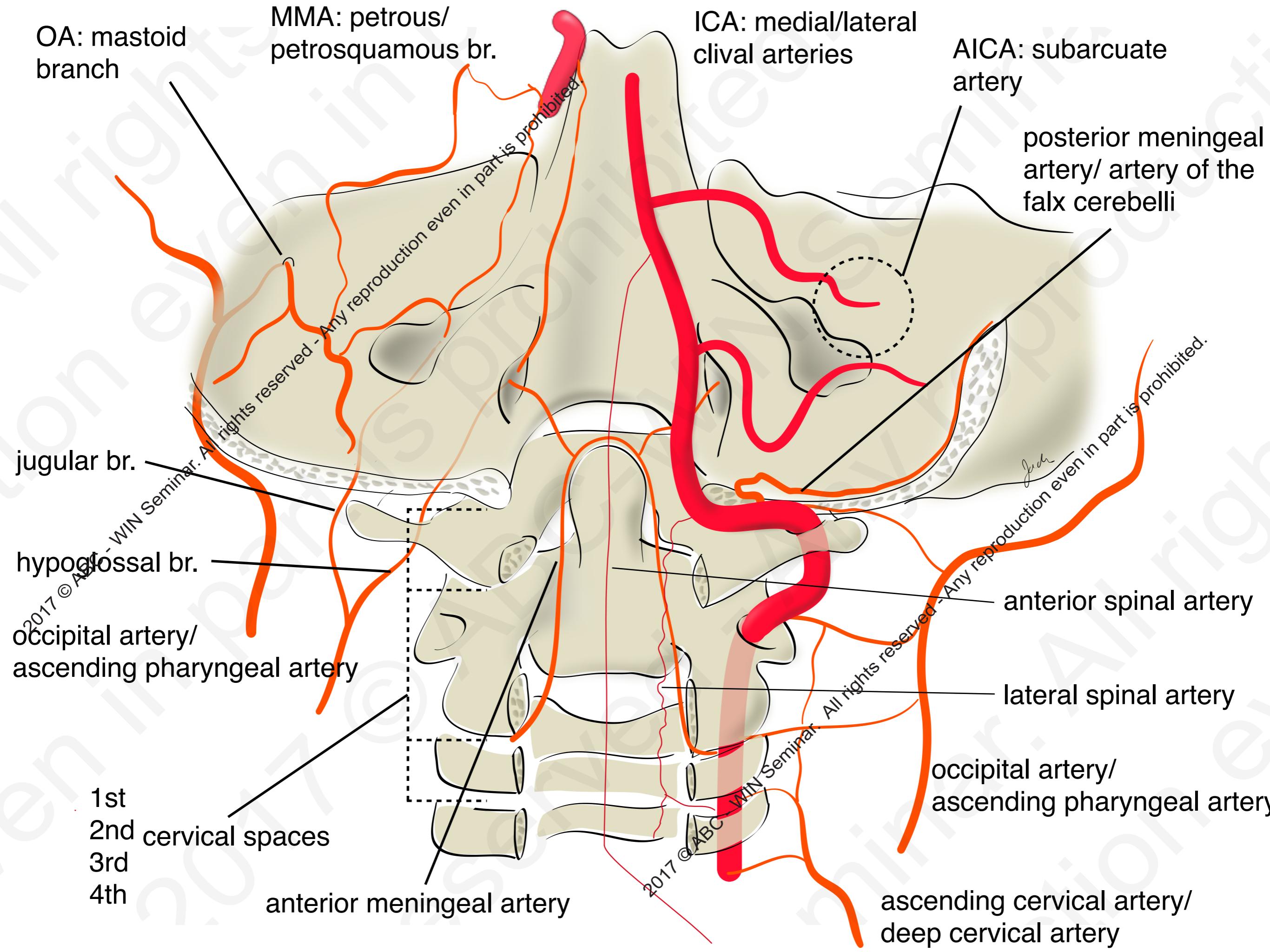
**The major participants of the  
cranio-cervical junction(CCJ) arterial system**

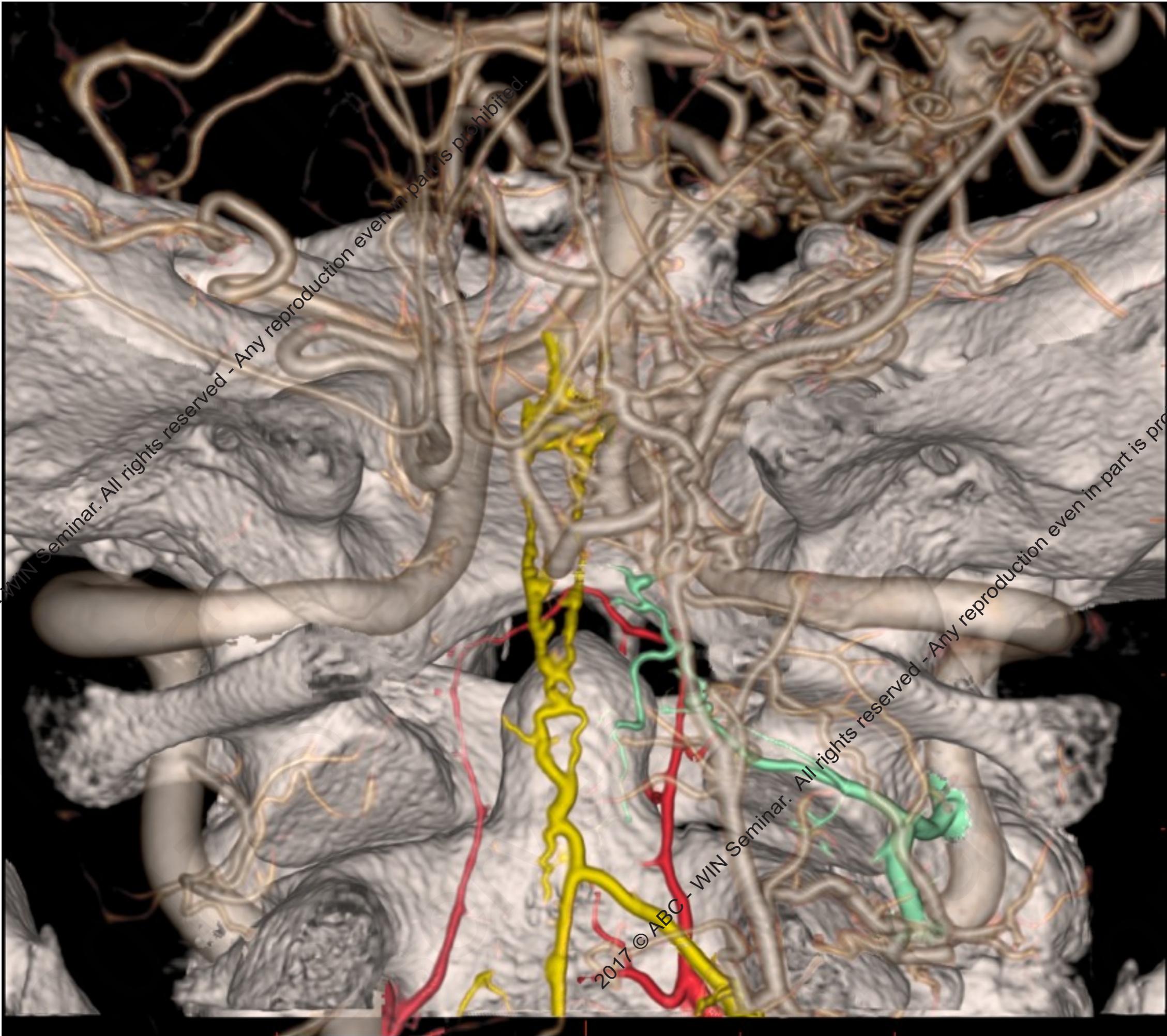
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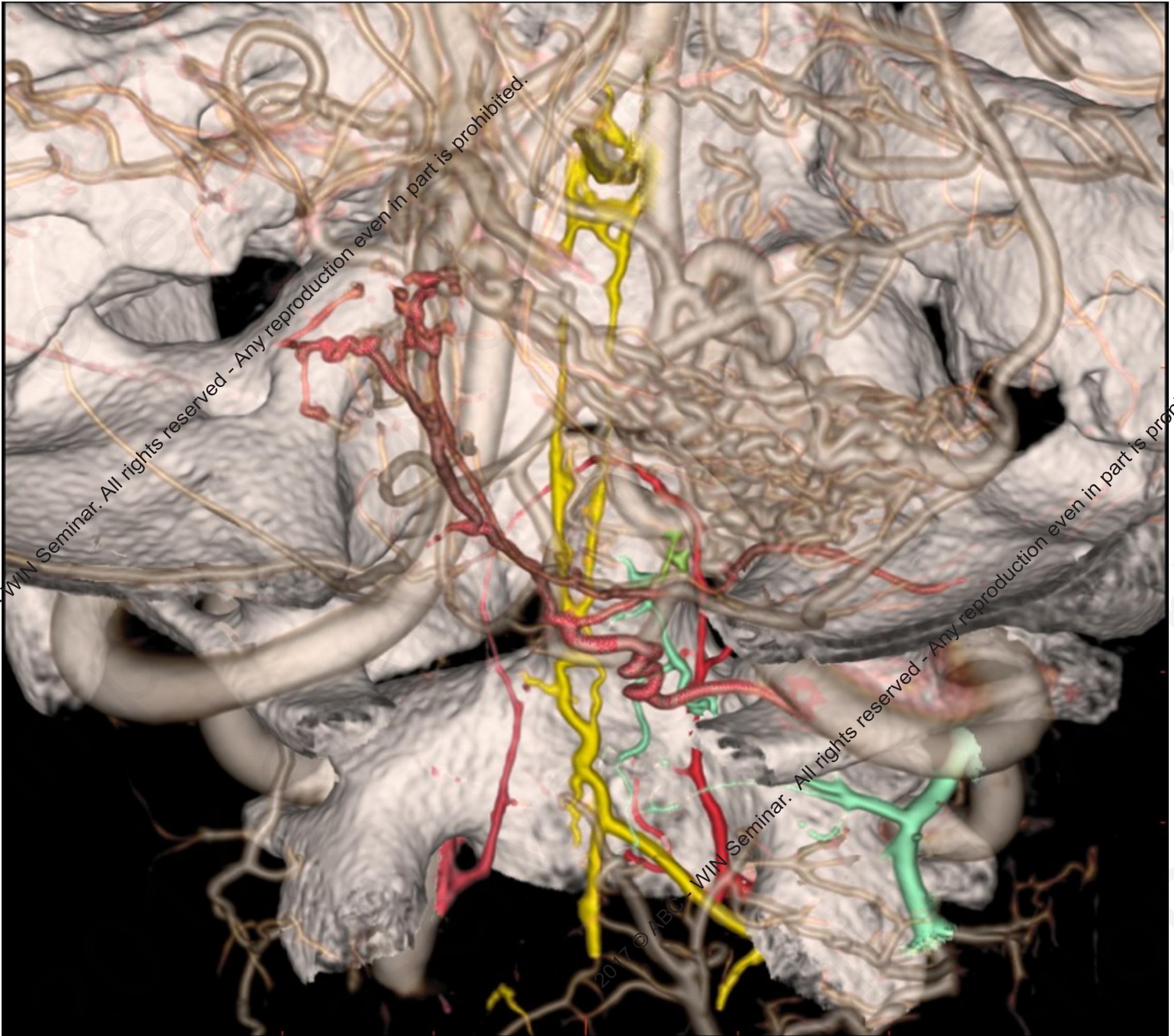
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# 10 F, cerebellar AVM





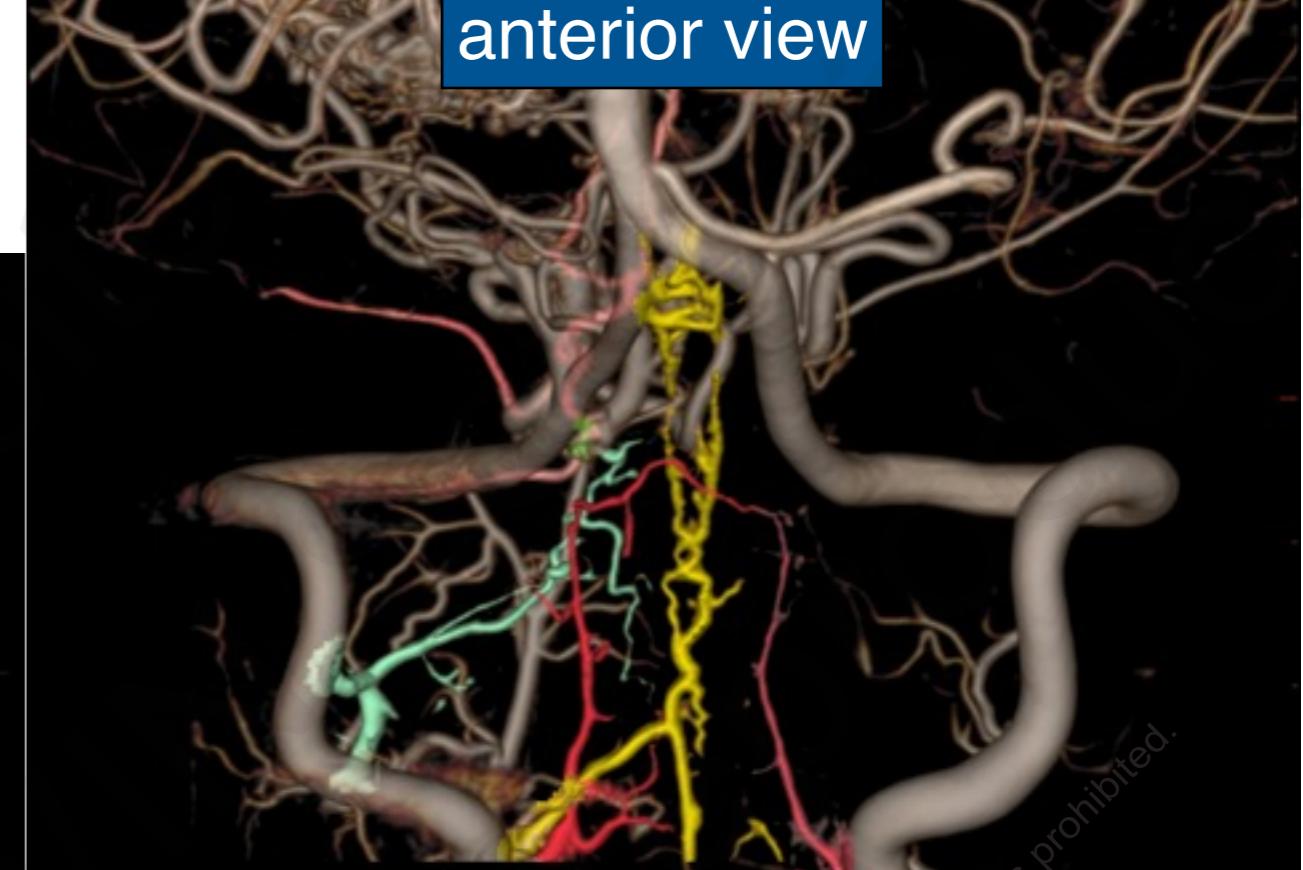




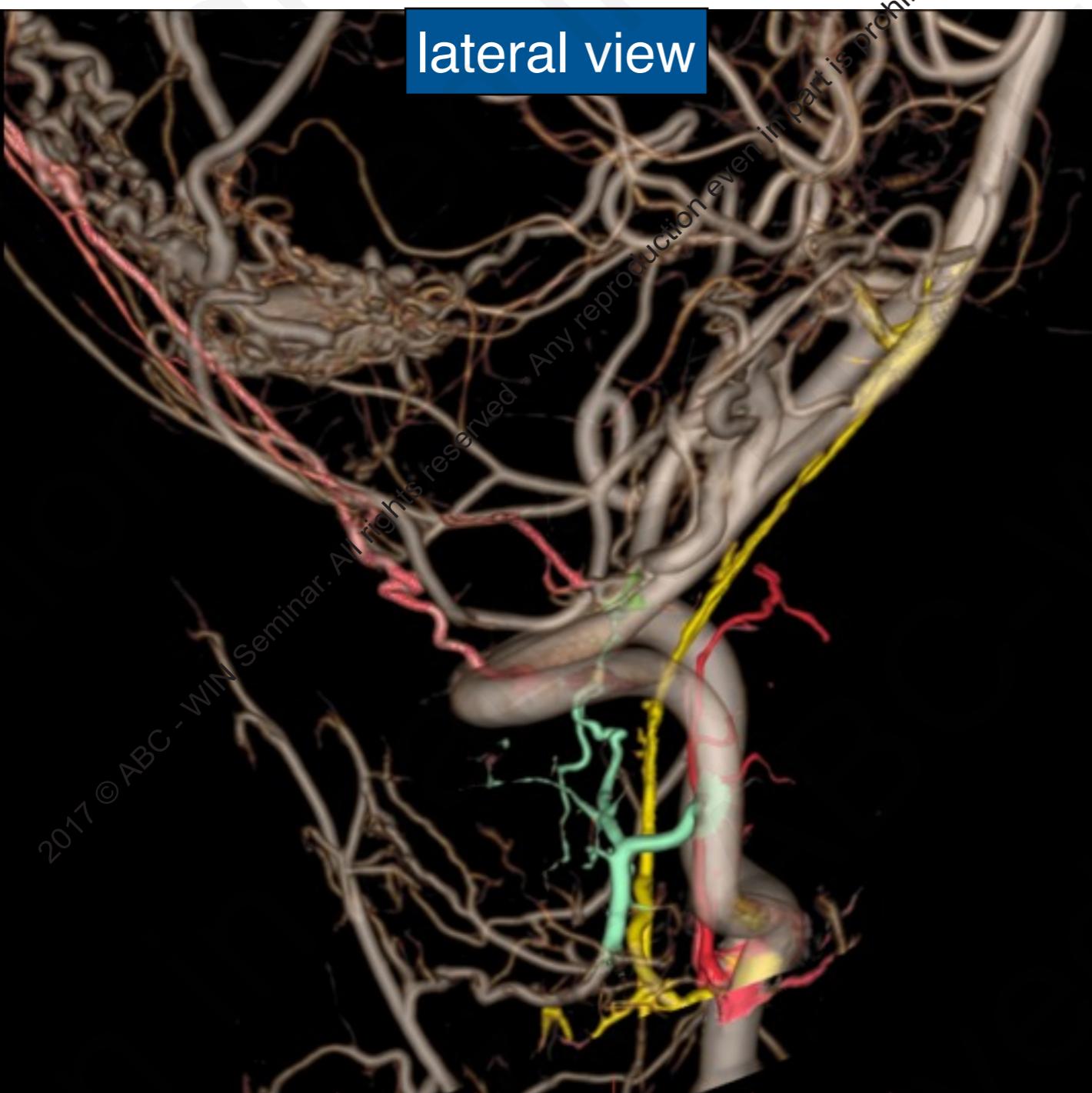
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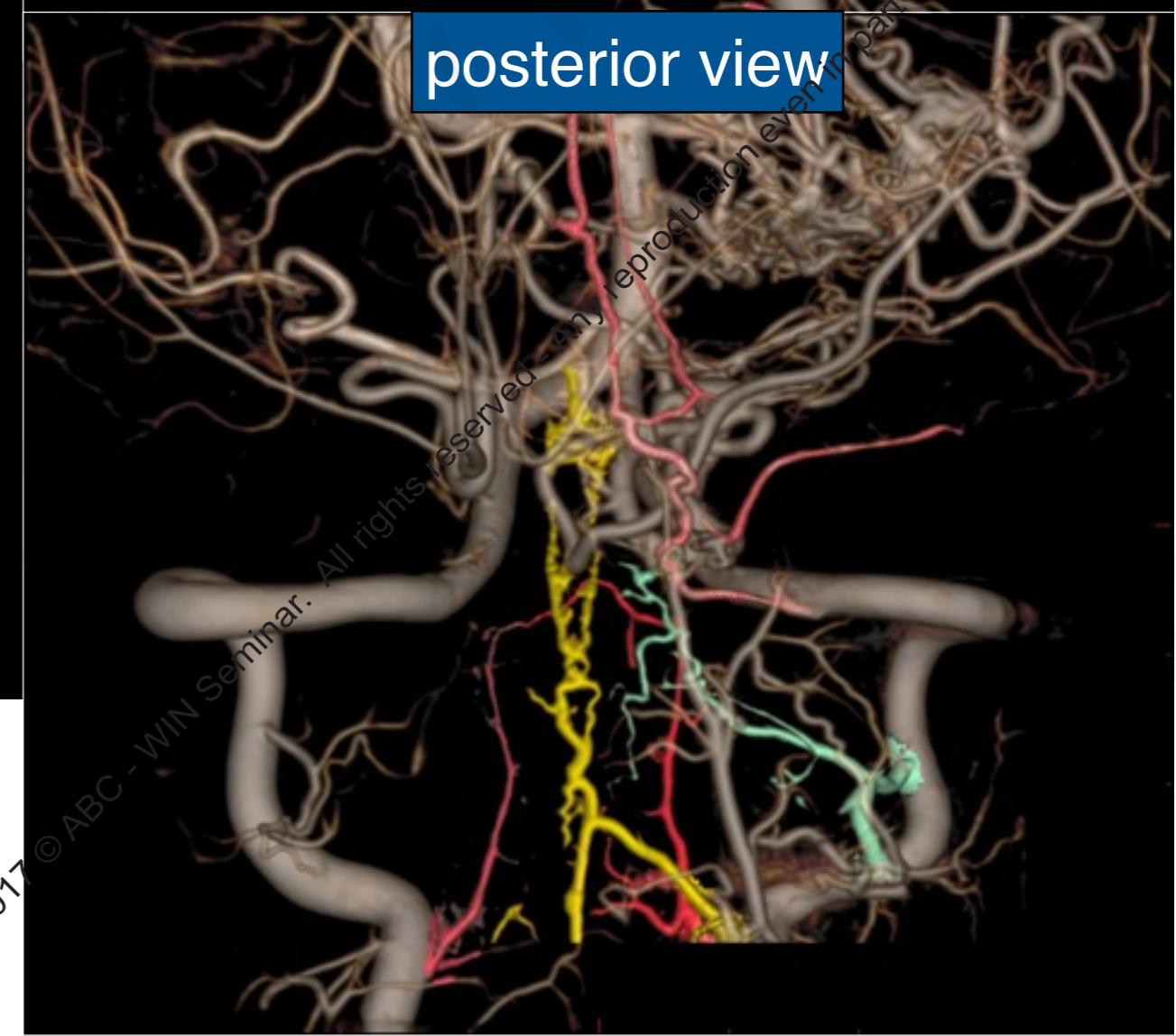
anterior view



lateral view



posterior view



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# **Introduction 2**

## **The segmental arrangement in the CCJ**

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# Anastomosis at the CCJ

at the first two segments...

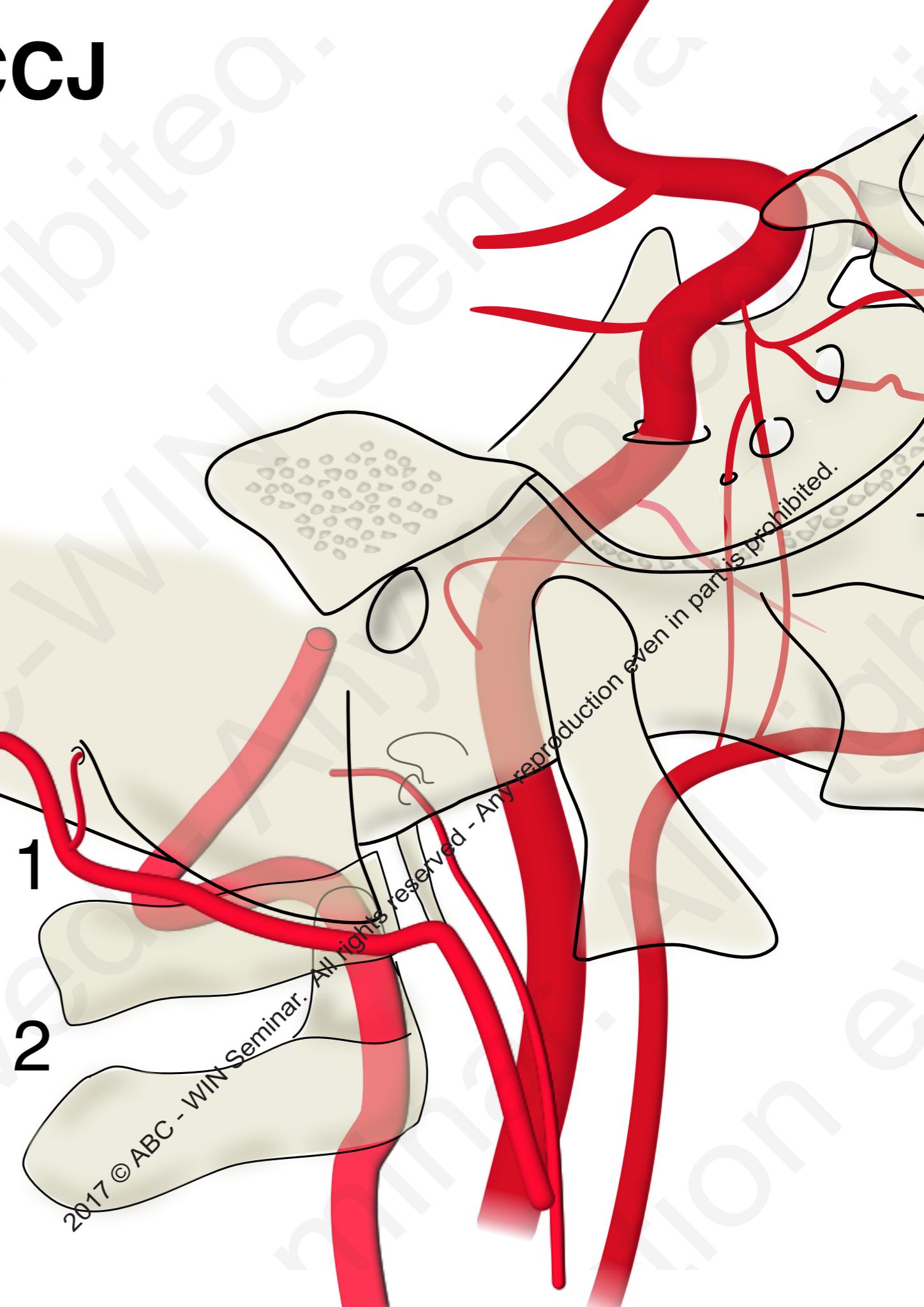
**Connections between**

Vertebral artery

Occipital artery

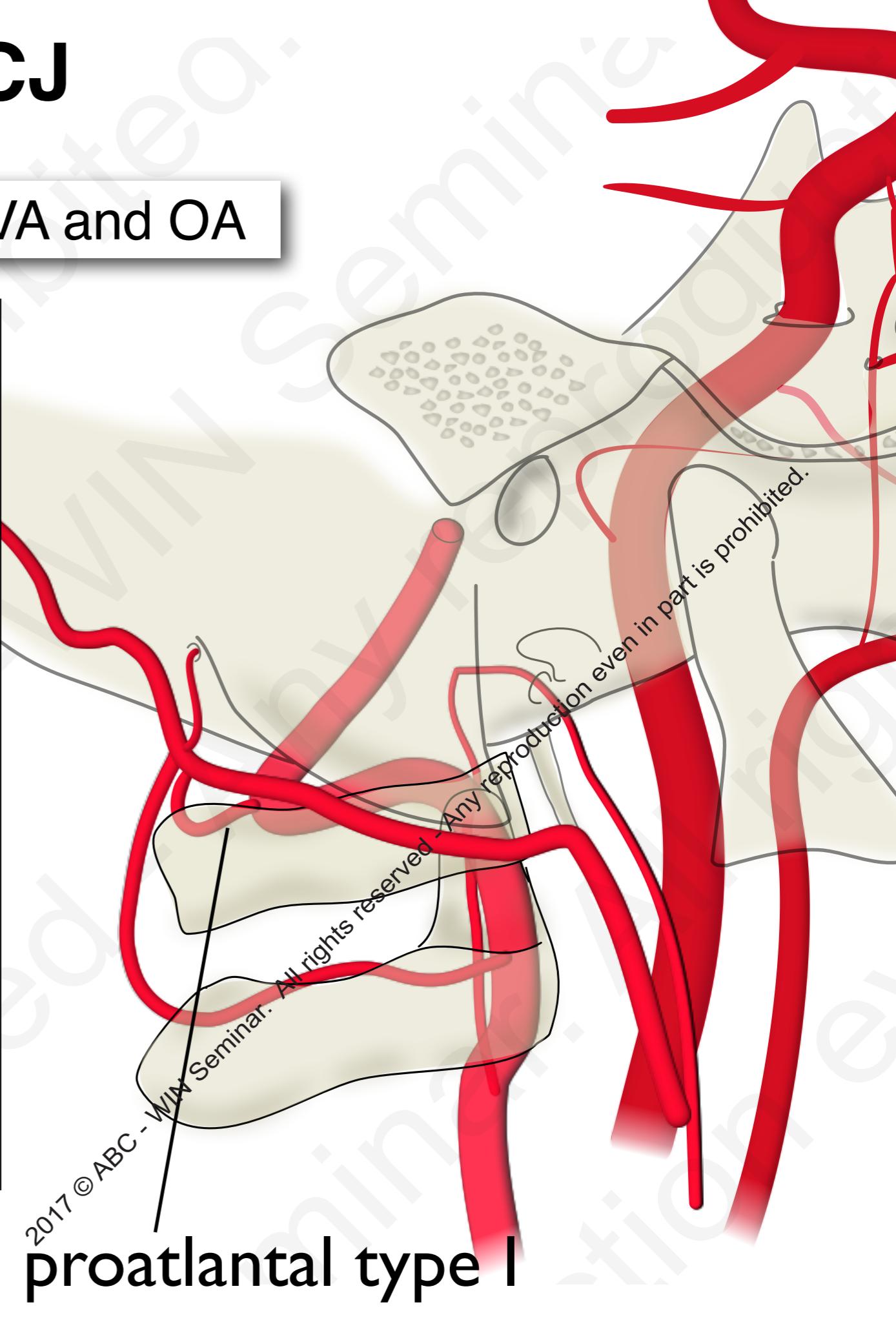
Ascending pharyngeal artery

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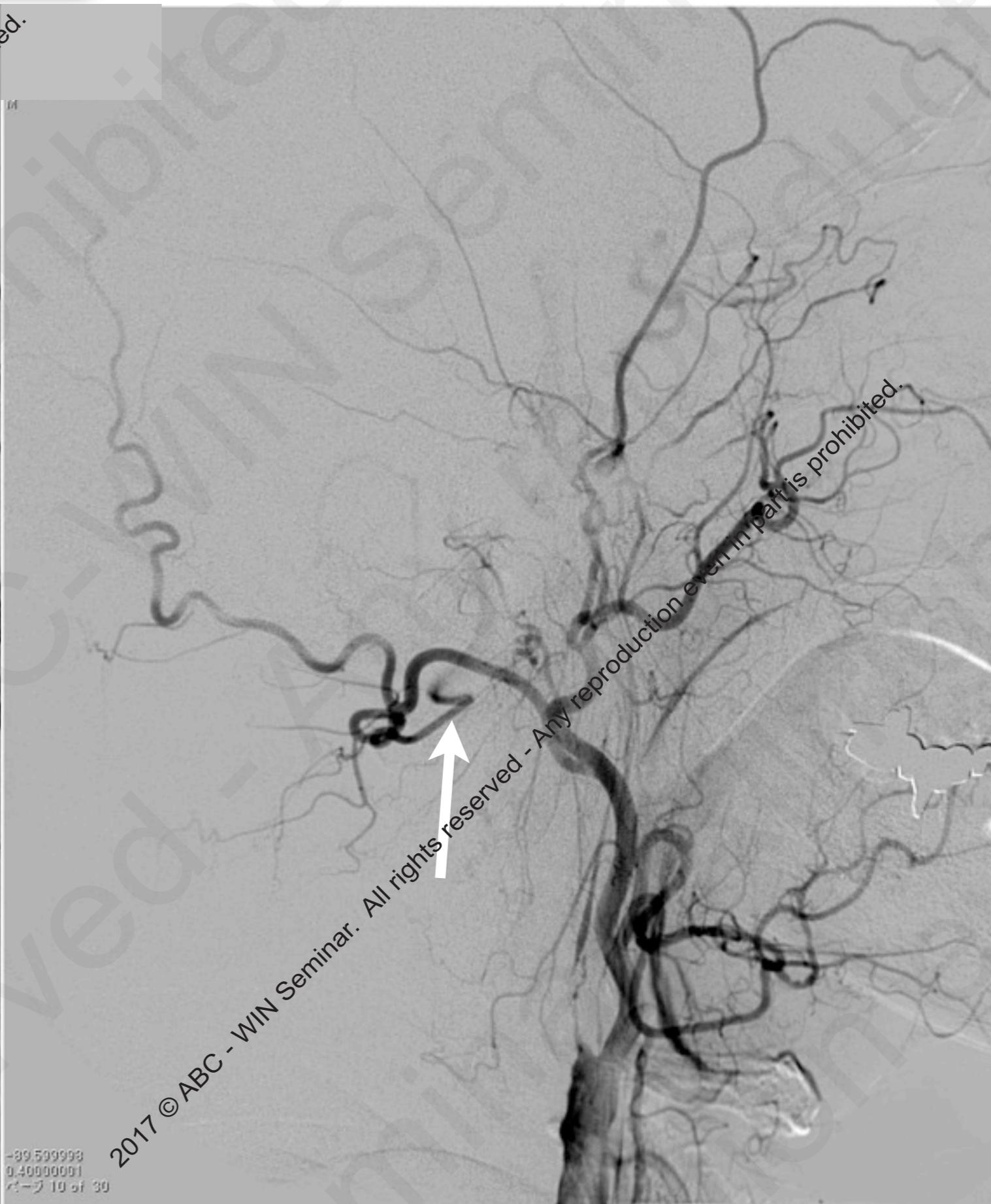


# Anastomosis at the CCJ

proatlantal type 1 anastomosis of VA and OA



# similar examples of this connection



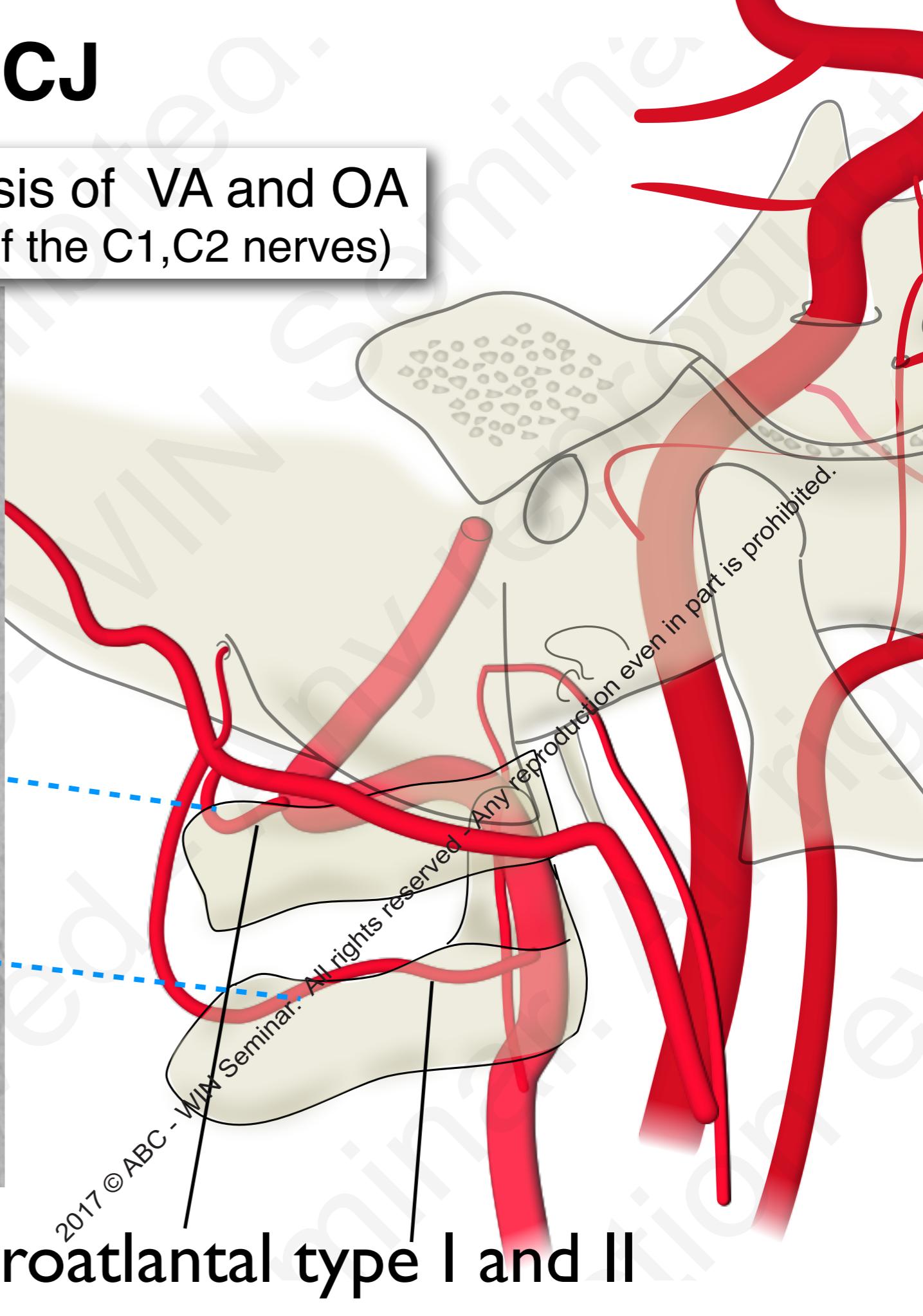
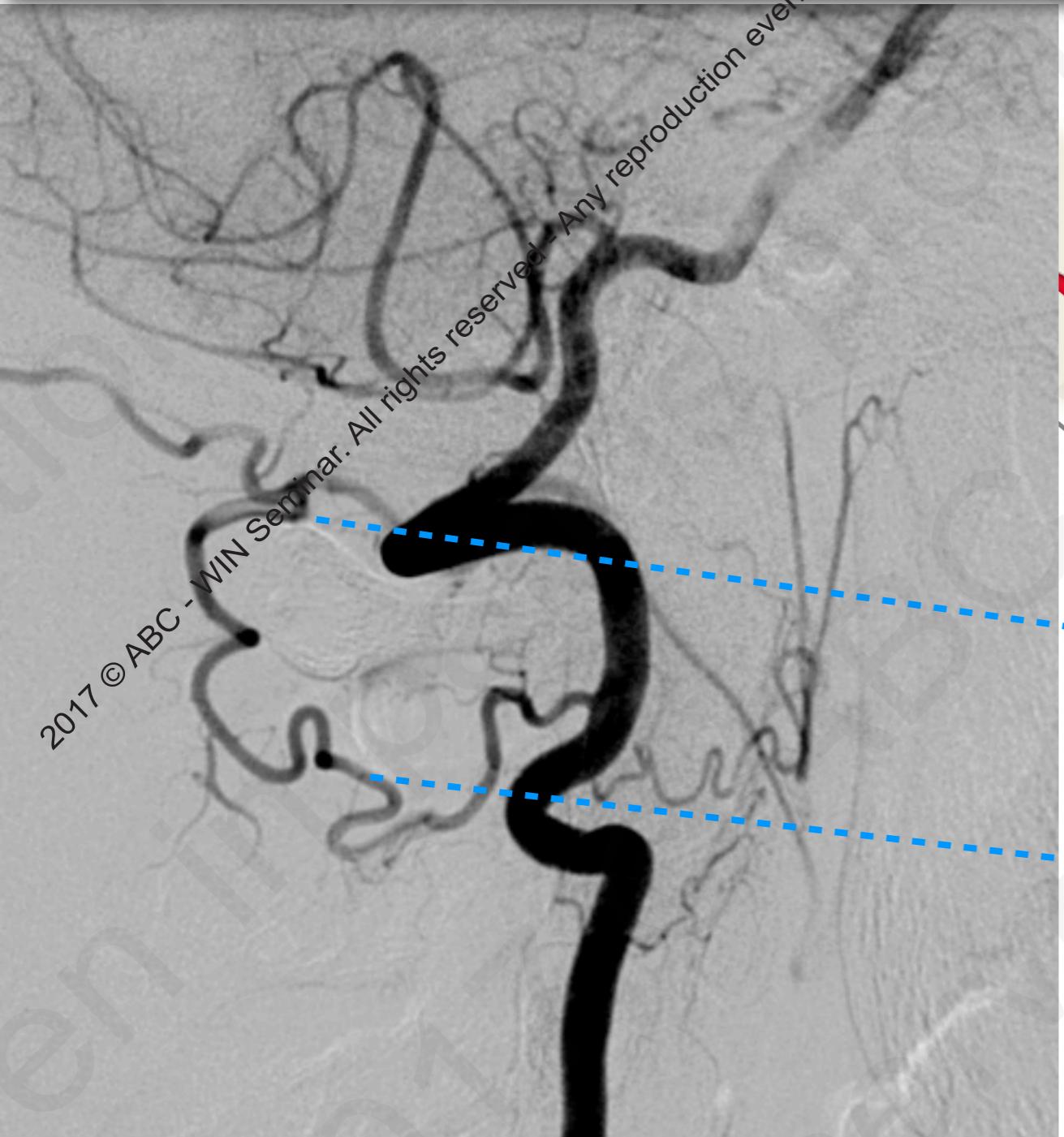


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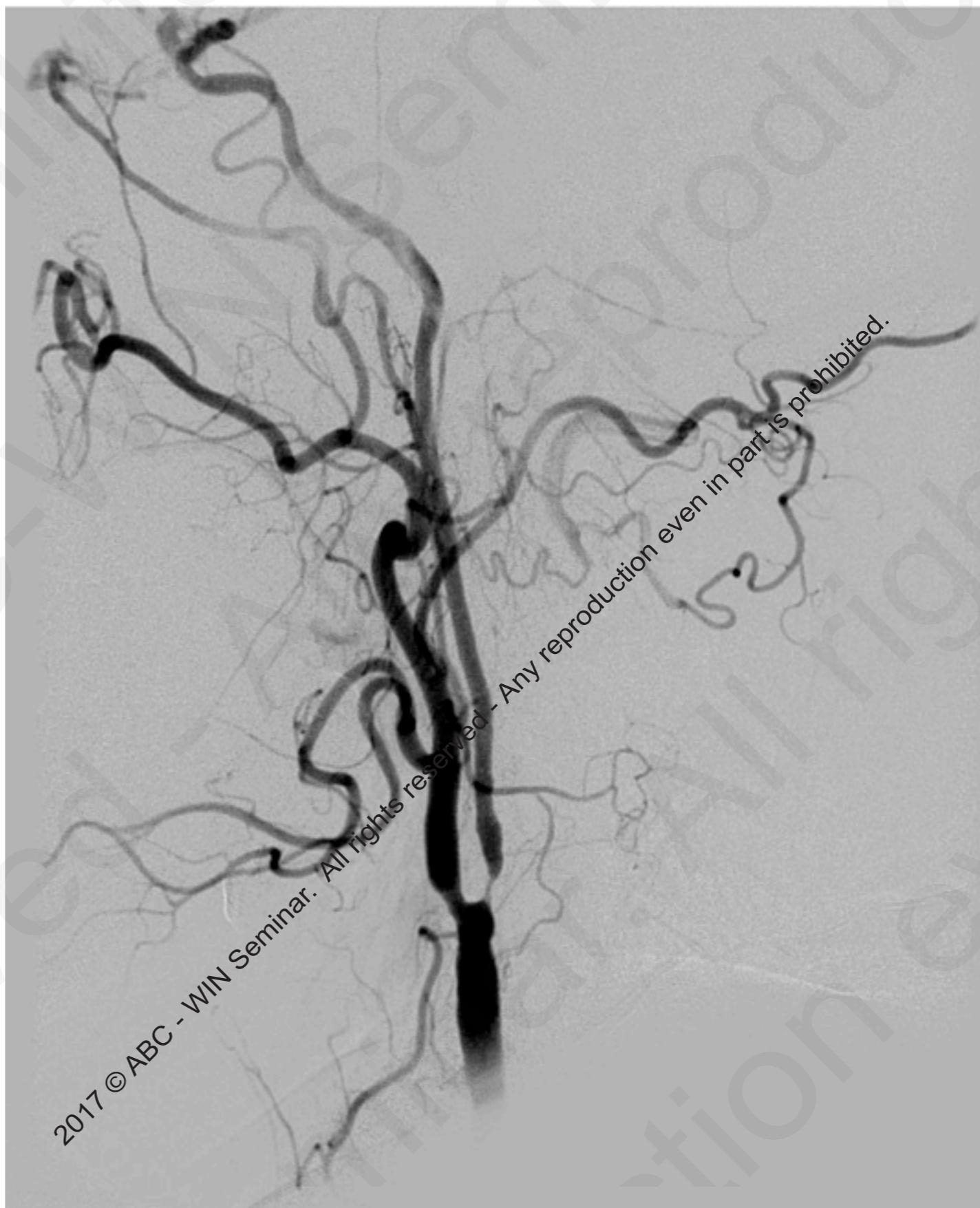
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# Anastomosis at the CCJ

proatlantal type 1 and II anastomosis of VA and OA  
(connected through the posterior ramus of the C1,C2 nerves)



# proatlantal type 1 and II anastomosis of VA and OA

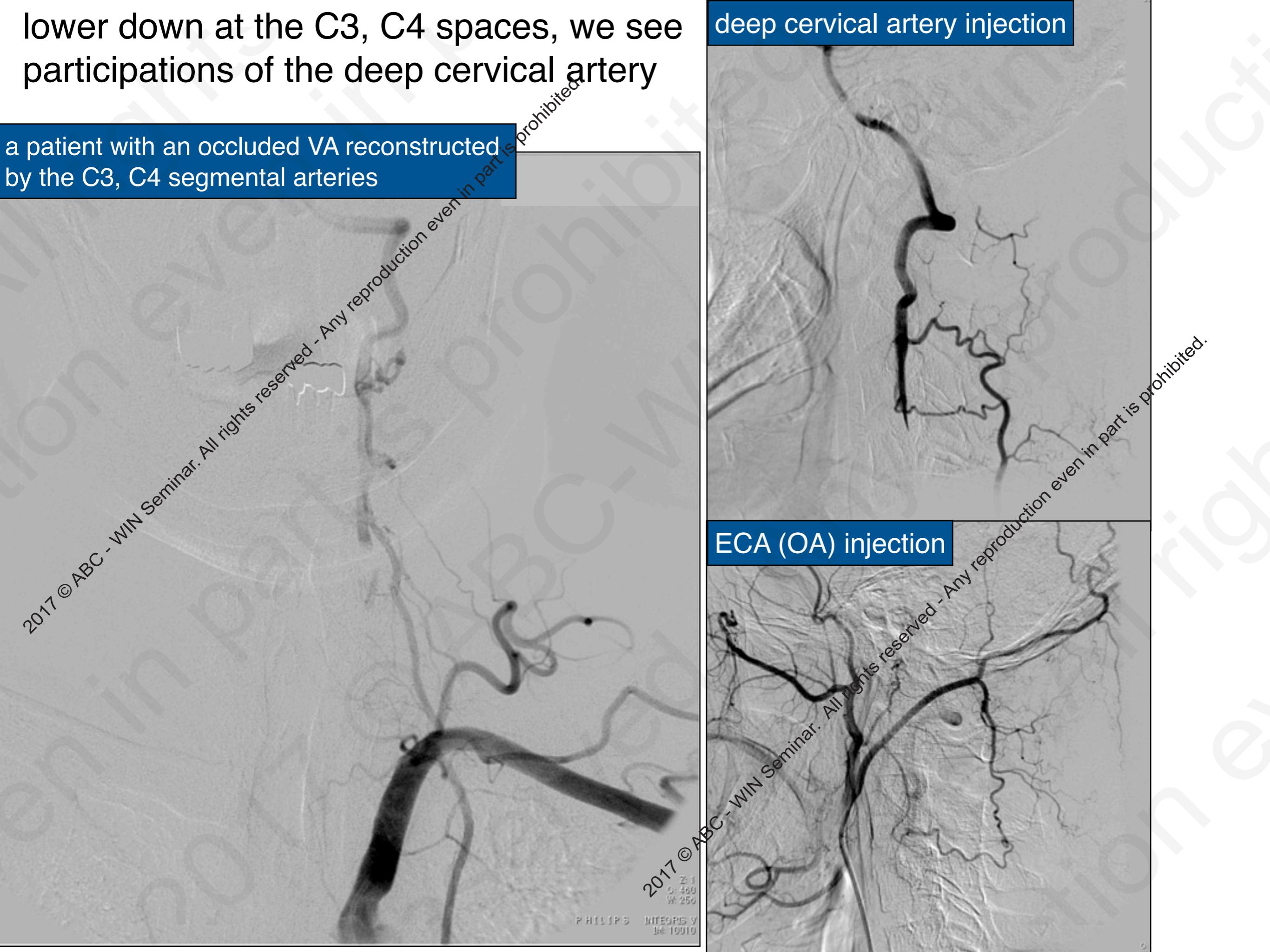


lower down at the C3, C4 spaces, we see participations of the deep cervical artery

a patient with an occluded VA reconstructed by the C3, C4 segmental arteries

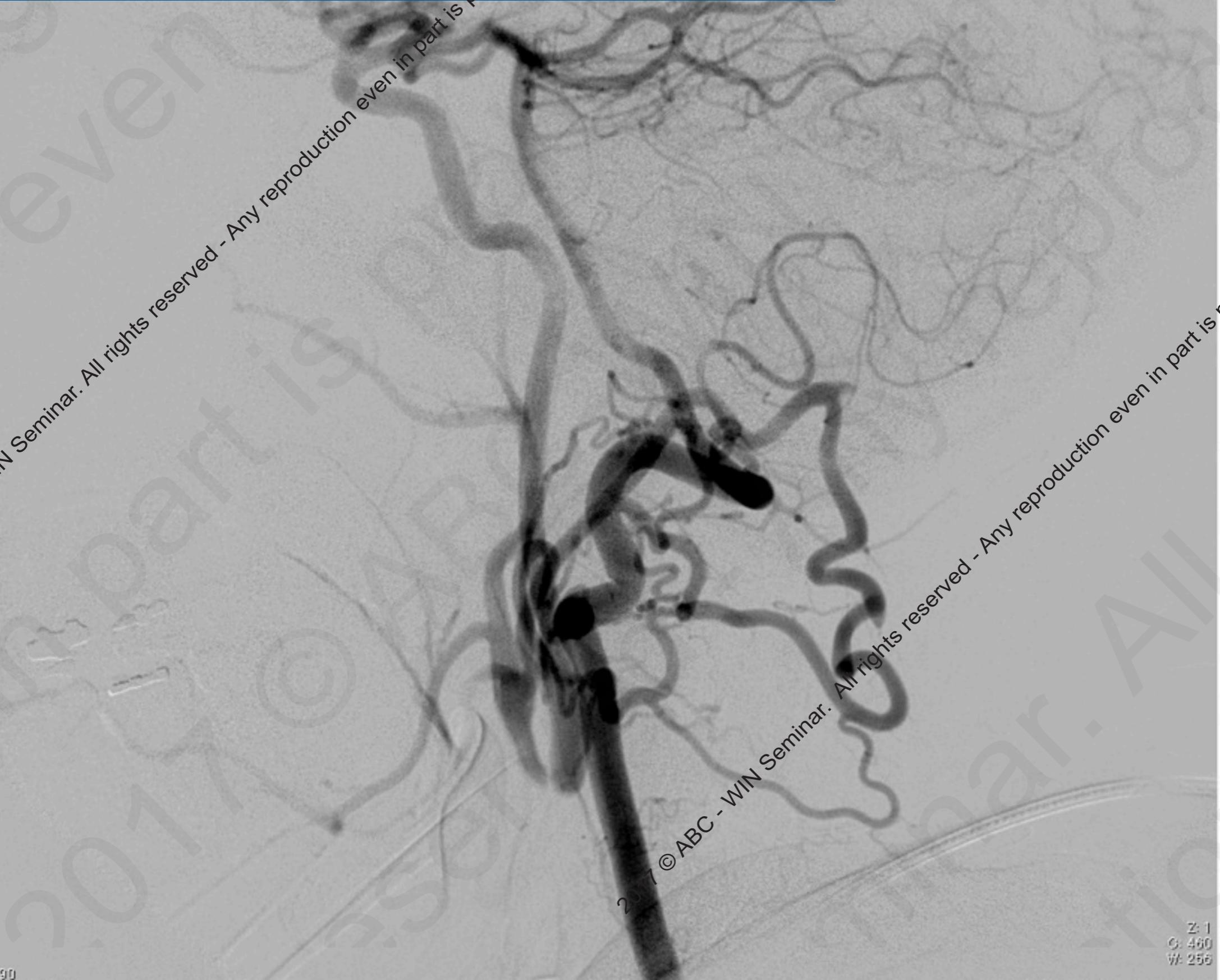
deep cervical artery injection

ECA (OA) injection



36 F, common carotid artery occlusion due to  
Takayasu arteritis, showing good collaterals  
through the C1, C2 and C3 cervical spaces.

血管撮影 施設部造影  
2006/09/18 15:07:28  
0098120620060906



# 42 F, left VA dissection(SAH)

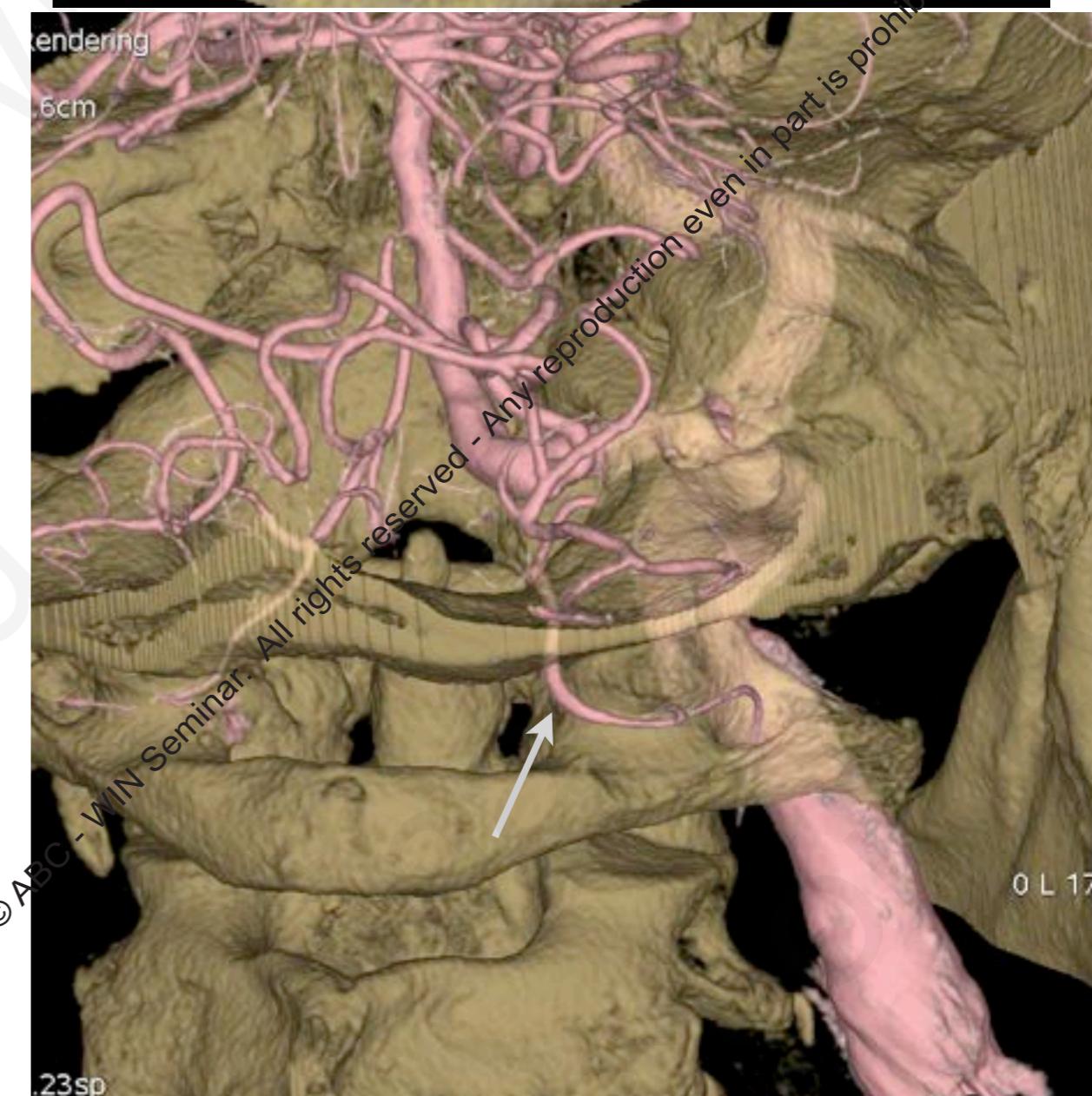
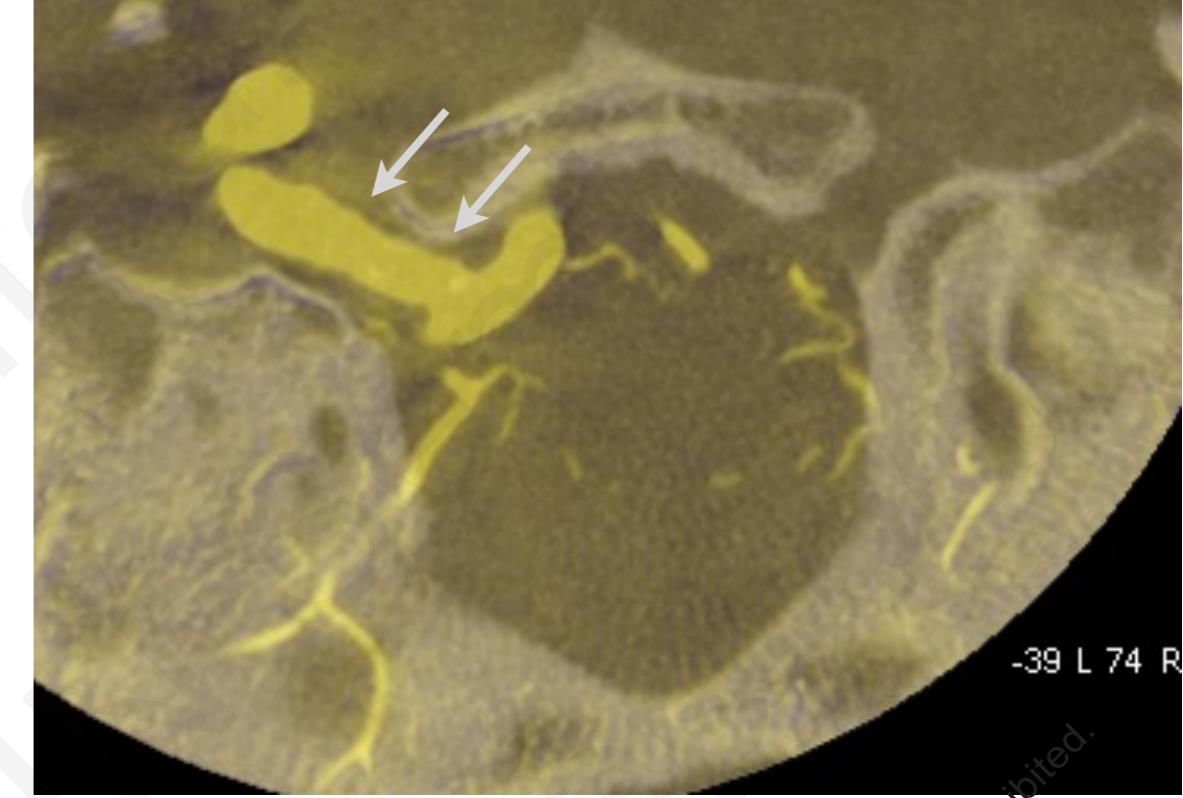
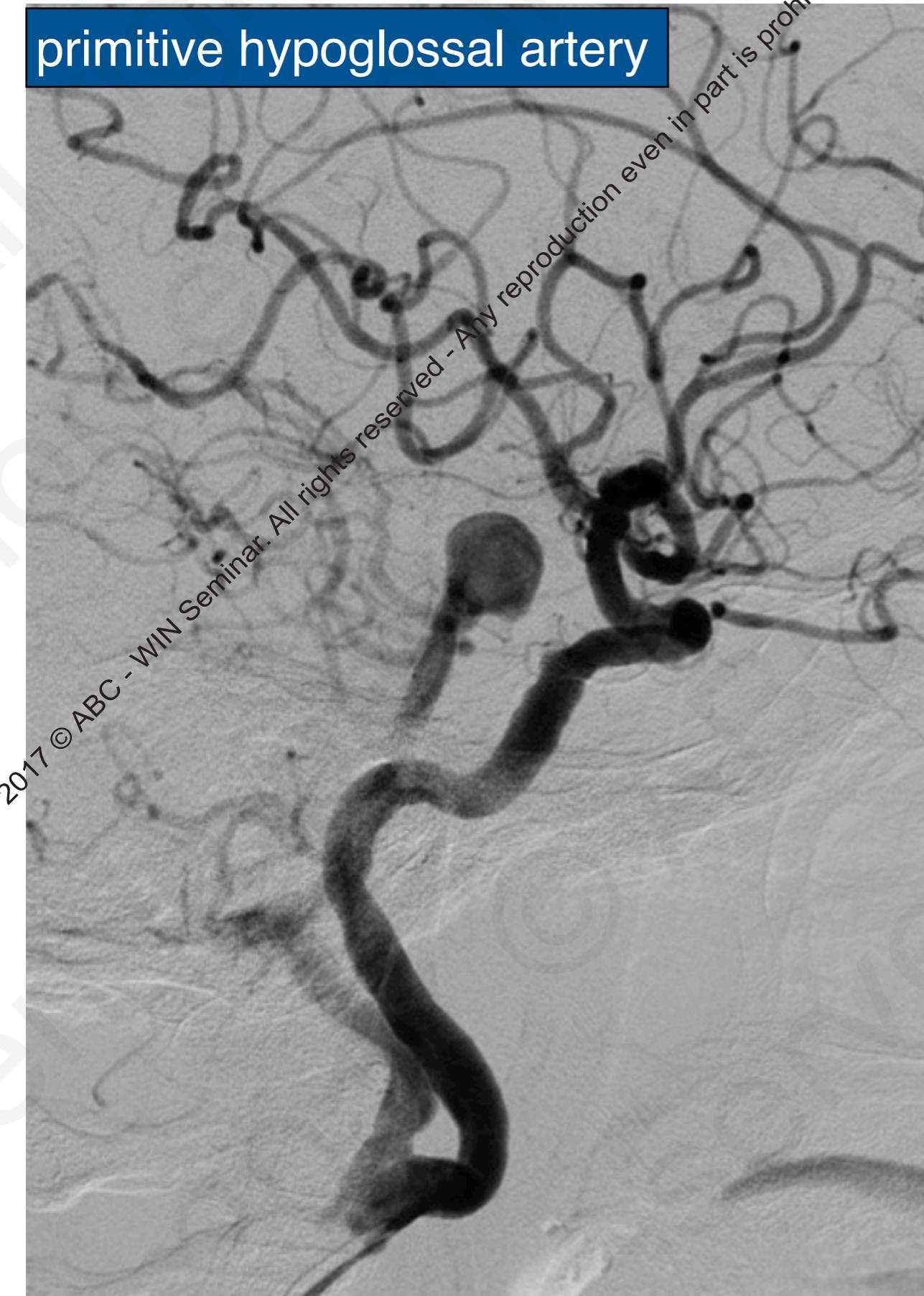


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Selective injection shows a connection to the VA through a musculospinal branch of the ascending pharyngeal artery at the C3 level.(At f/u angio after trapping of VA)



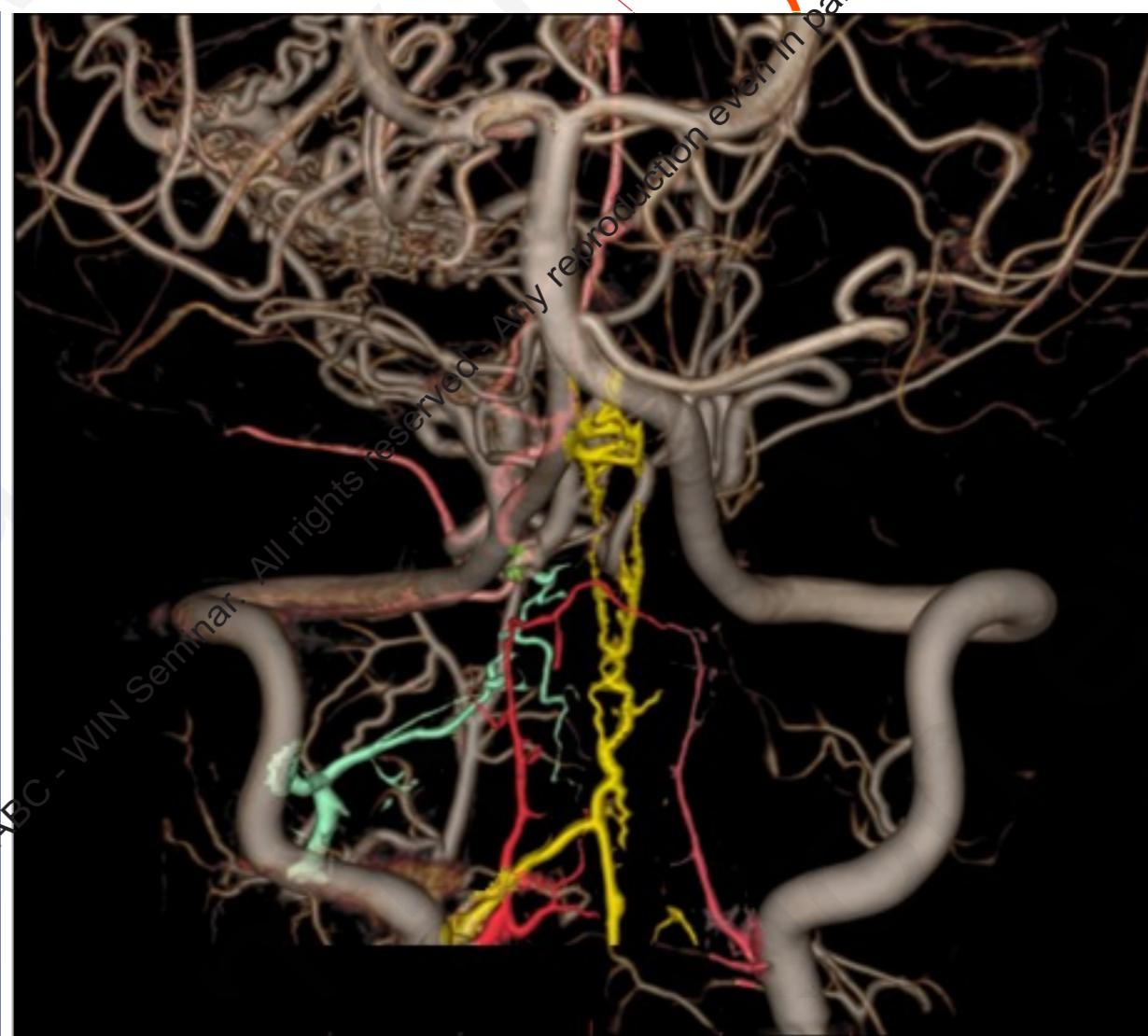
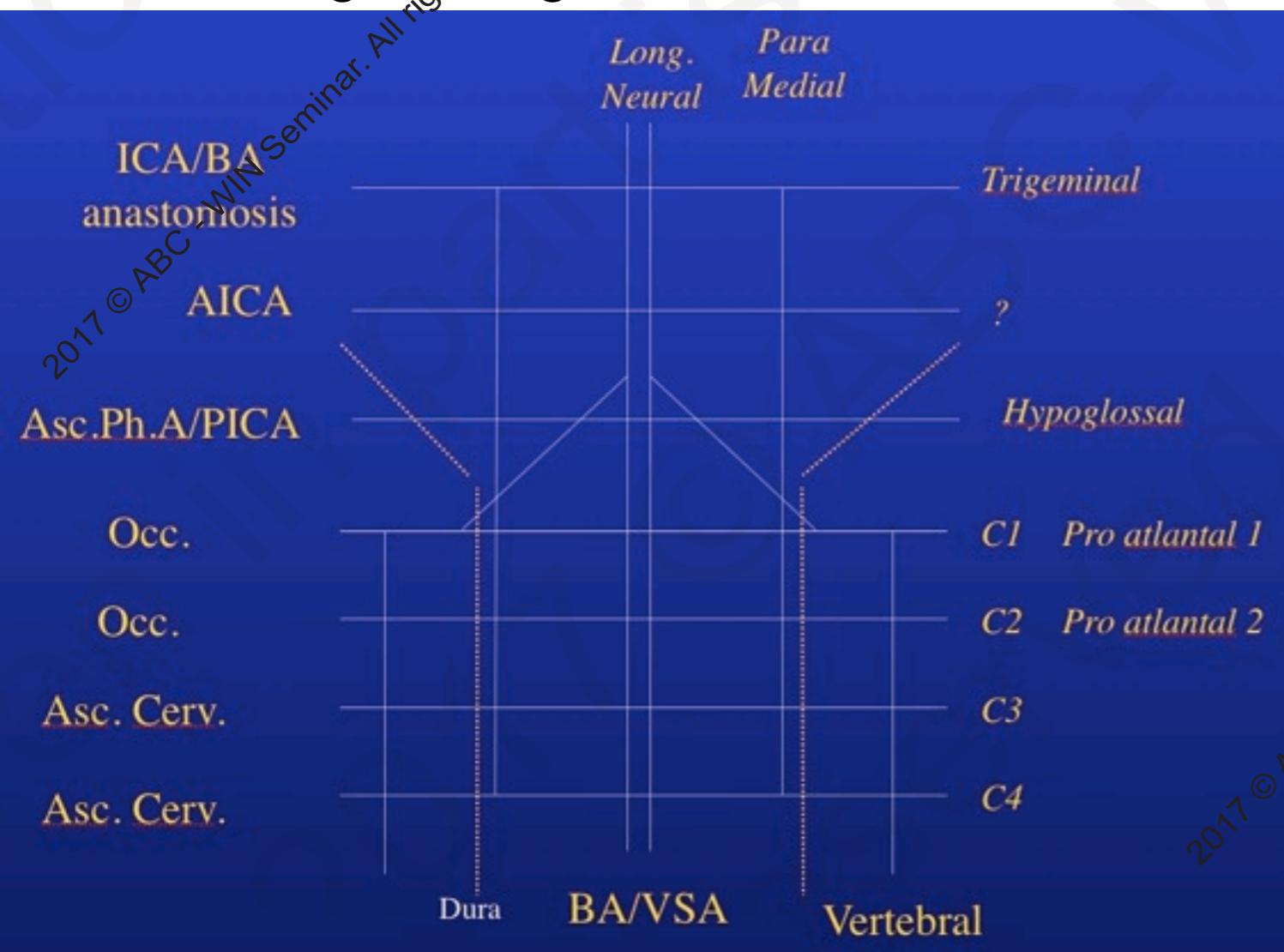
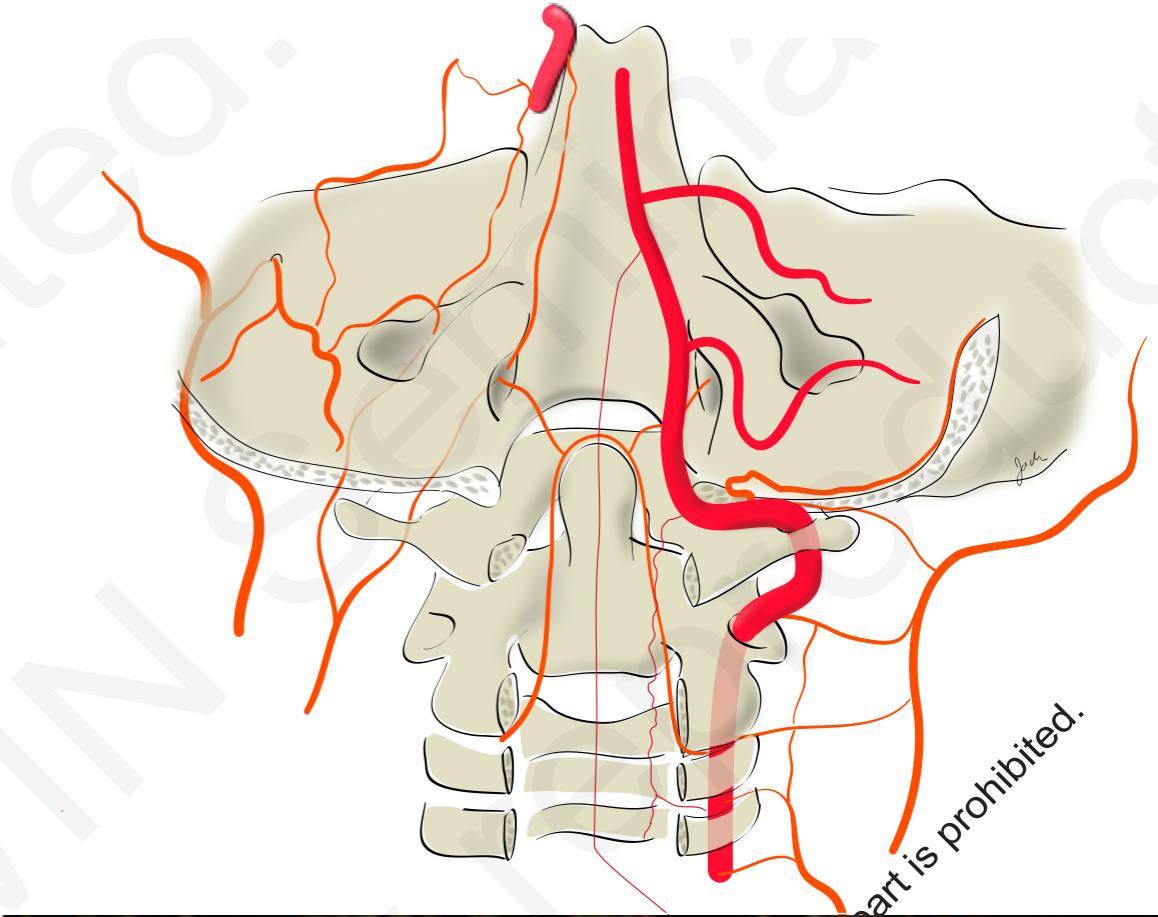
# 65 M, BA top aneurysm

primitive hypoglossal artery

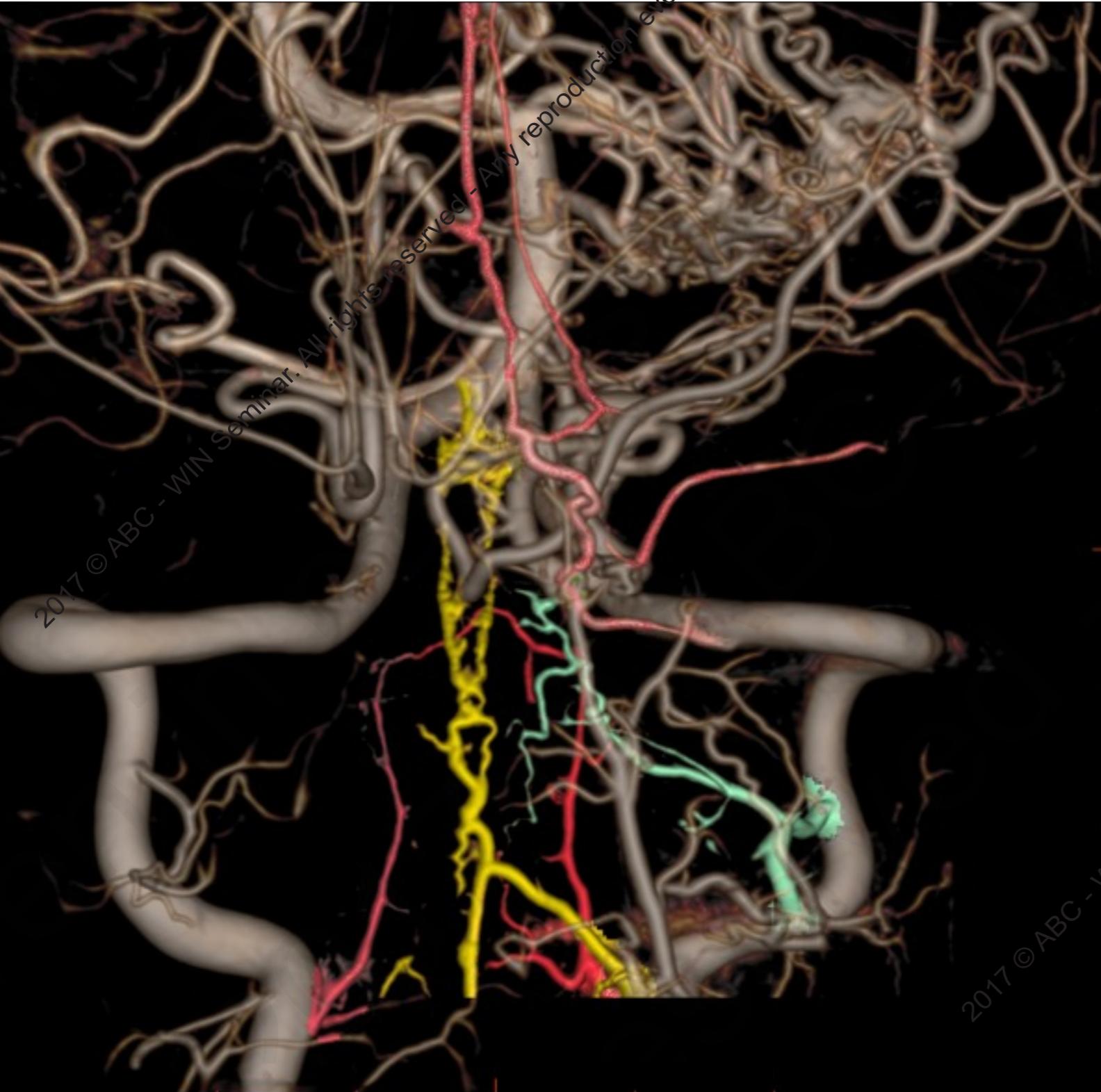


To summarize, the basic plan of the CCJ is based on the segmental arrangement as in the spine.  
(segmental("horizontal") connection through the C1-C4 cervical spaces)

However it has an extradural (ie.VA), dural(odontoid arch) and intradural (lat spinal a.) longitudinal anastomosis that plays roles in the connection of each system with the original segmental arteries.



The craniocervical junction is a very important connection point of the...



## Spinal arterial system

- dural branches
  - # anterior meningeal artery
- anterior spinal artery
- lateral spinal artery
- muscular branches

## Intracranial arterial system

- dural branches
  - # posterior meningeal artery
  - # supratentorial dural br.
- anterior spinal artery
- lateral spinal artery
- PICA

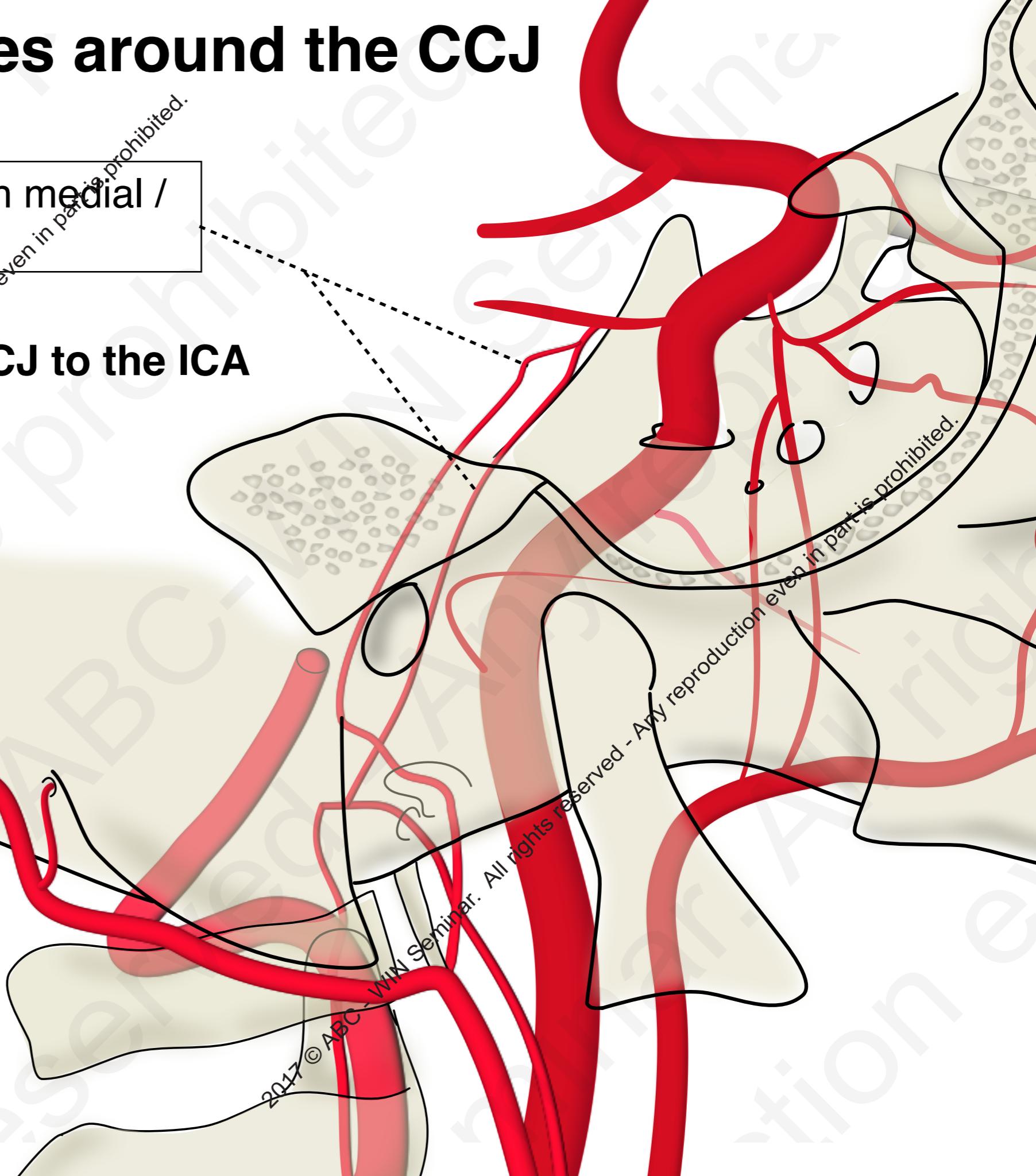
and also...

contributions from  
the occipital artery and  
the ascending pharyngeal artery  
the deep/ascending cervical  
arteries

# The dural branches around the CCJ

APA, OA to ICA through medial / lateral clival arteries

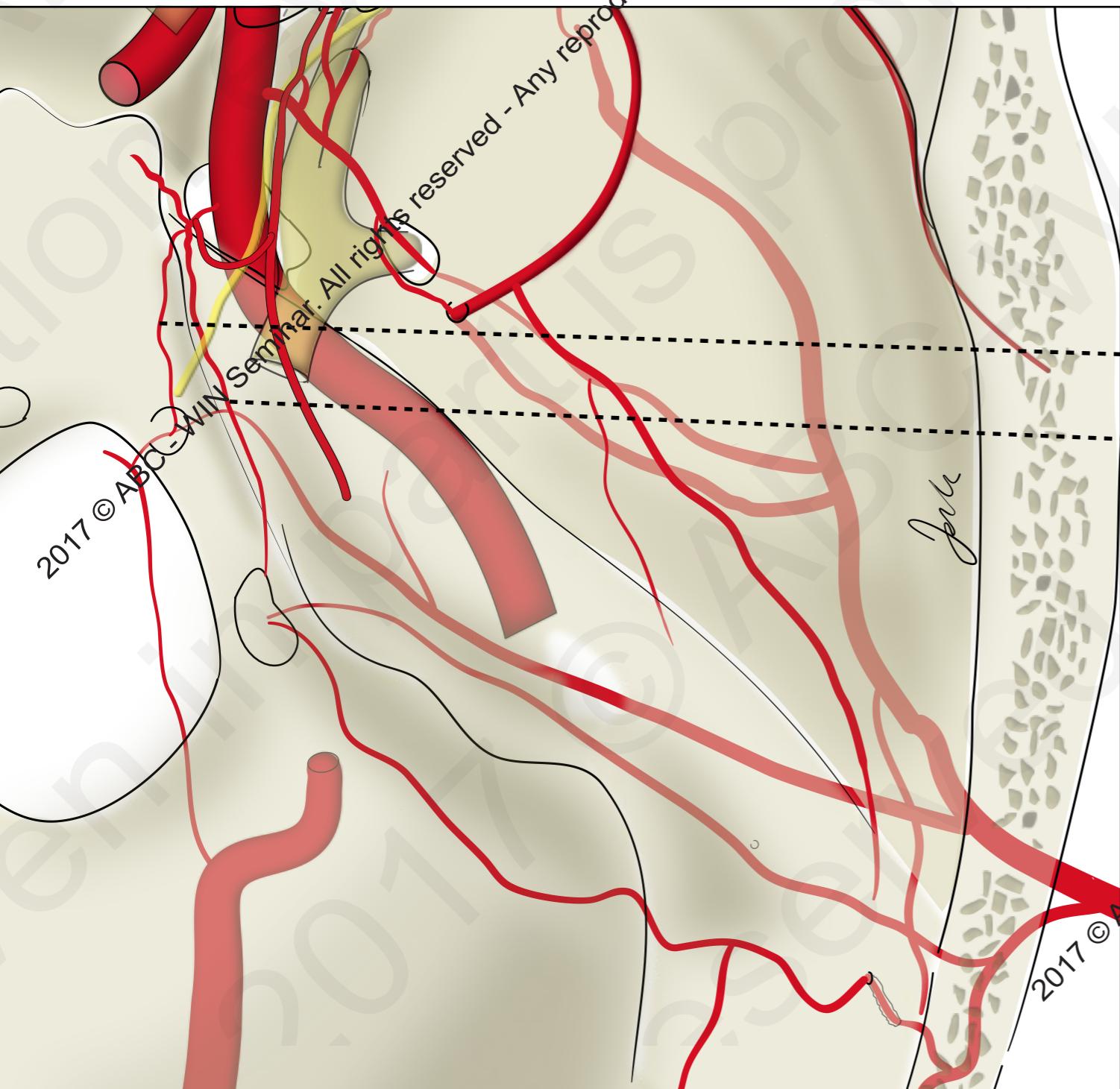
Anastomosis at the CCJ to the ICA



# Anastomosis at the posterior fossa dura

# APA, OA to ICA through medial / lateral clival arteries

# superior view

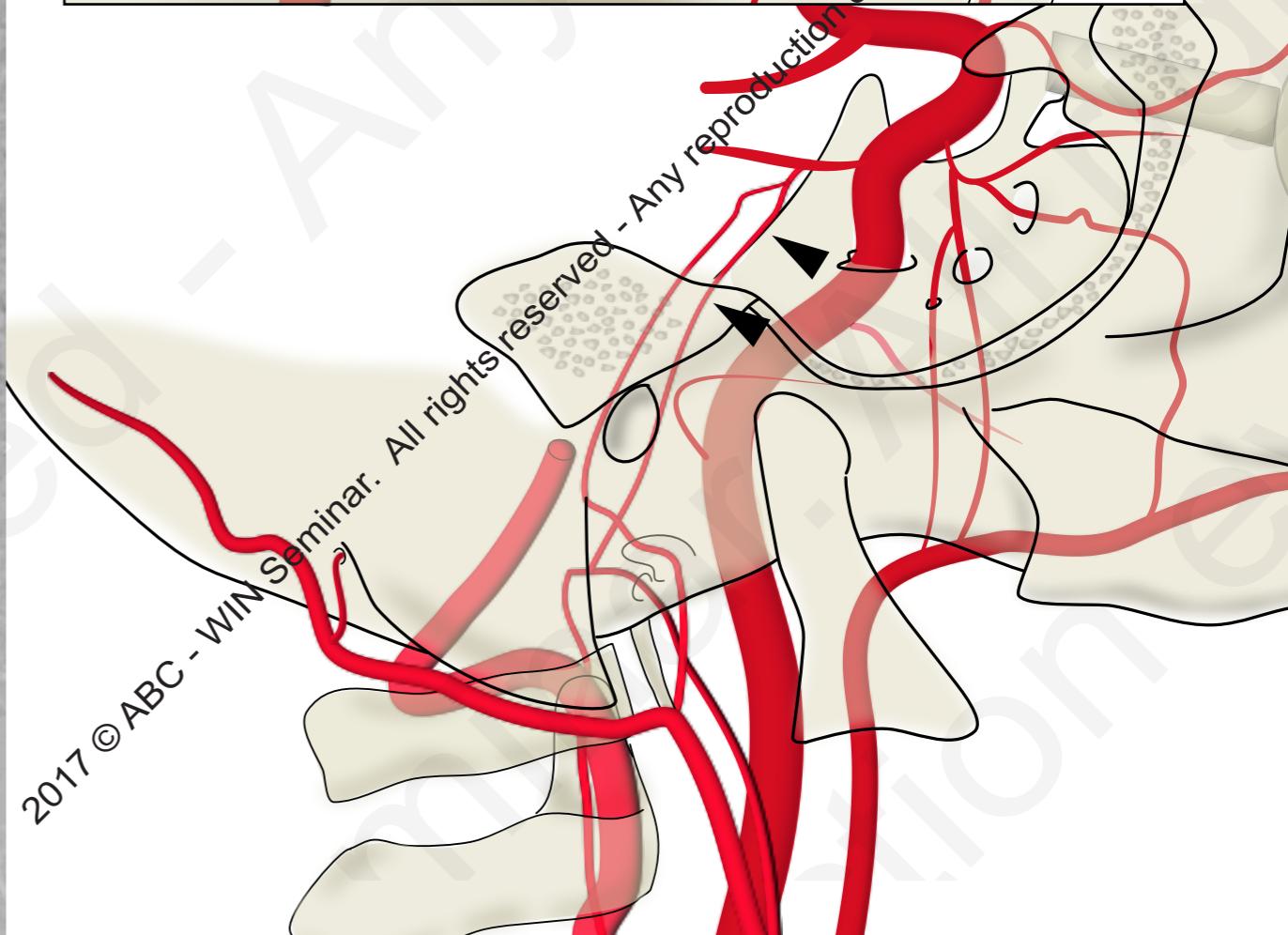
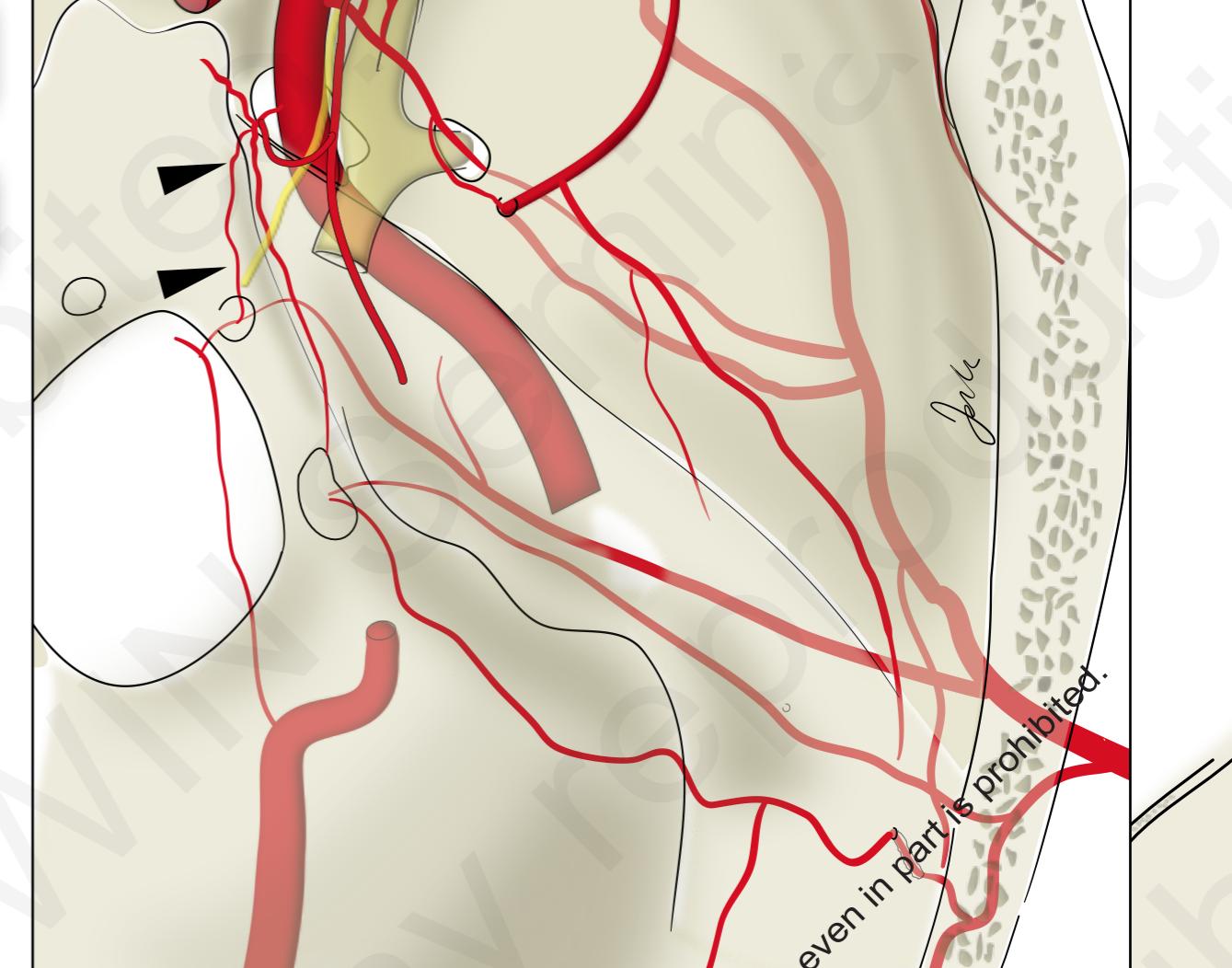


## **| lateral view**

APA --- medial clival artery --- MHT(ICA)

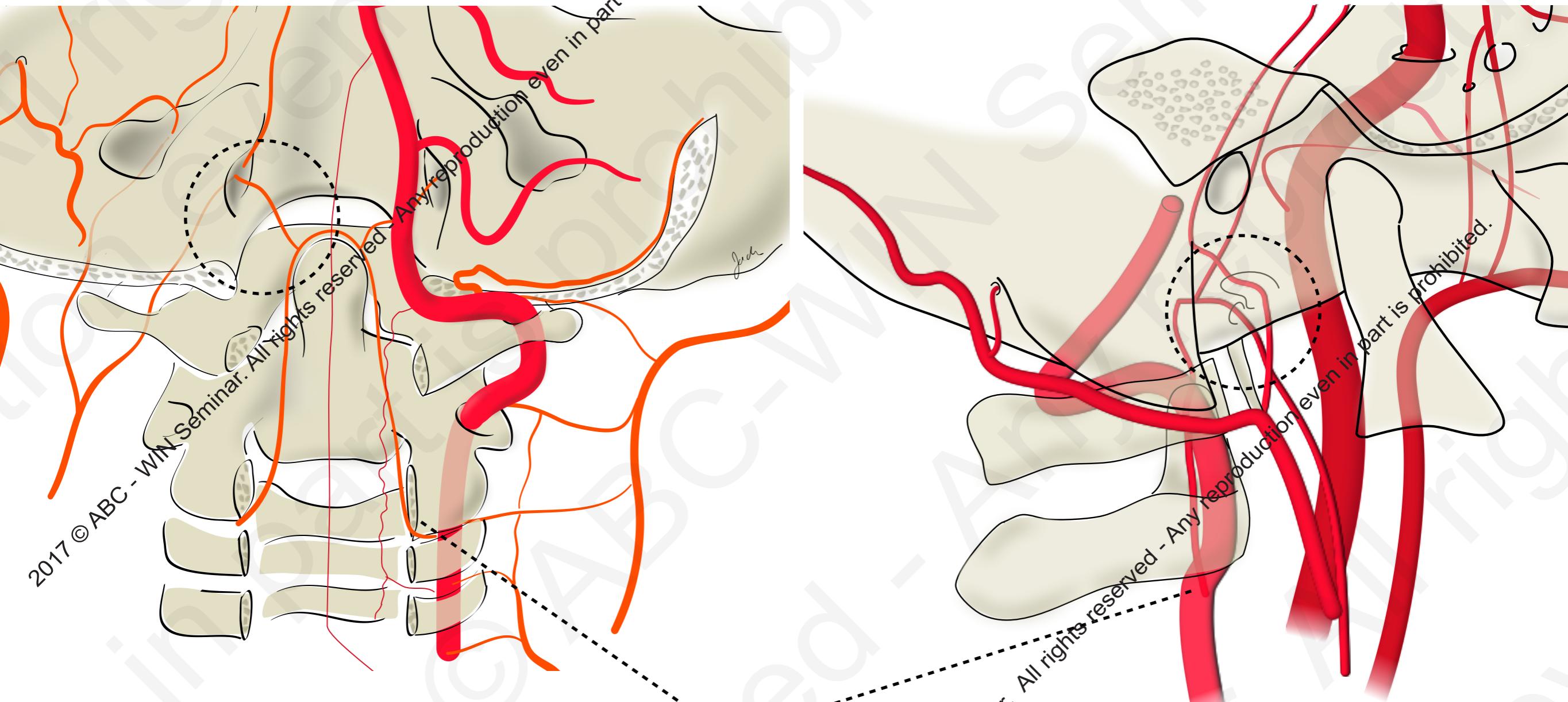
OA --- lateral clival artery --- MHT(ICA)

selective injection of ascending pharyngeal artery  
showing connection to the ICA through the  
medial clival artery.(black arrow heads)



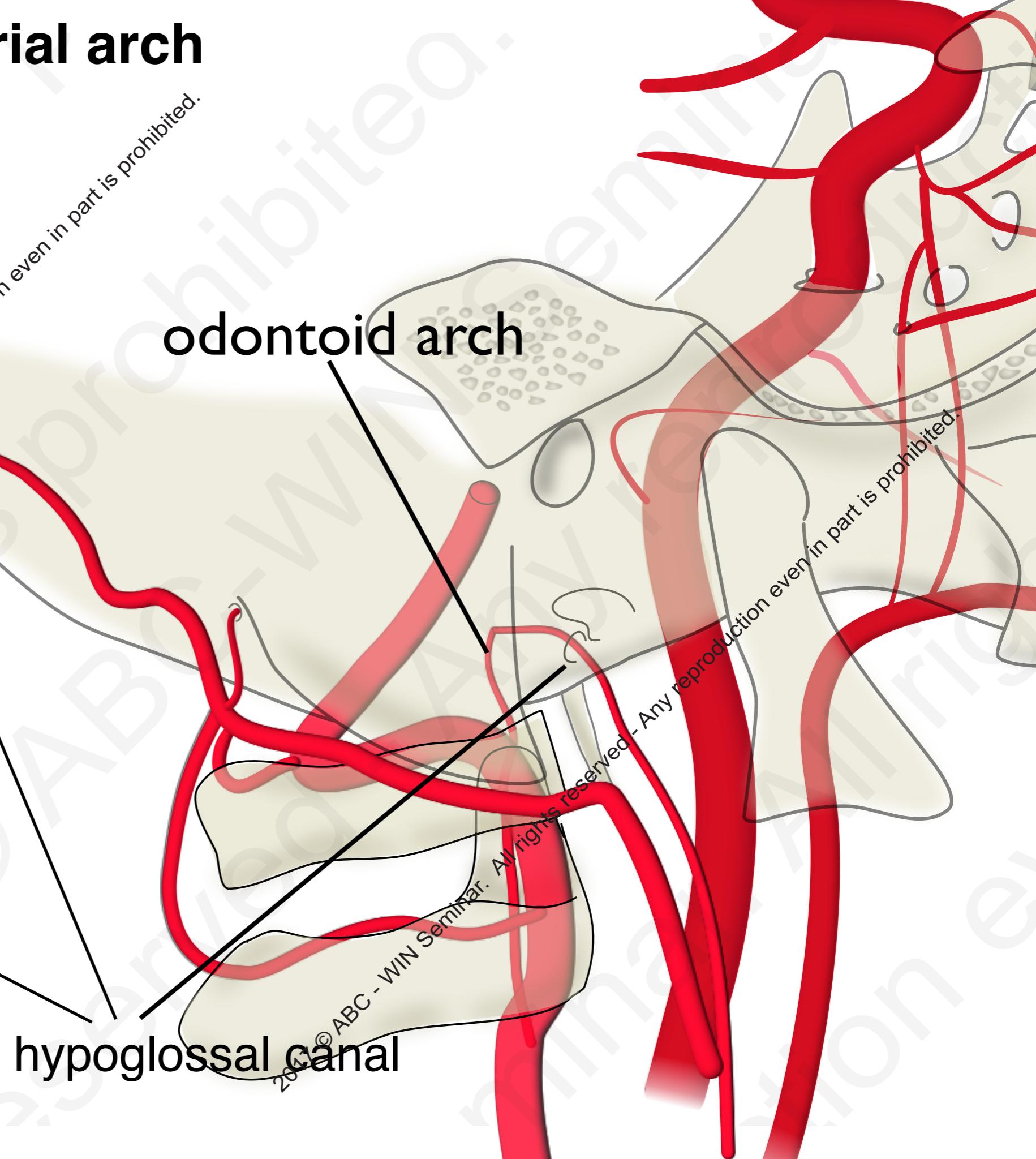
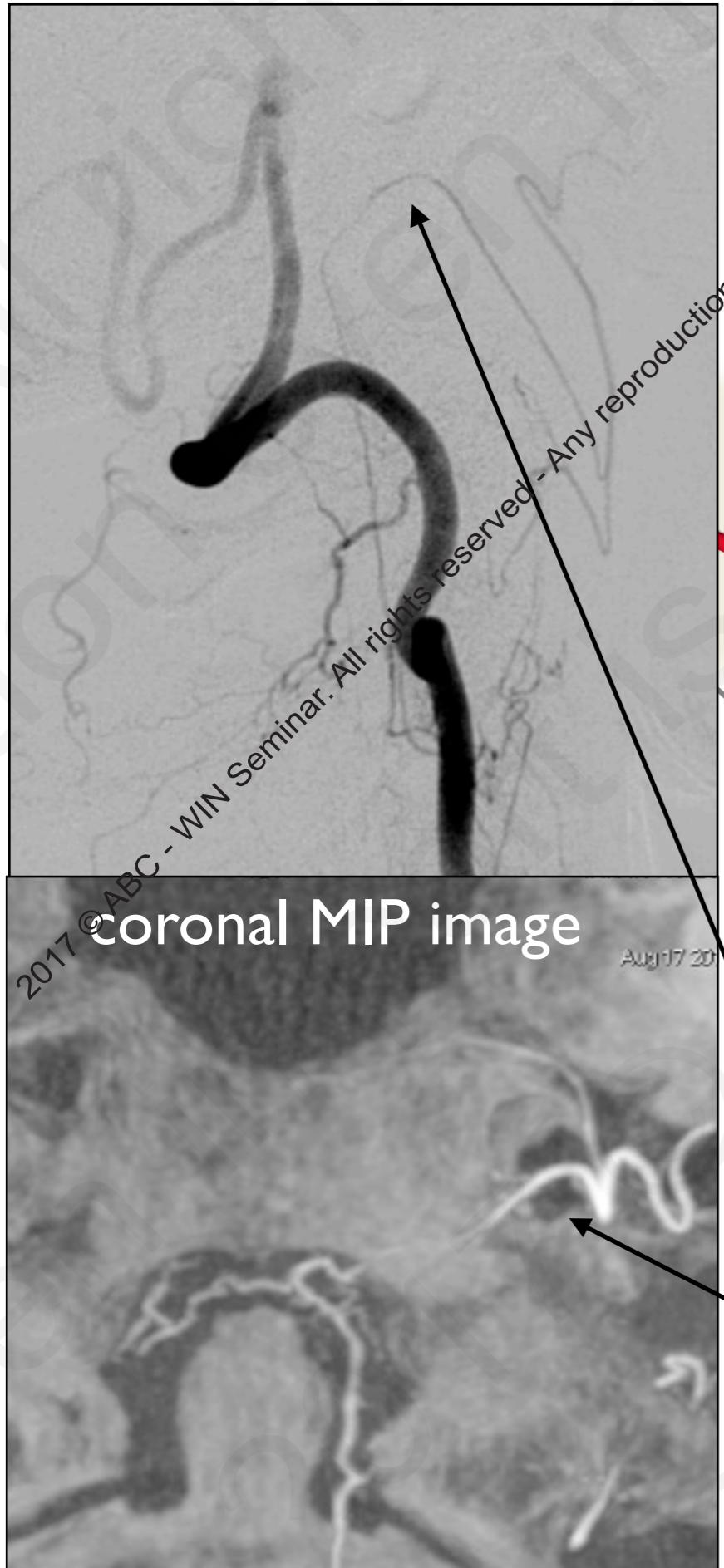
# The dural branches around the CCJ

## The “odontoid arterial arch”

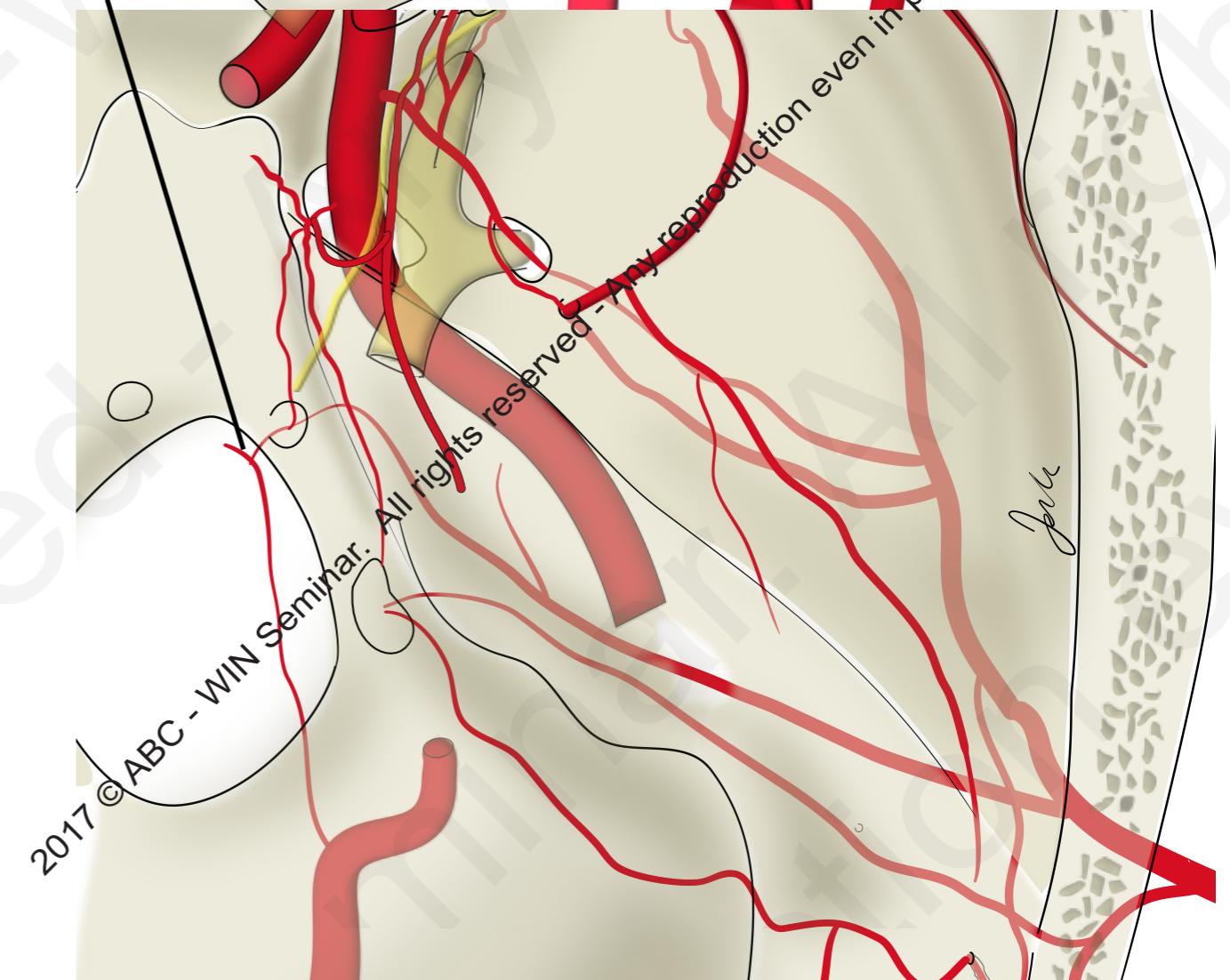
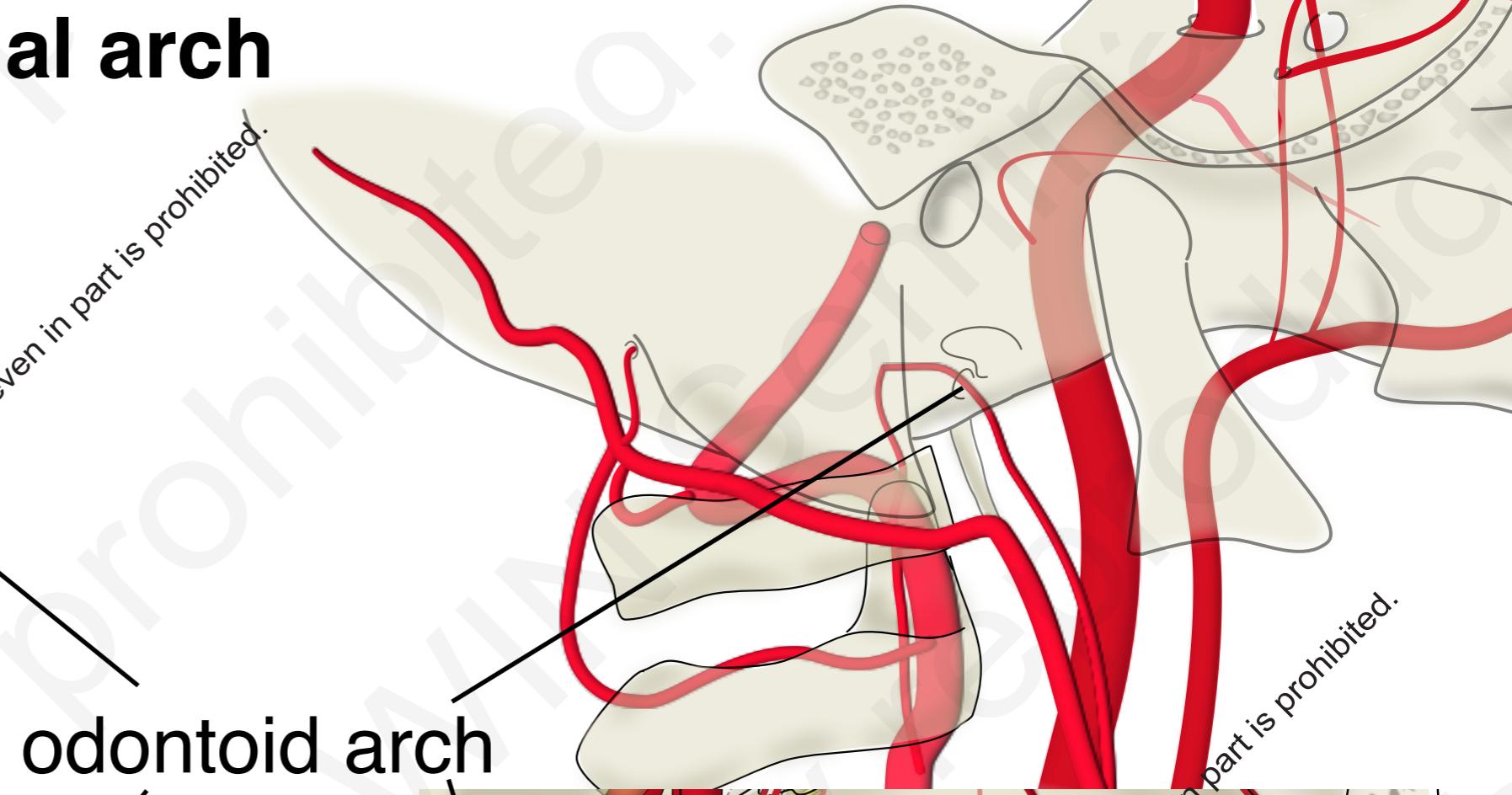


A dural branch arising from the C3 segment and forms an arch over the dens of the C2. It connects to the ascending pharyngeal system through the hypoglossal canal.

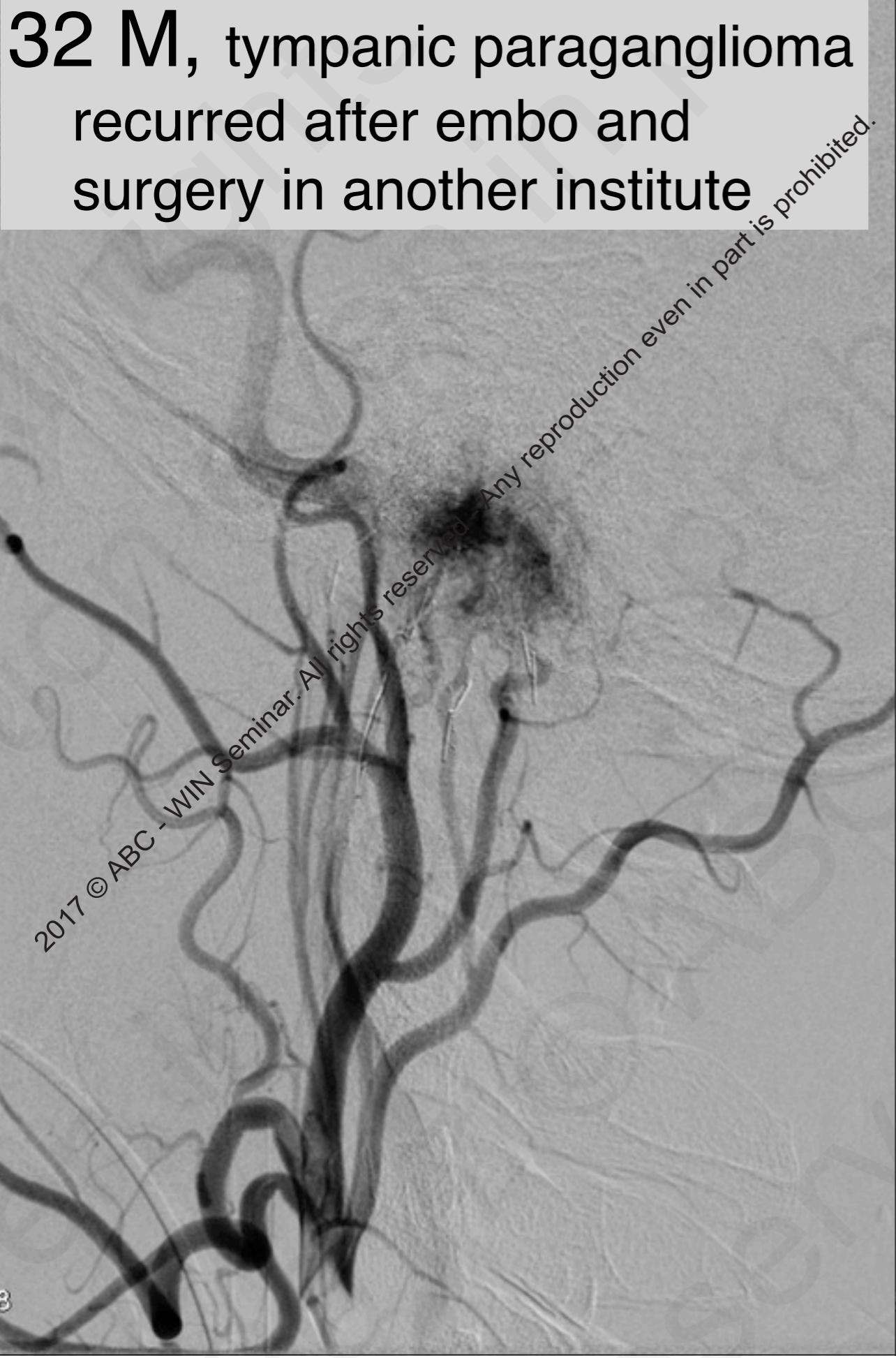
# The odontoid arterial arch



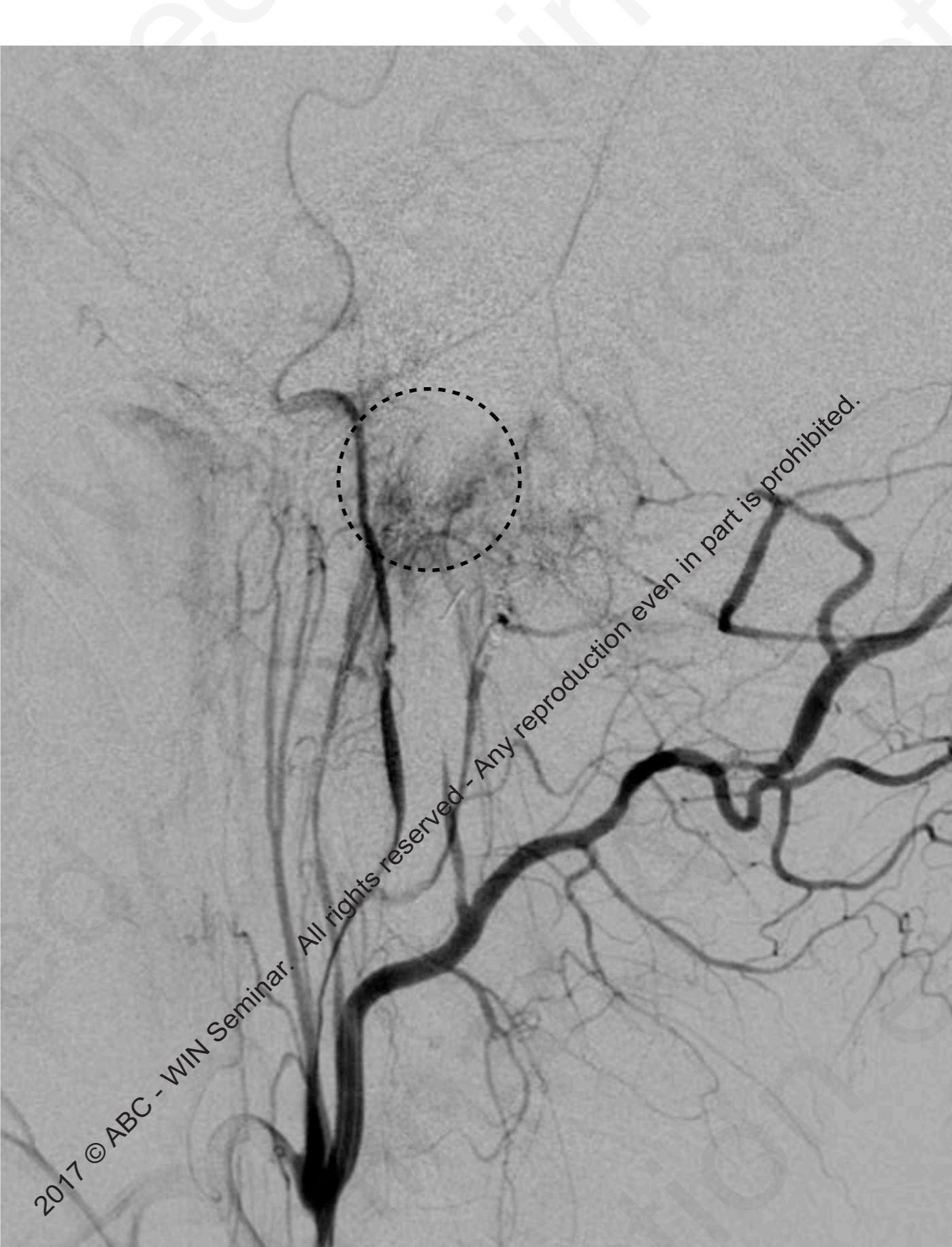
# The odontoid arterial arch



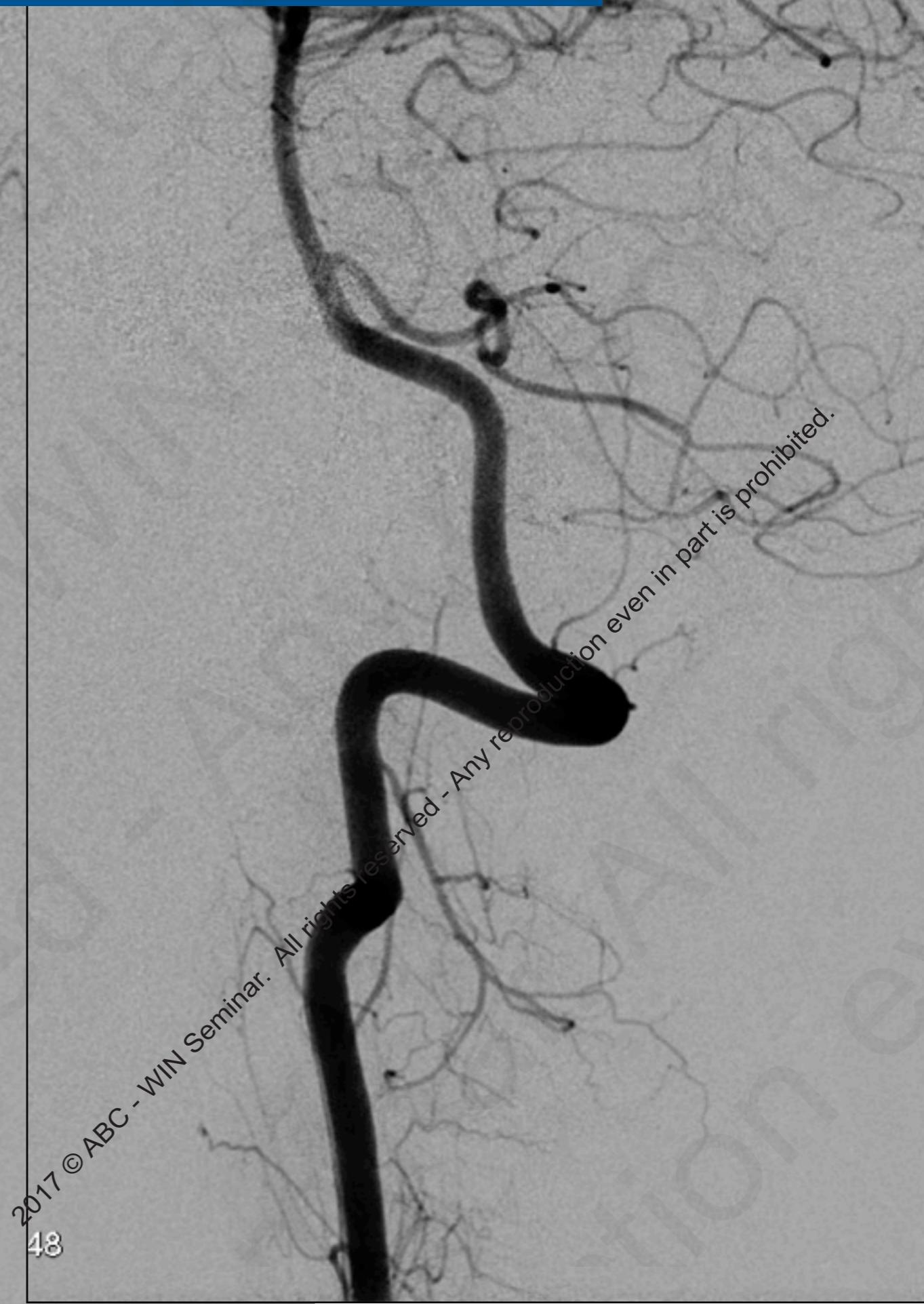
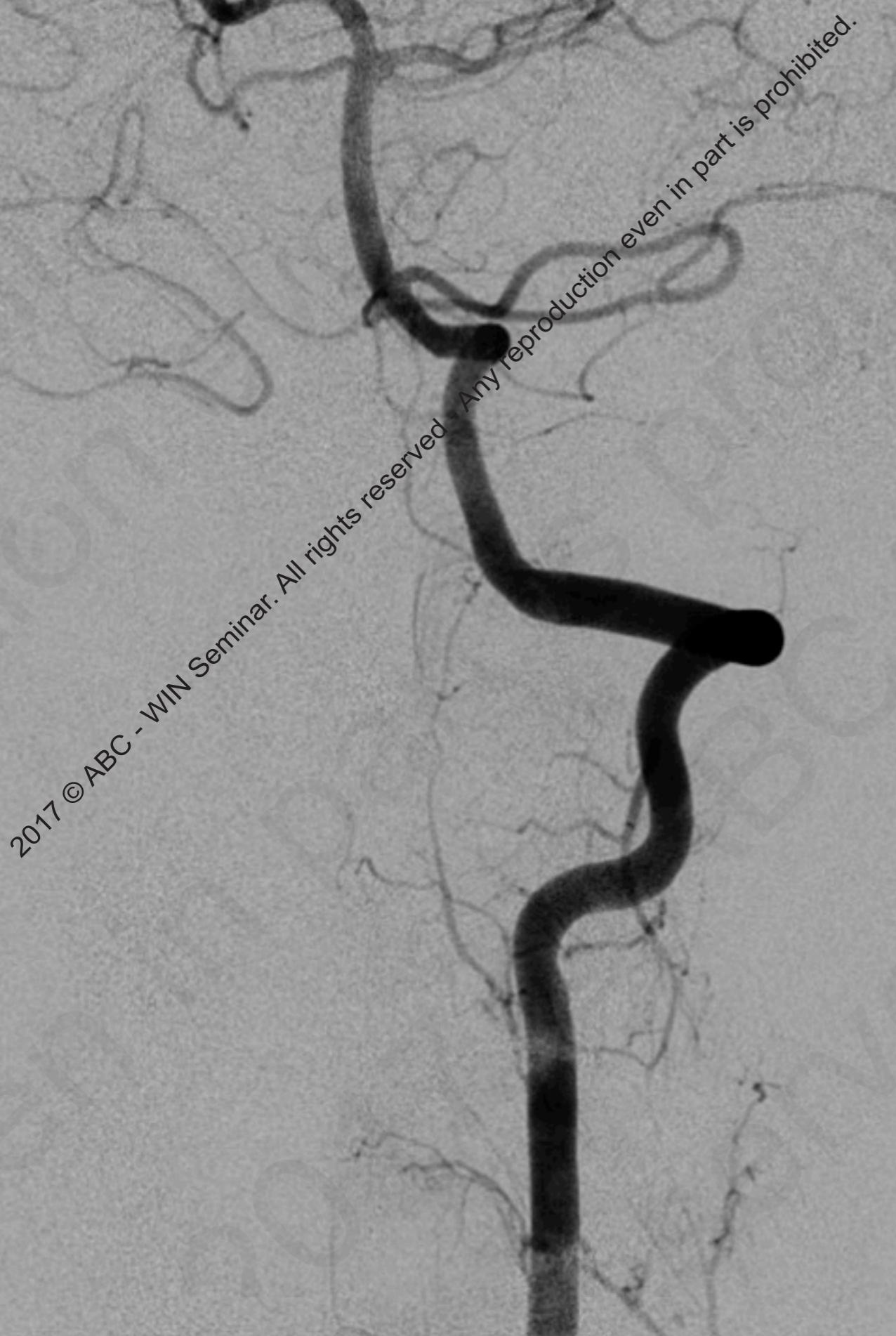
32 M, tympanic paraganglioma  
recurred after embo and  
surgery in another institute

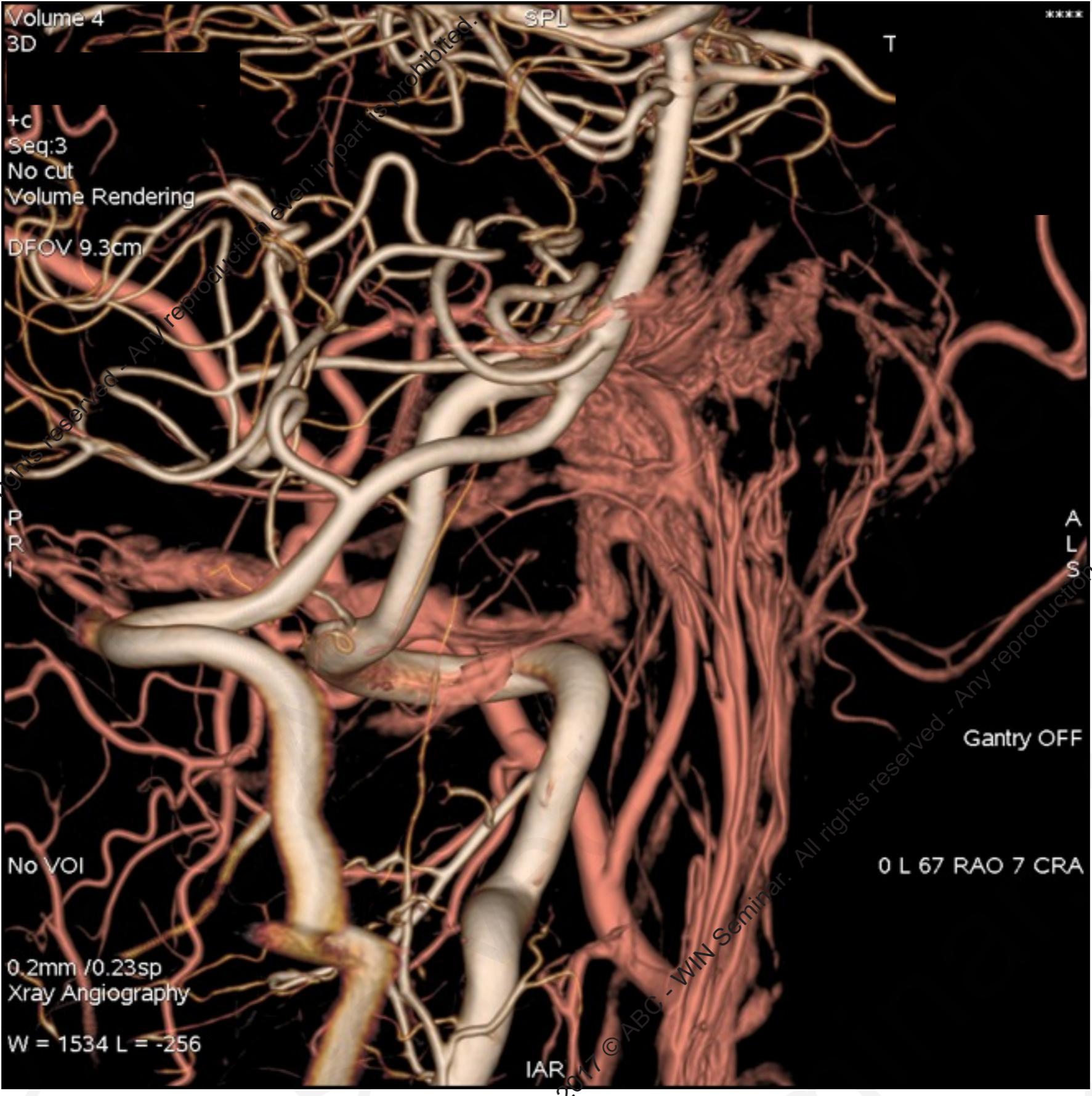


# selective injection of the occipito-pharyngeal branch



# no participation to the tumor from the VA!





Volume Rendering No cut

DFOV8.7cm

MOVIE file

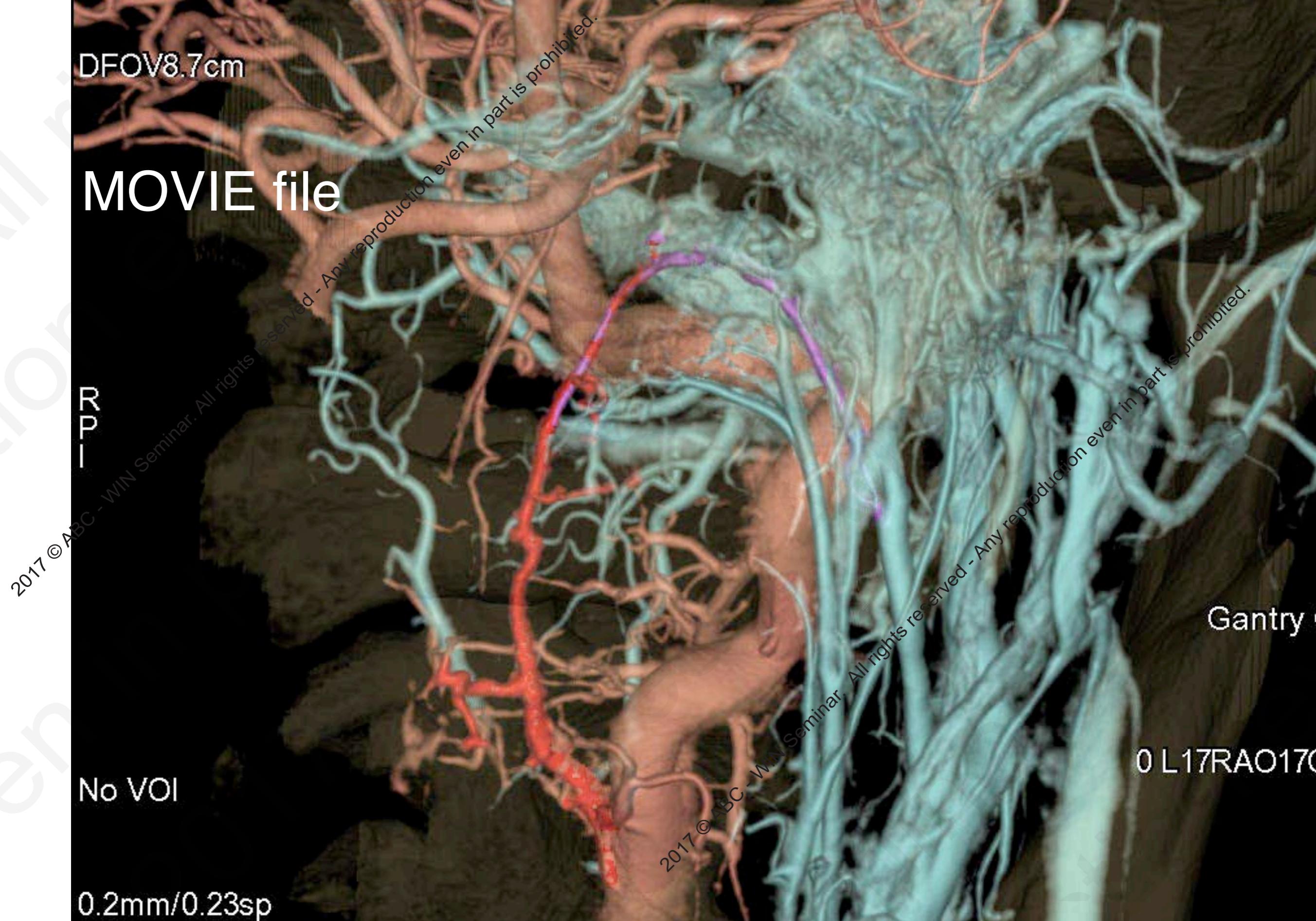
R  
P  
I

No VOI

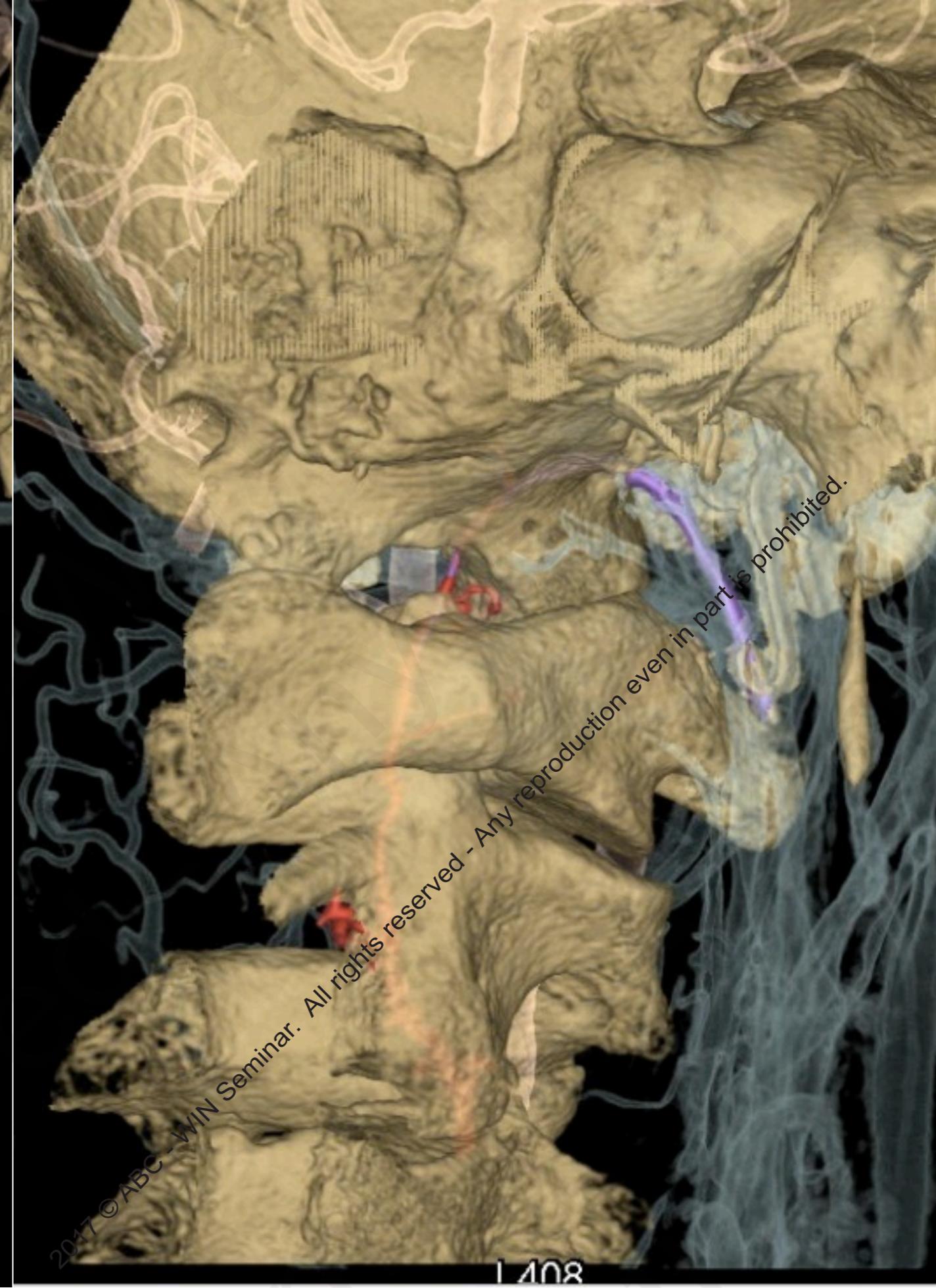
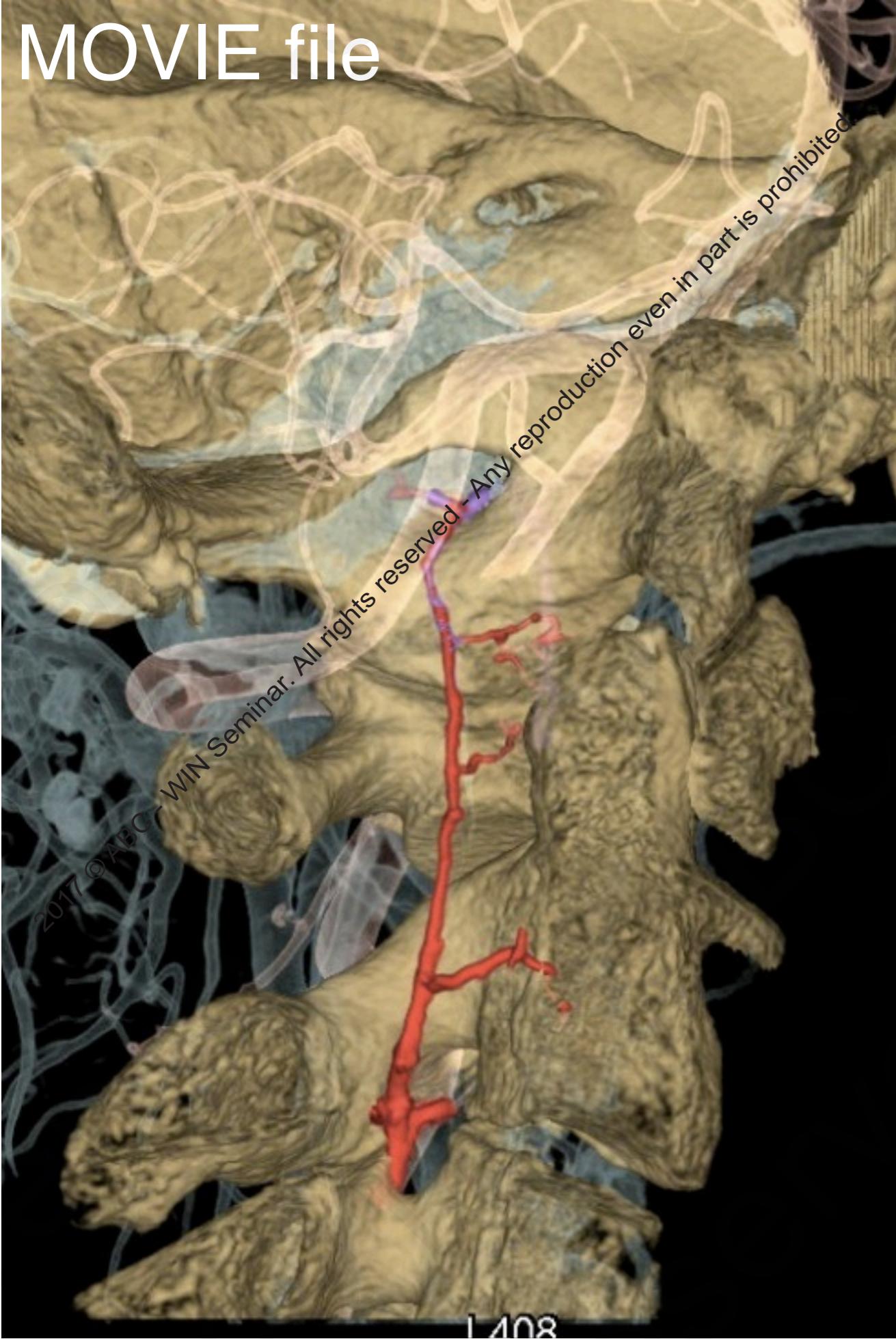
0.2mm/0.23sp

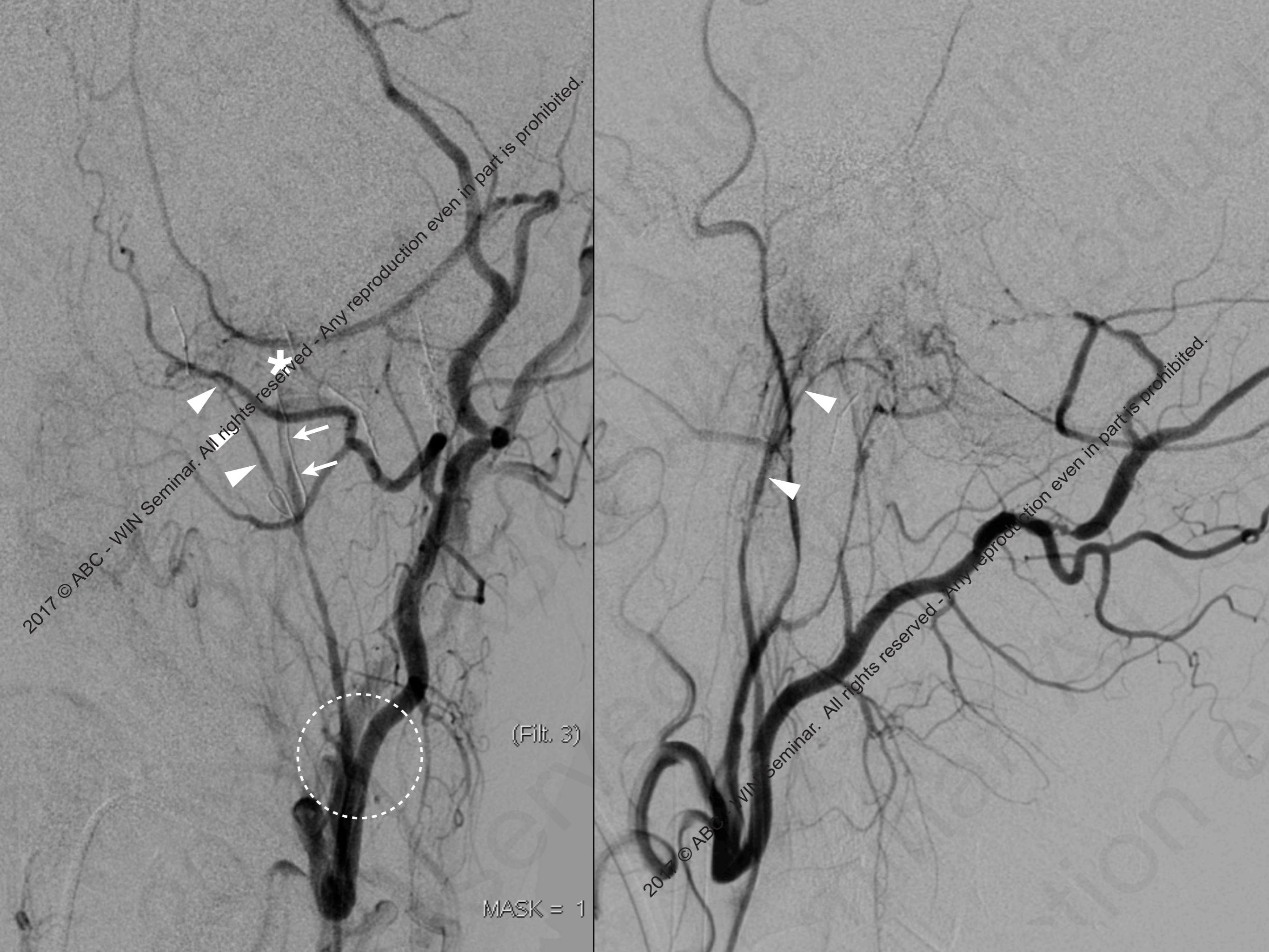
OL17RAO17C

Gantry



# MOVIE file





# odontoid arch as a collateral in a subclavian steal syndrome patient



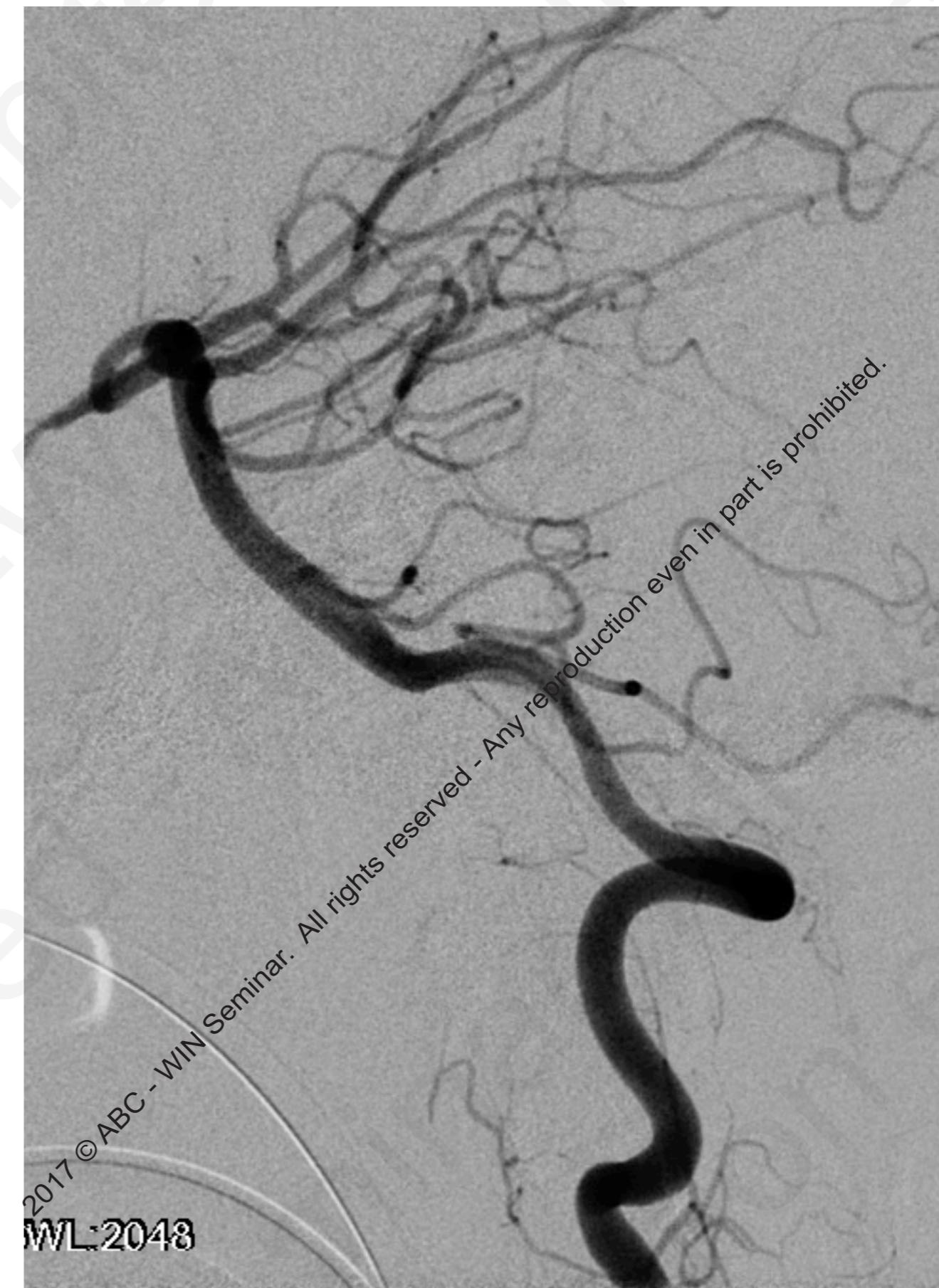
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# 11 F, cerebellar AVM



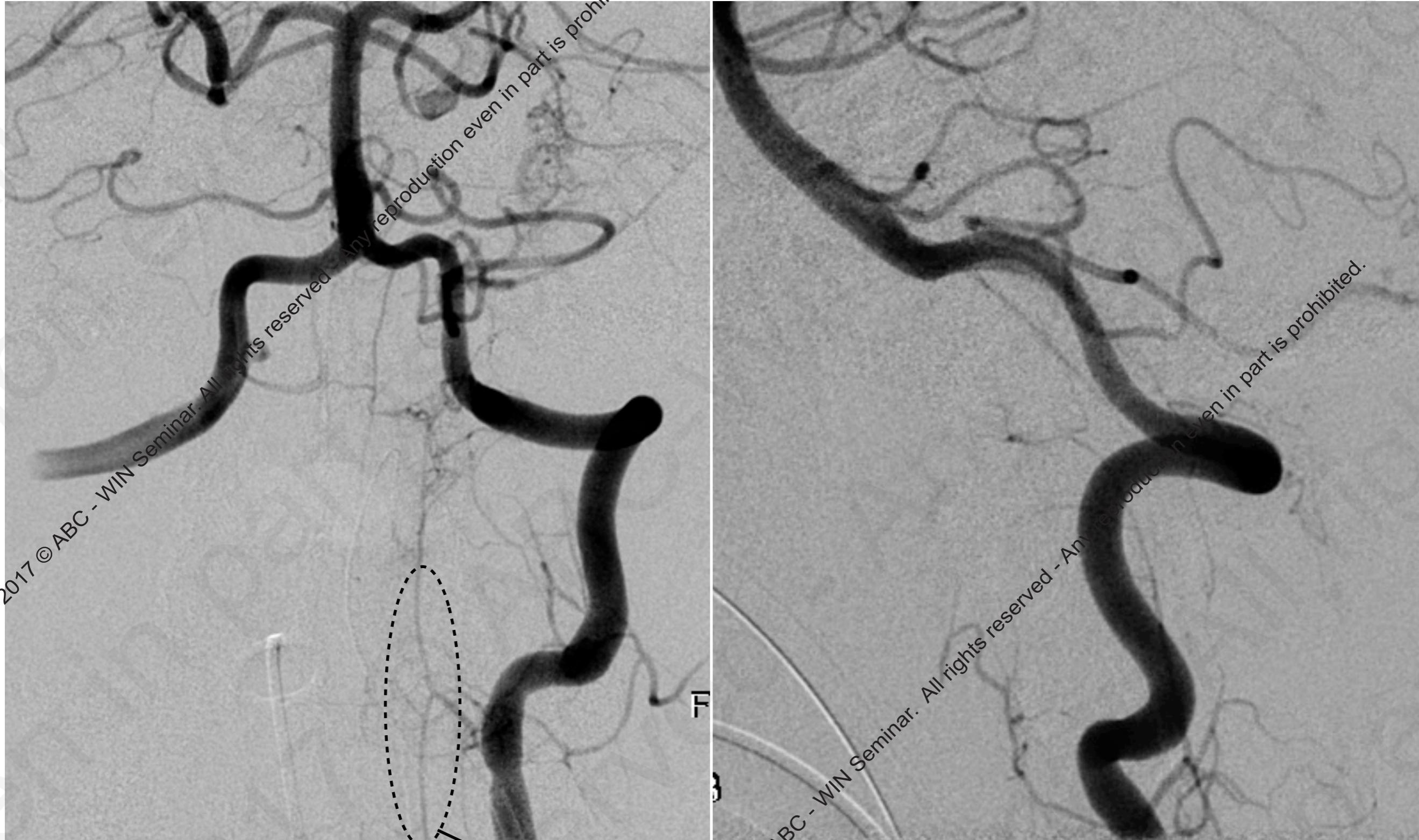
48



# Frontal view of VR in stereoscopic view showing the odontoid arch and its contributors, the anterior/ lateral spinal artery.

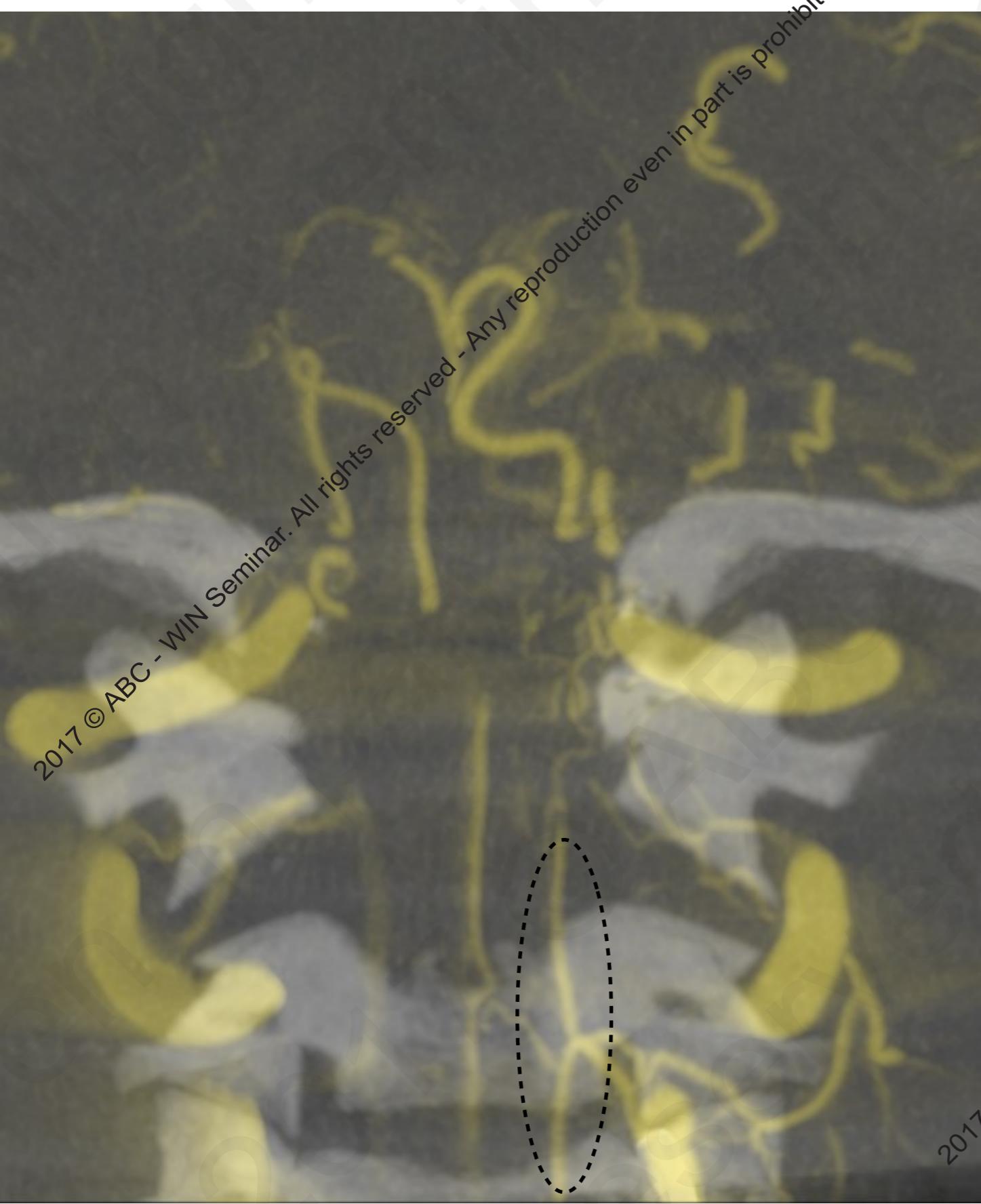


# back to the 2D again

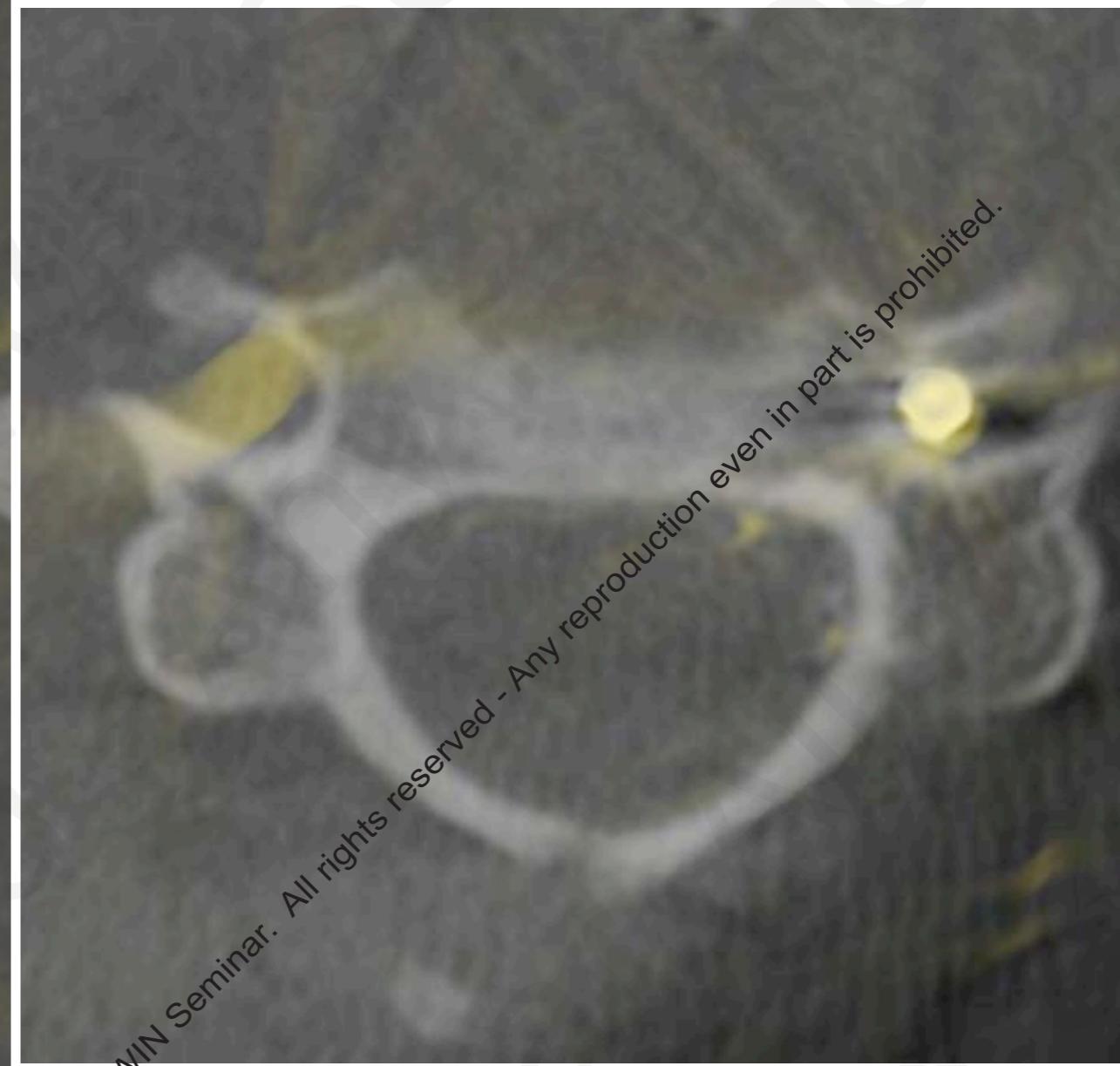


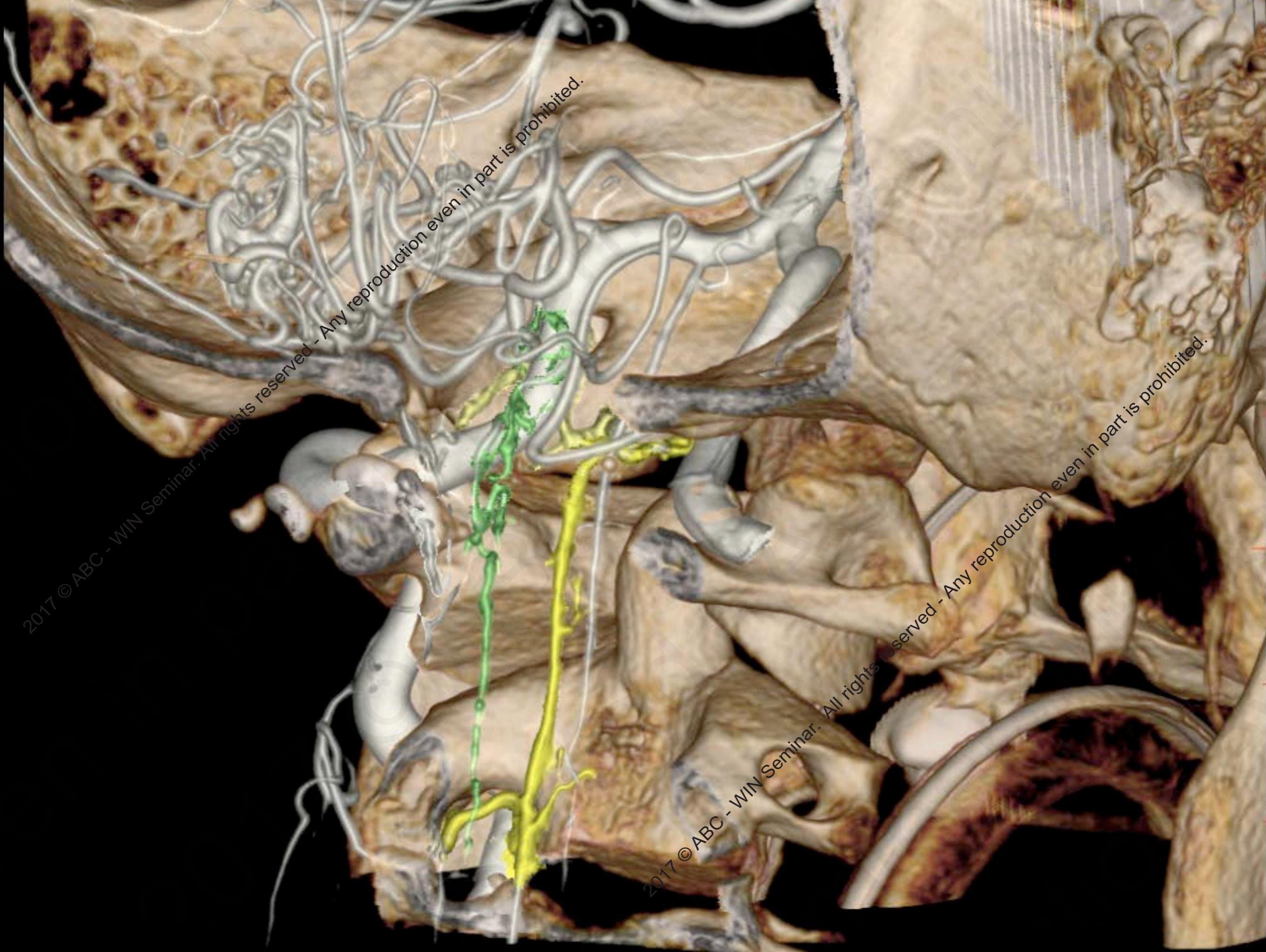
?

# Coronal MIP

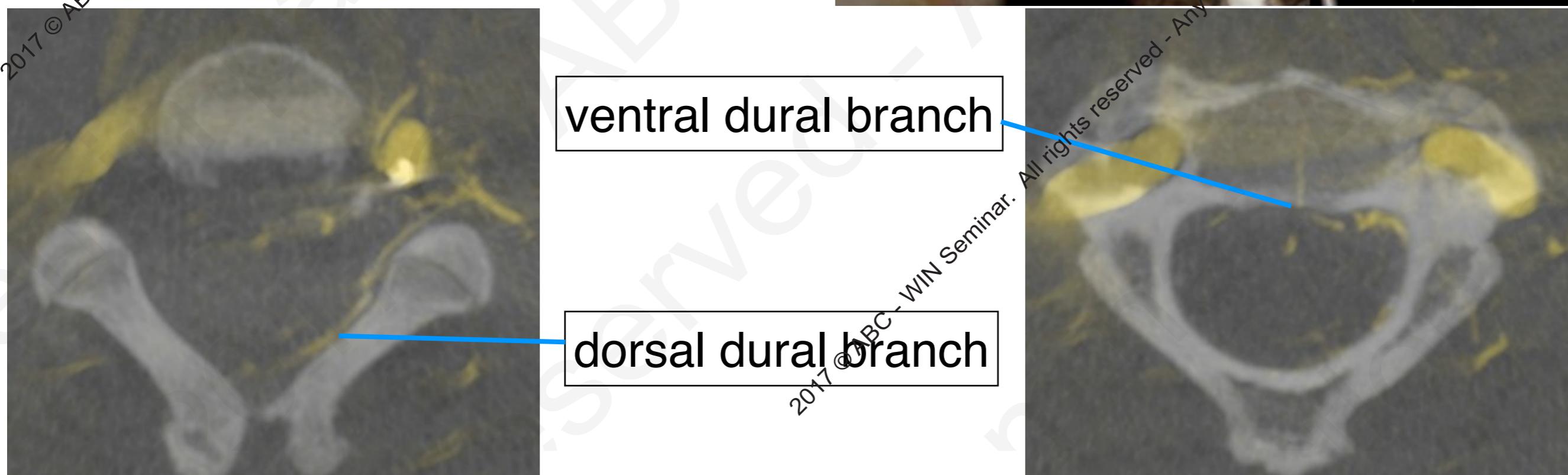
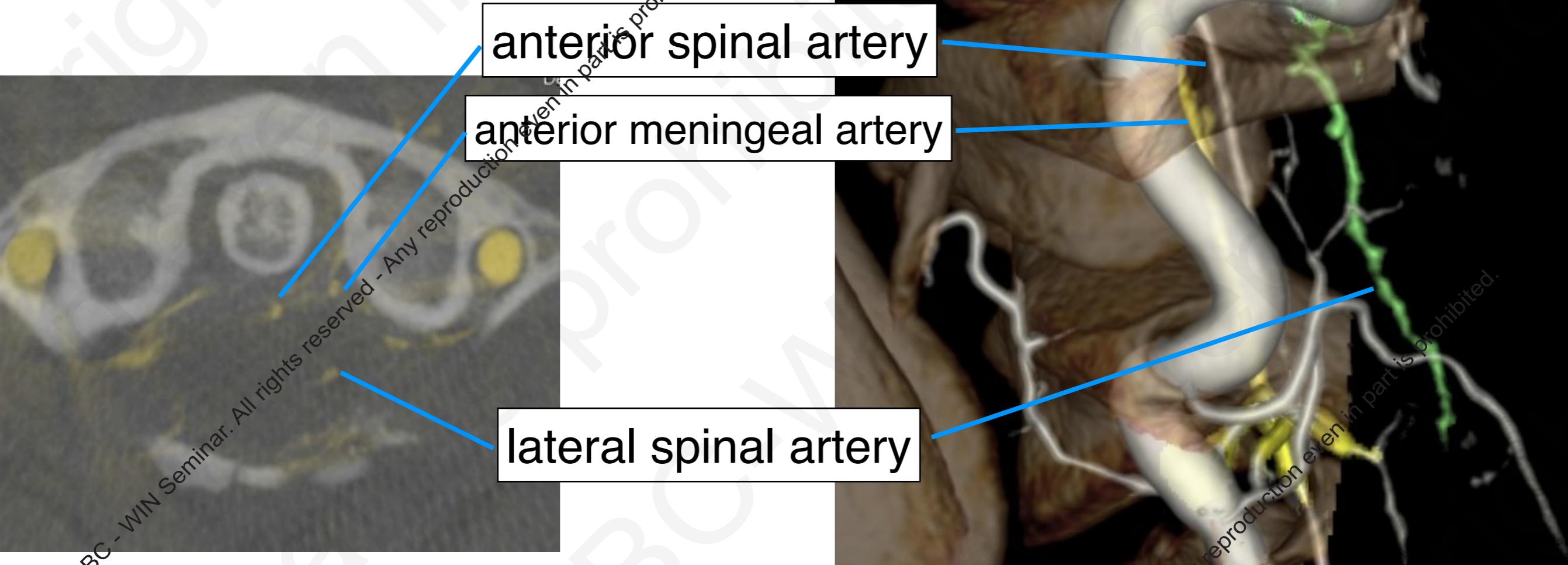


# Axial MIP





# Spatial relationship of the arteries in the cervical spinal column



The origin of the VA part of the odontoid arch  
can be dominant at other levels...

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# 68 M, basilar top aneurysm





(Fit. 6)

MAS = 1

W/W: 4088 W/L: 2048

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Seq:2  
No cut  
Volume Rendering

DFOV 11.6cm

MOVIE file

L  
P  
S

R  
A  
I

0 L 162 RAO 20 CRA

Gantry OFF

No VOI

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+c  
Seq:2  
No cut  
Volume Rendering  
DFOV 5.7cm

13:17

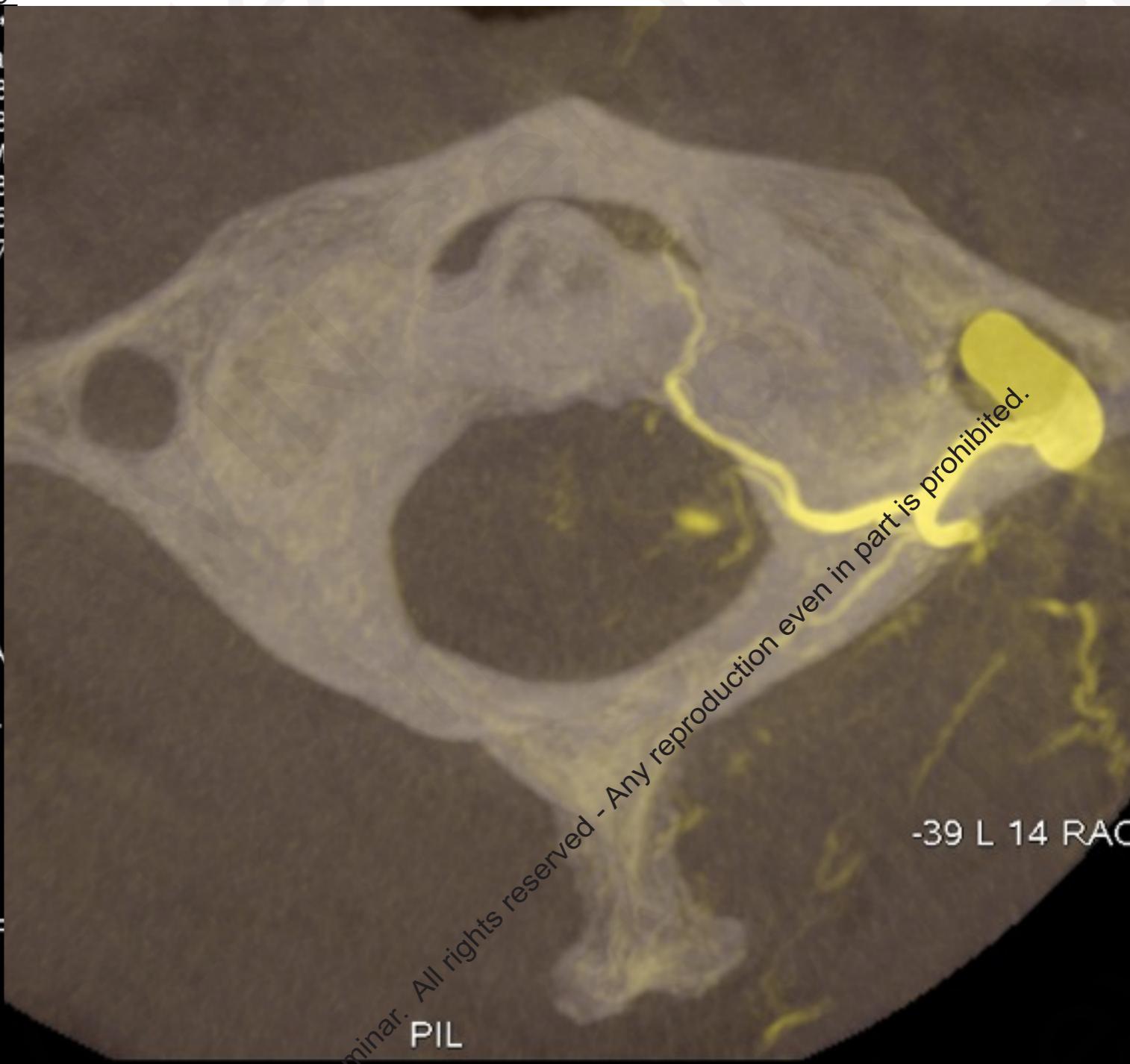
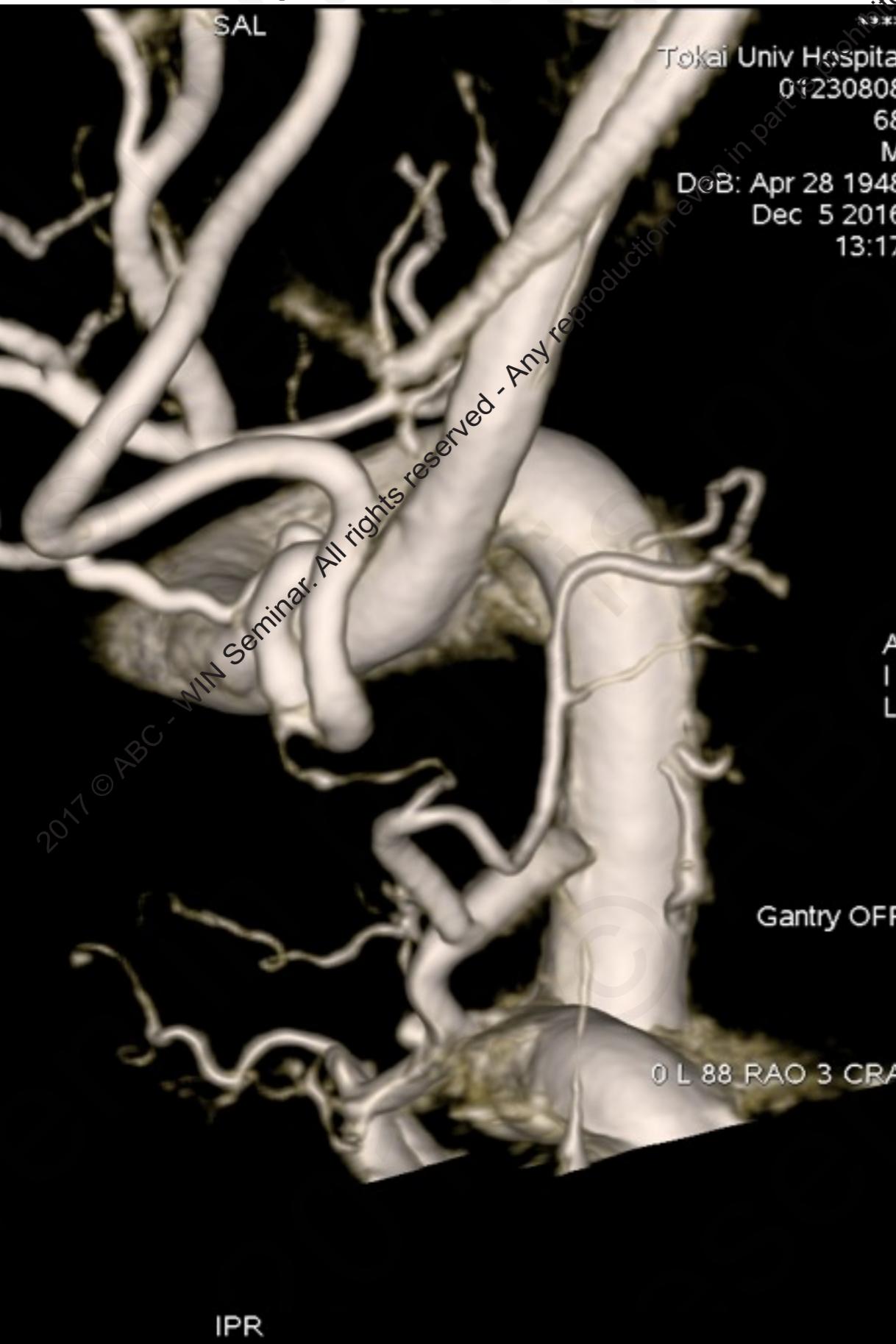


Gantry OFF

In this case, we can also see a connection to the caudal loop of the PICA.  
(A branch of the lateral spinal artery system also arises from the C2 segment.)

Xray Angiography

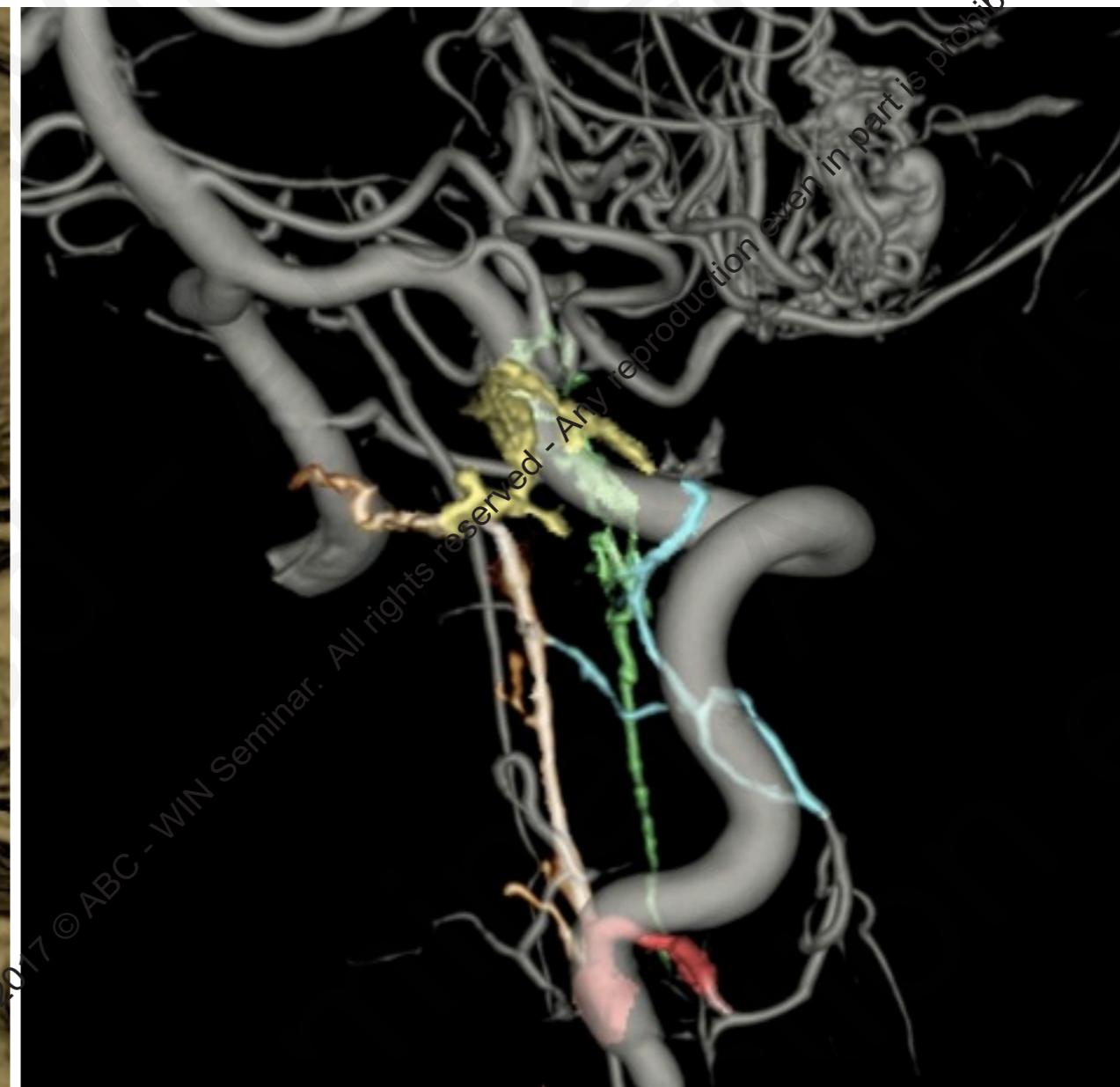
In this case the anterior meningeal artery arises from the C3 cervical space.



Similar arrangement as in the spinal cord level. (but with the VA as the main supply)

# Odontoid arch system

Dural branch arising usually from the C3 space but has potential connection to the C2, and C1 segment arteries (ie. the VA itself) too. It can give off branches that participate in the lateral spinal artery system.



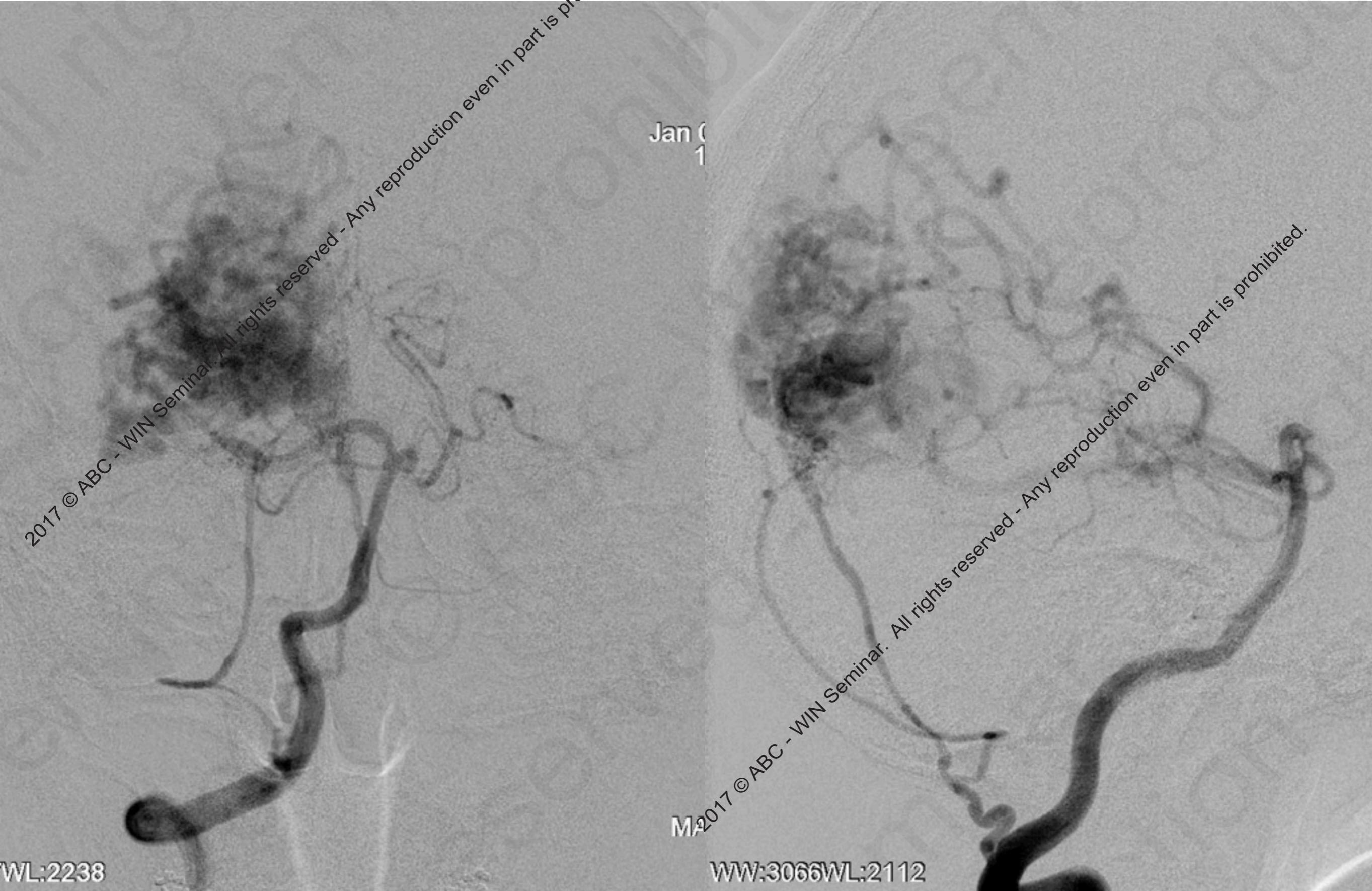
# The dural branches around the CCJ

## Posterior meningeal artery/ The artery of the falx cerebelli

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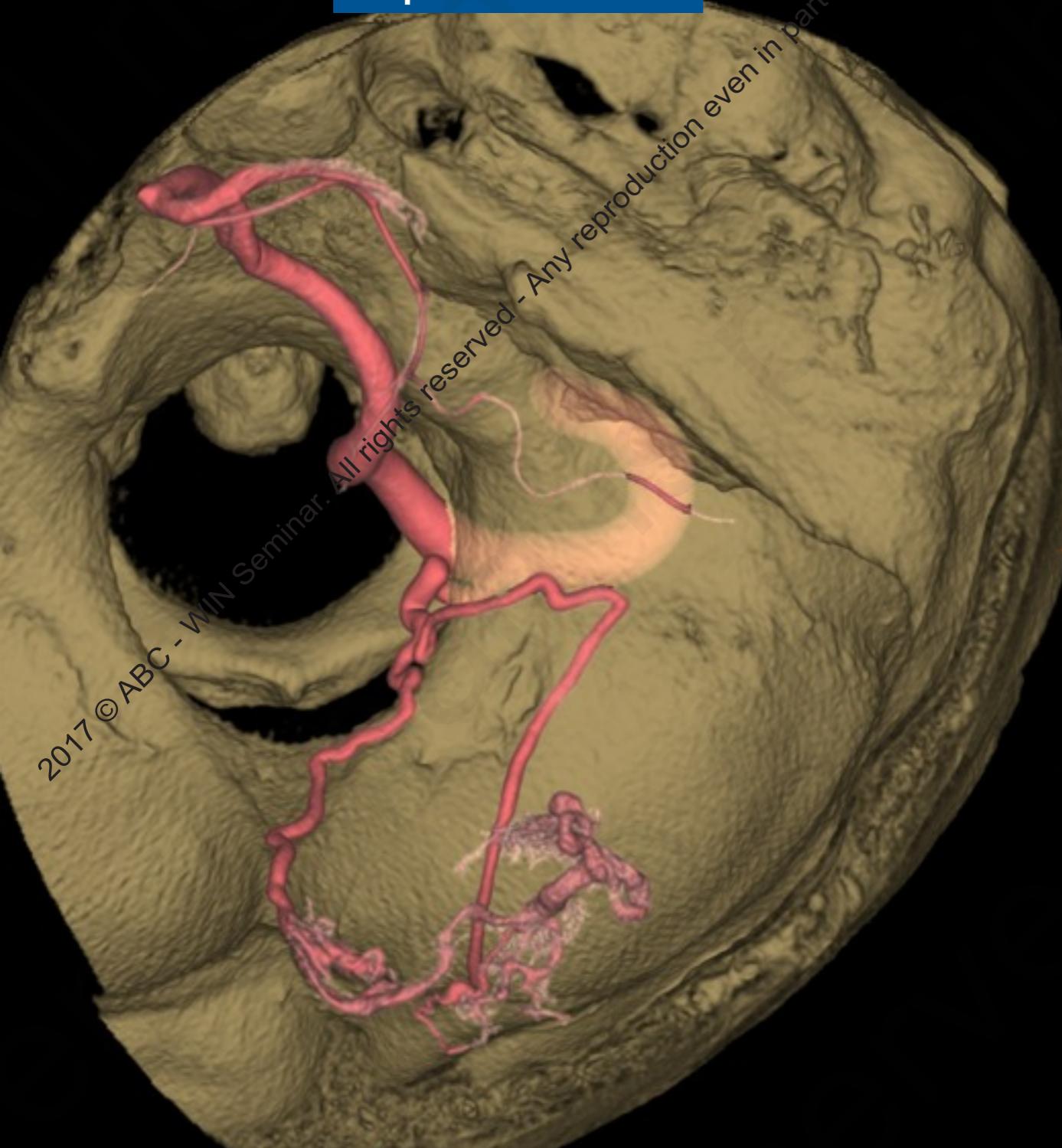
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42 M, AVM Typical origin of the posterior meningeal artery from the VA at its' entrance of the dura.

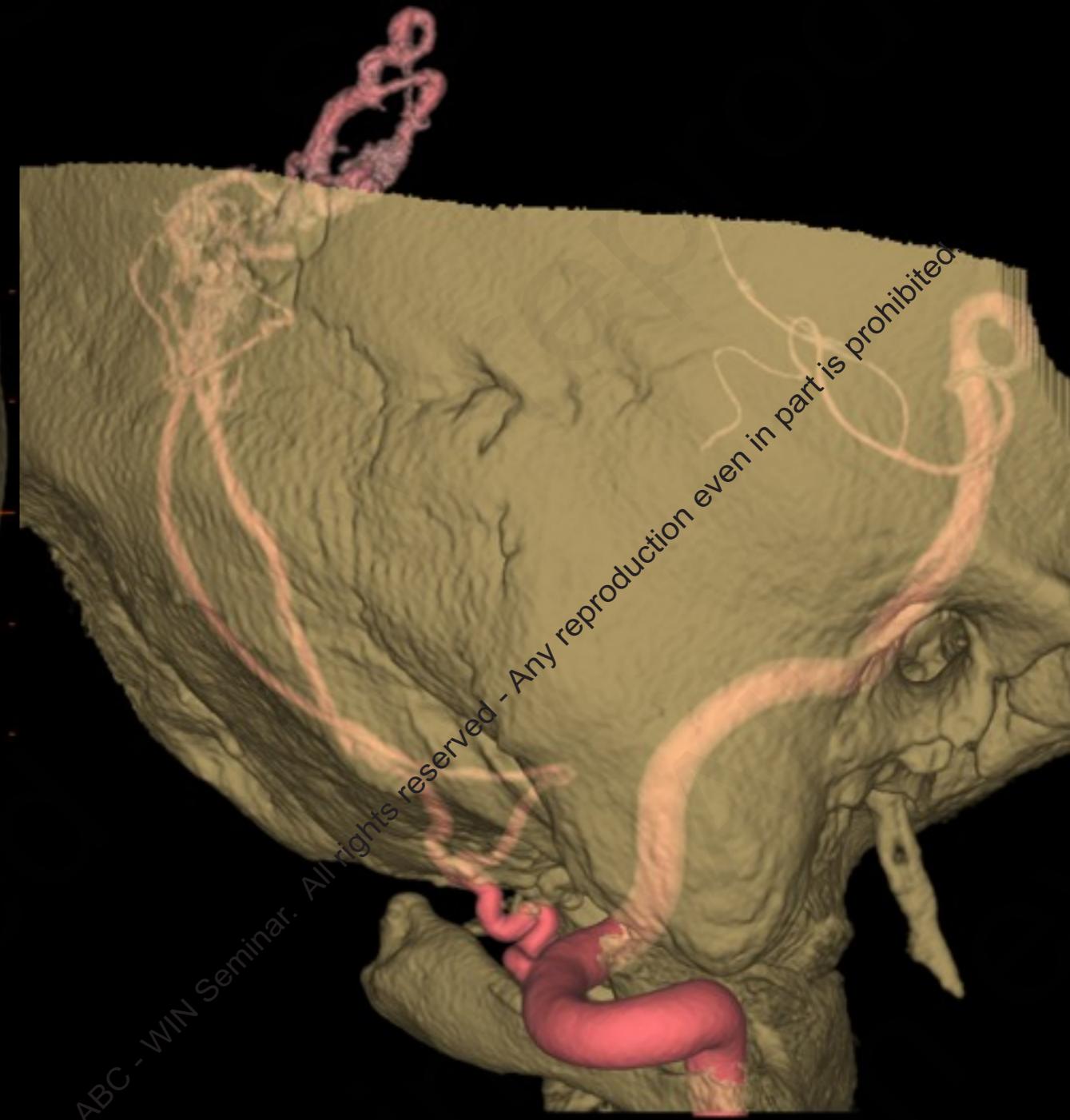


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**superior view**



**lateral view**

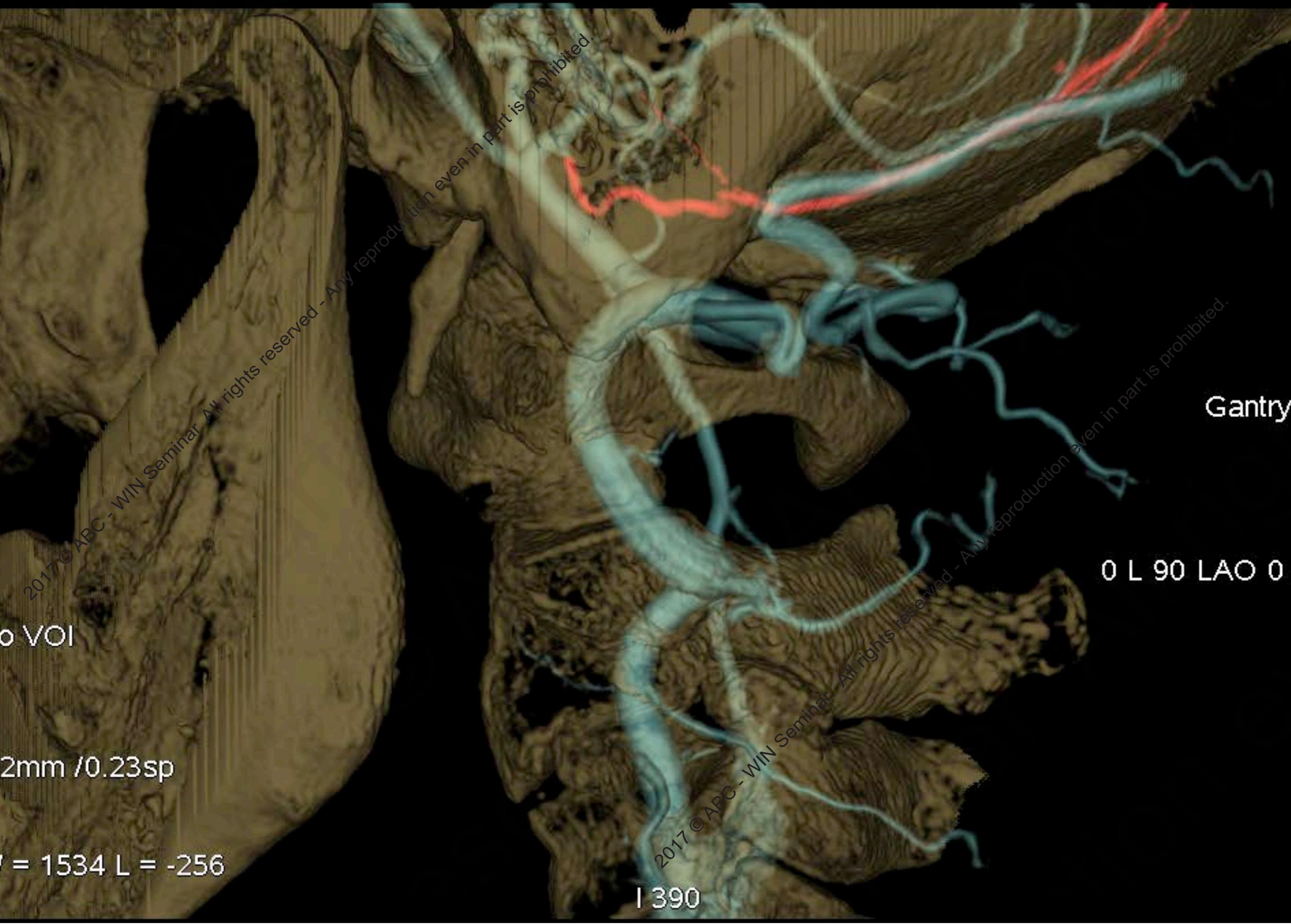


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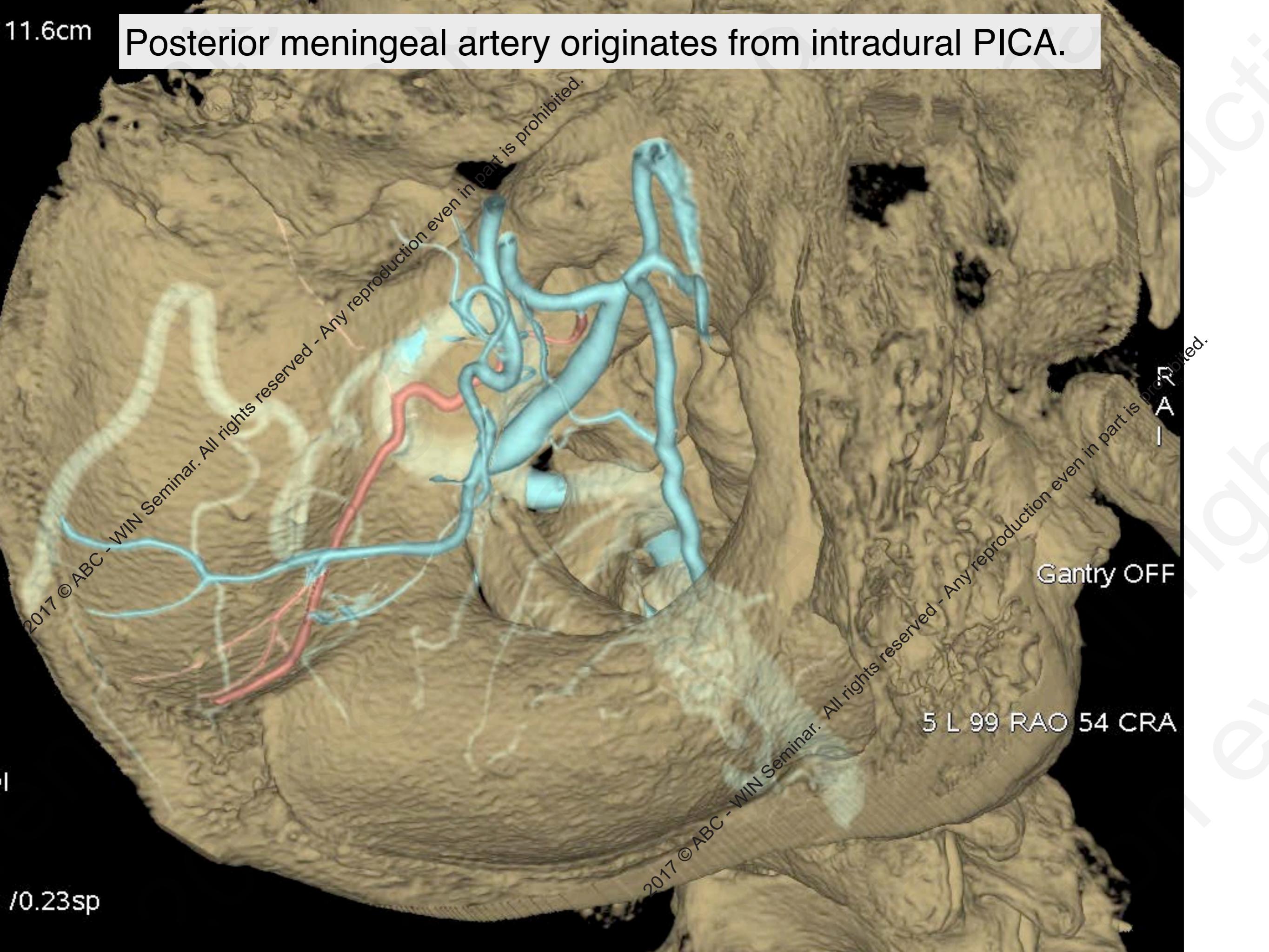
# 73 F, dAVF(falx cerebri), left C4 root AVM





11.6cm

Posterior meningeal artery originates from intradural PICA.



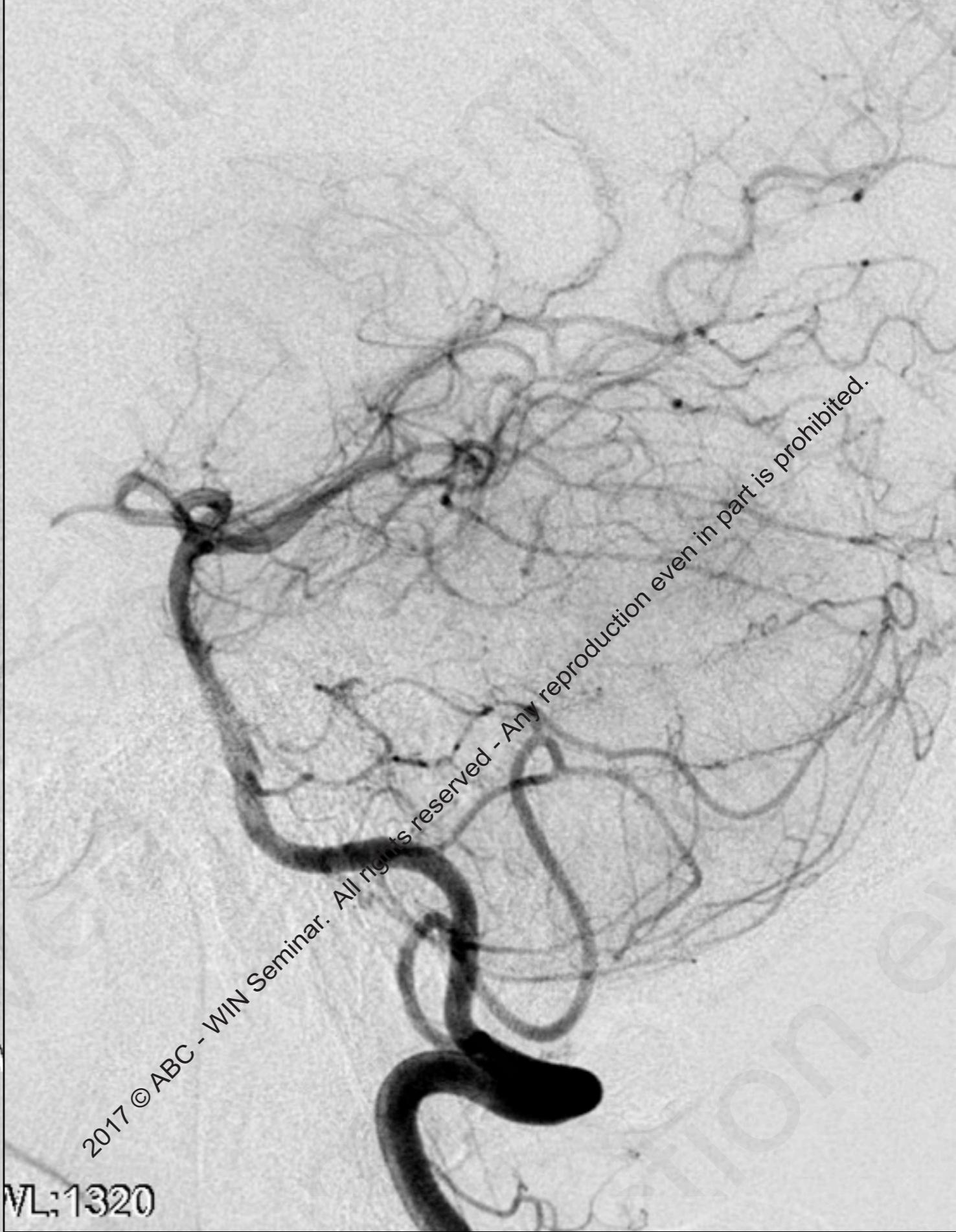
# 18 M, f/u angio for AVM



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FRA

VL:1320



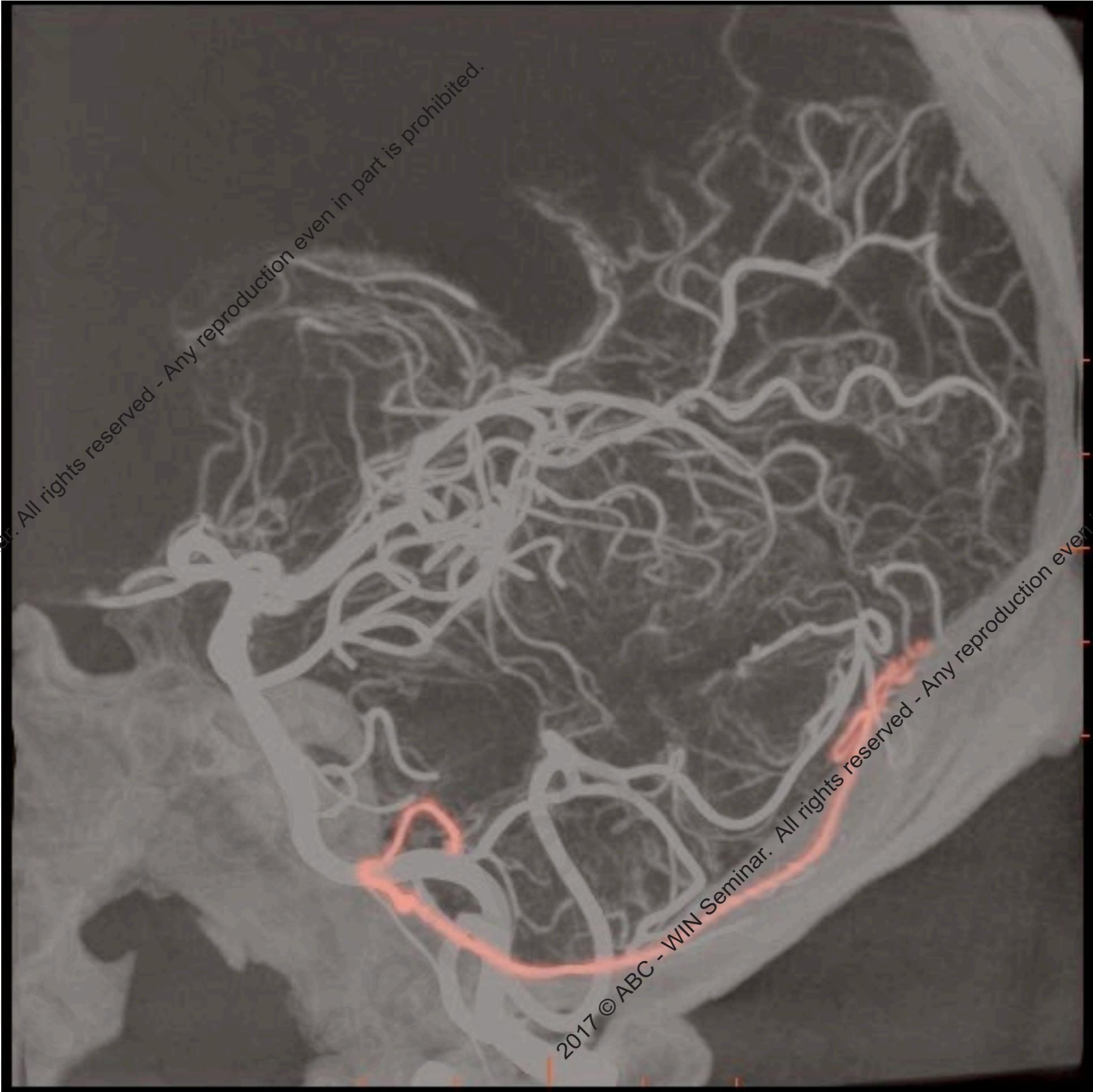
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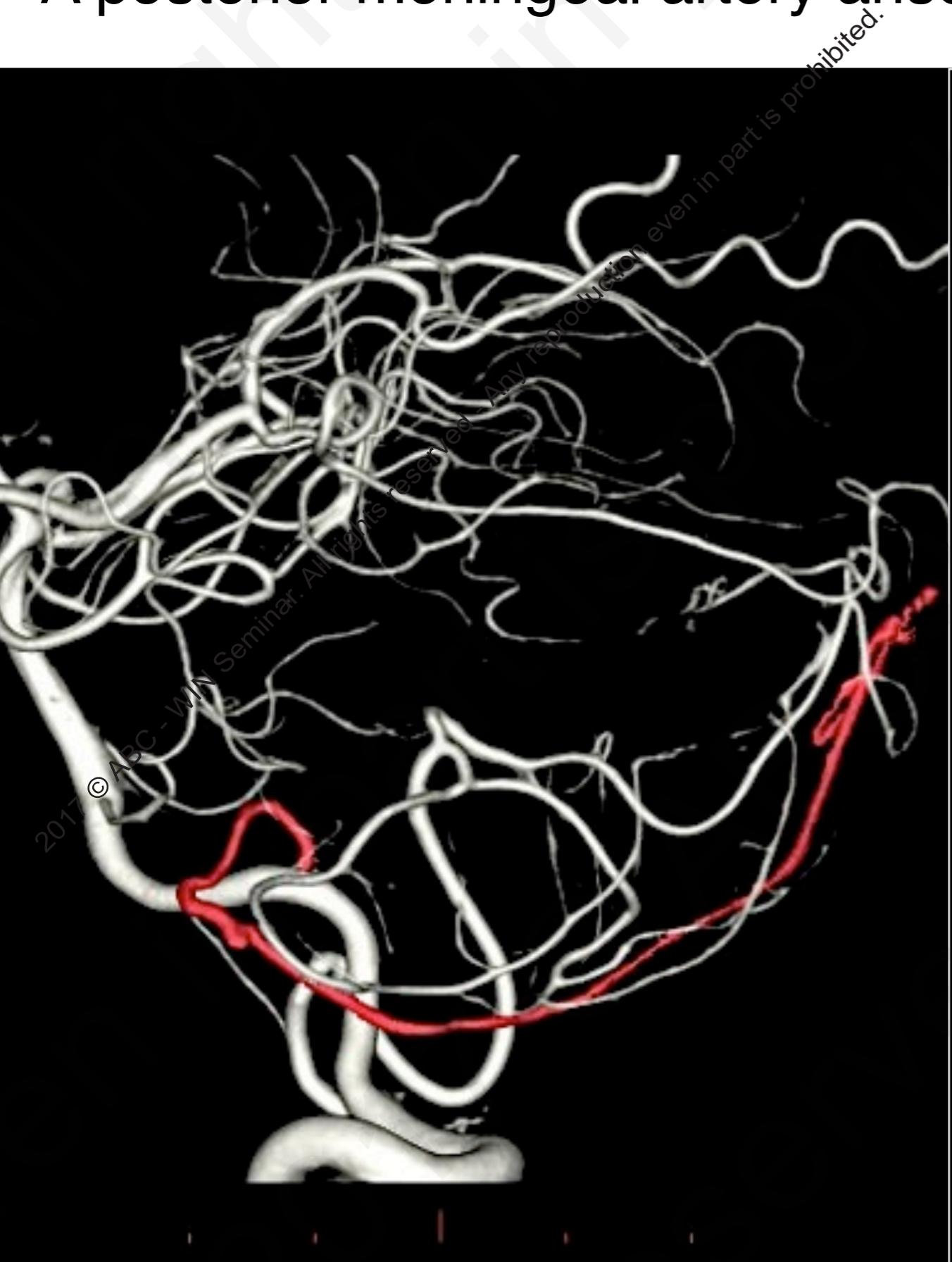
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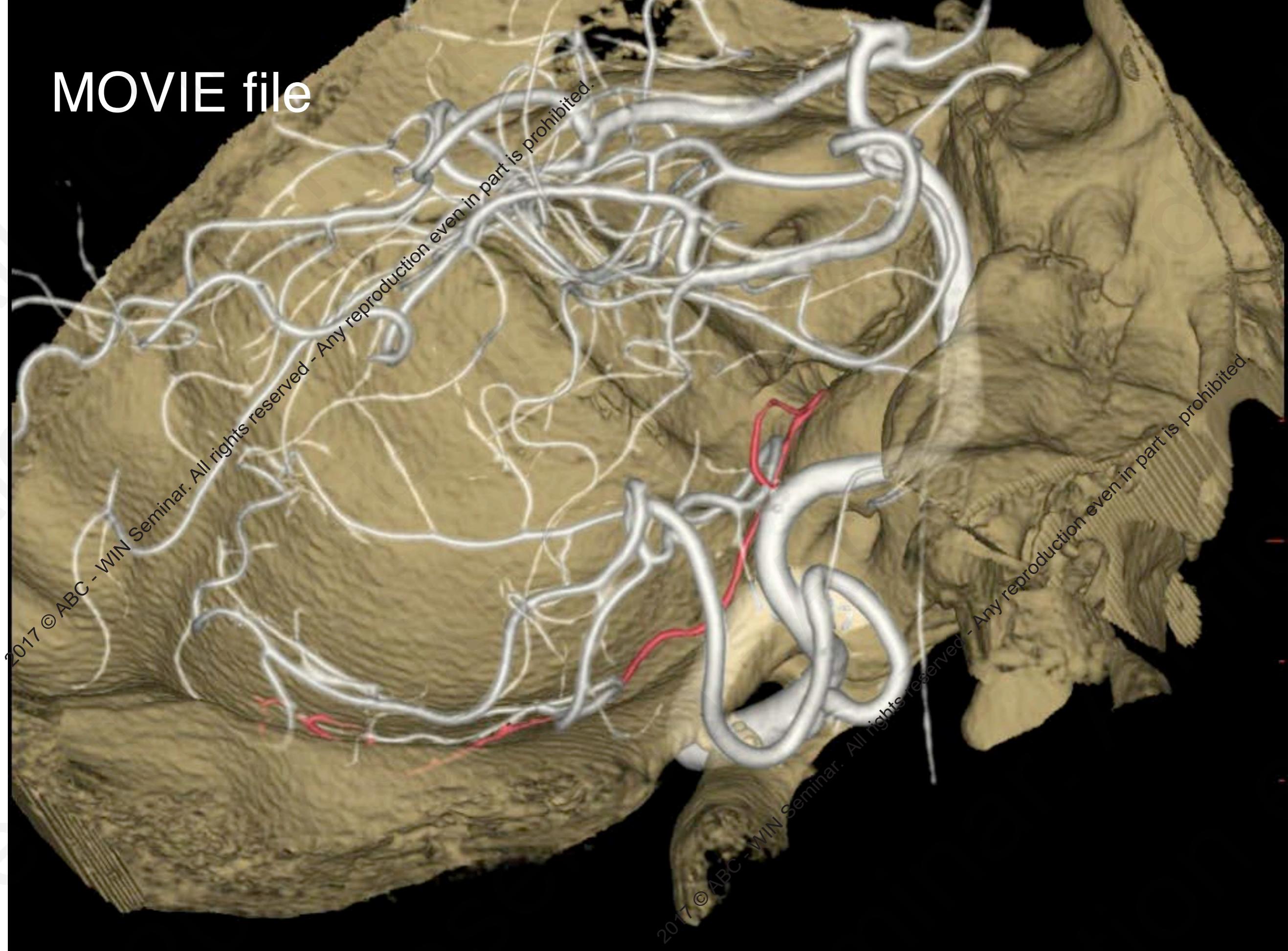
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A posterior meningeal artery arises from the intradural VA.



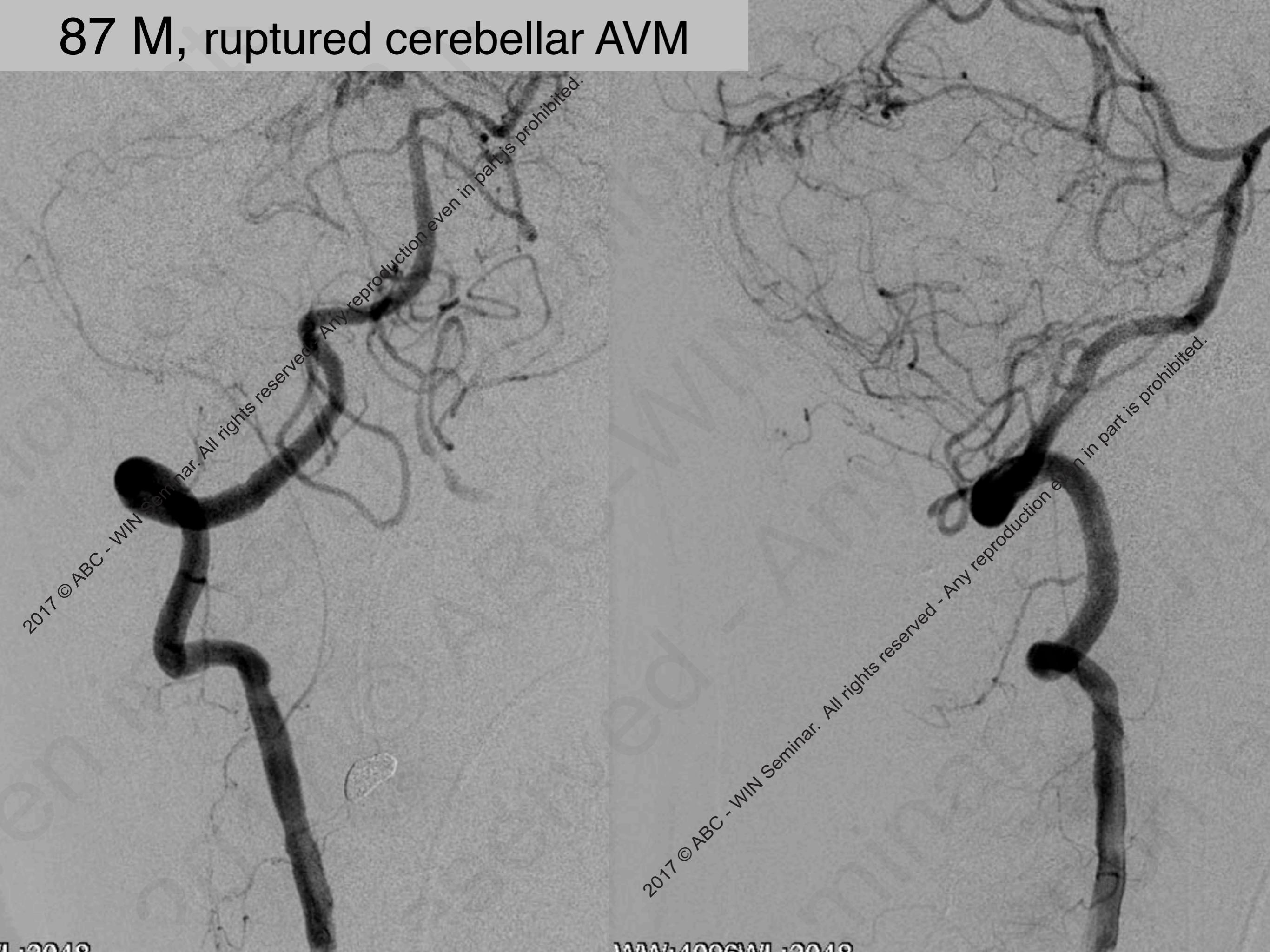
# MOVIE file



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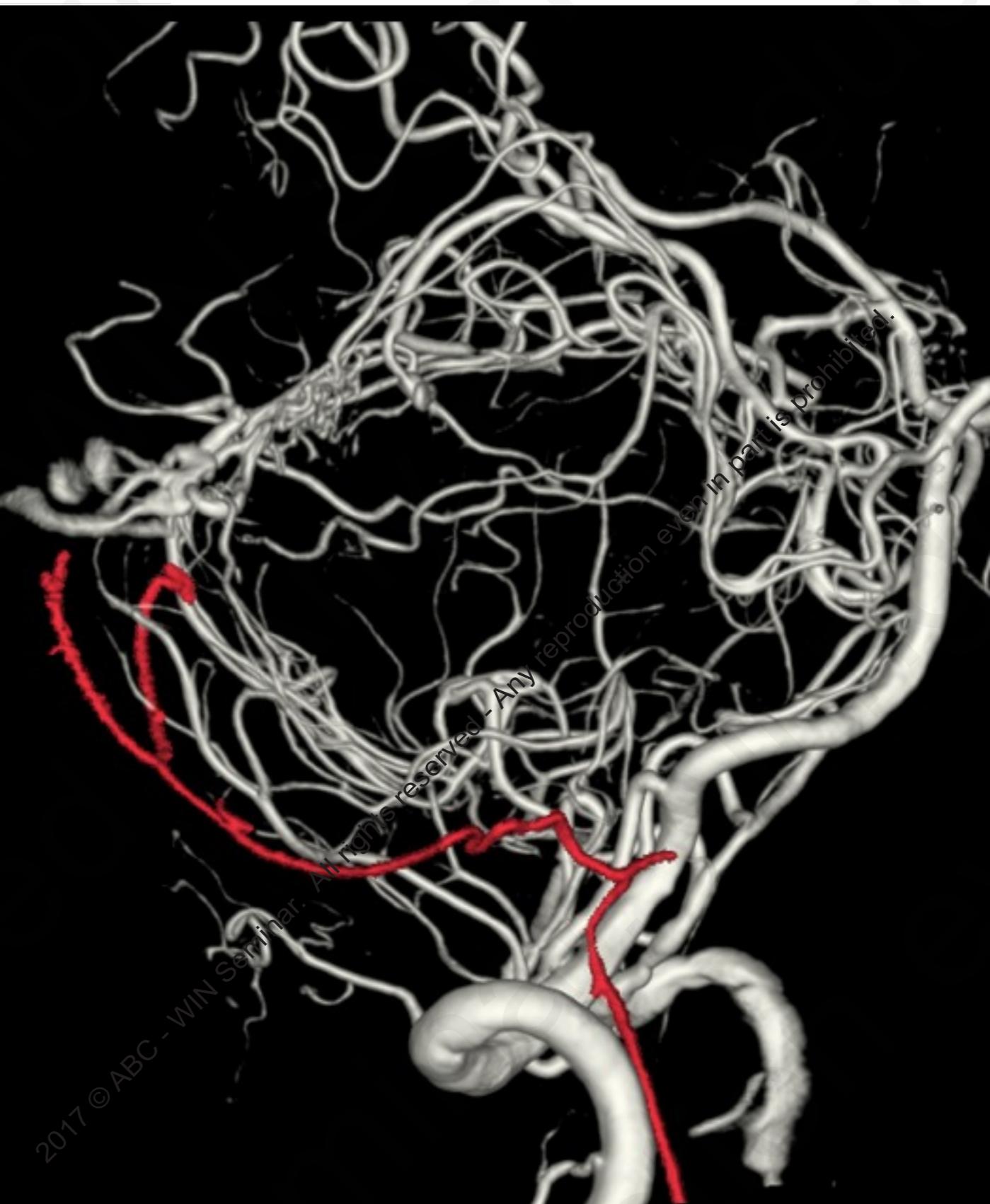
# 87 M, ruptured cerebellar AVM



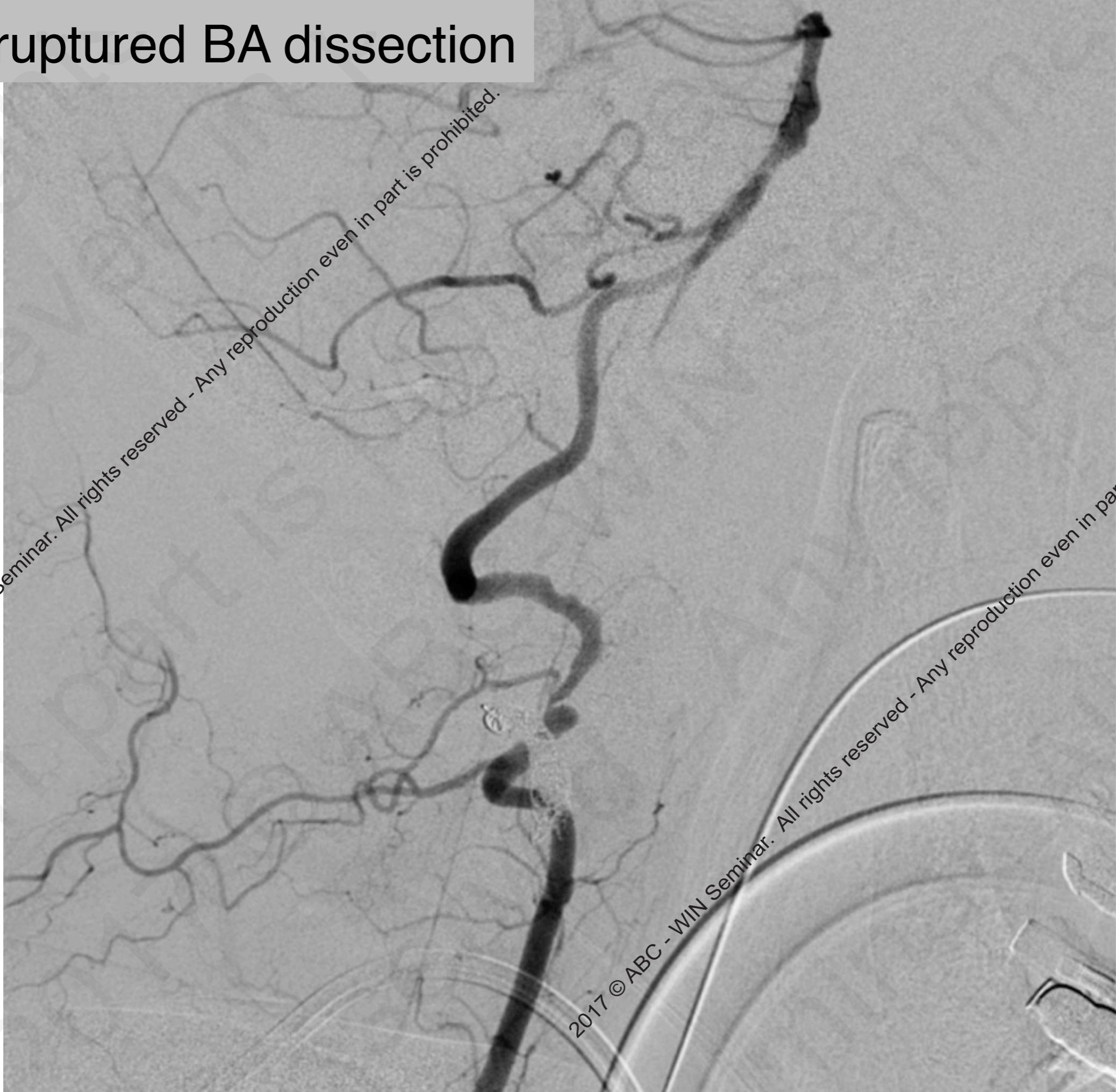
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the posterior meningeal artery arises  
from the odontoid arterial arch system



# 45 F, ruptured BA dissection



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**Yellow:** the odontoid arch(connection with VA at C1)

**Red:** small branch of PICA with posterior meningeal artery



A branch of PICA arises from the posterior meningeal artery?

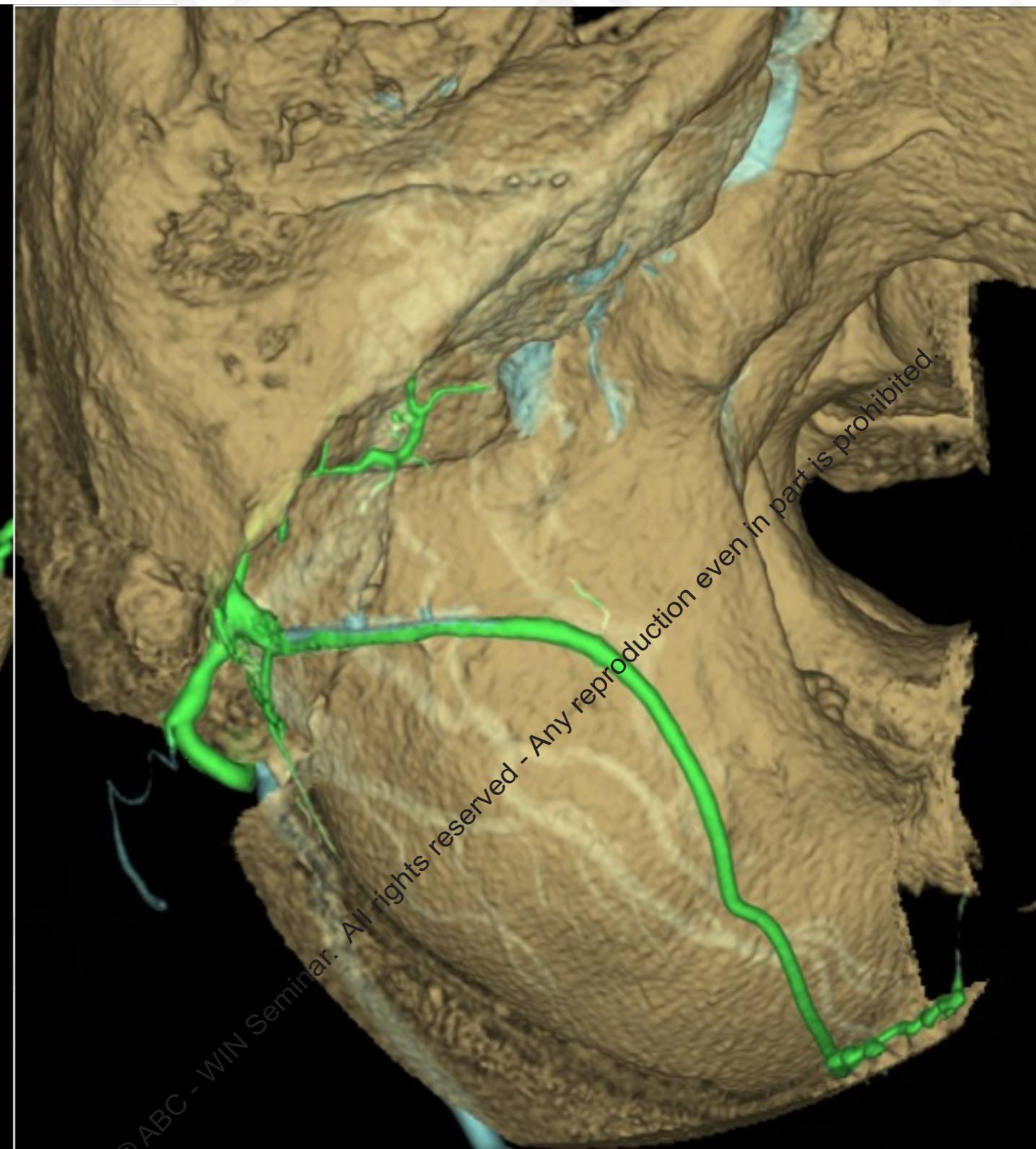
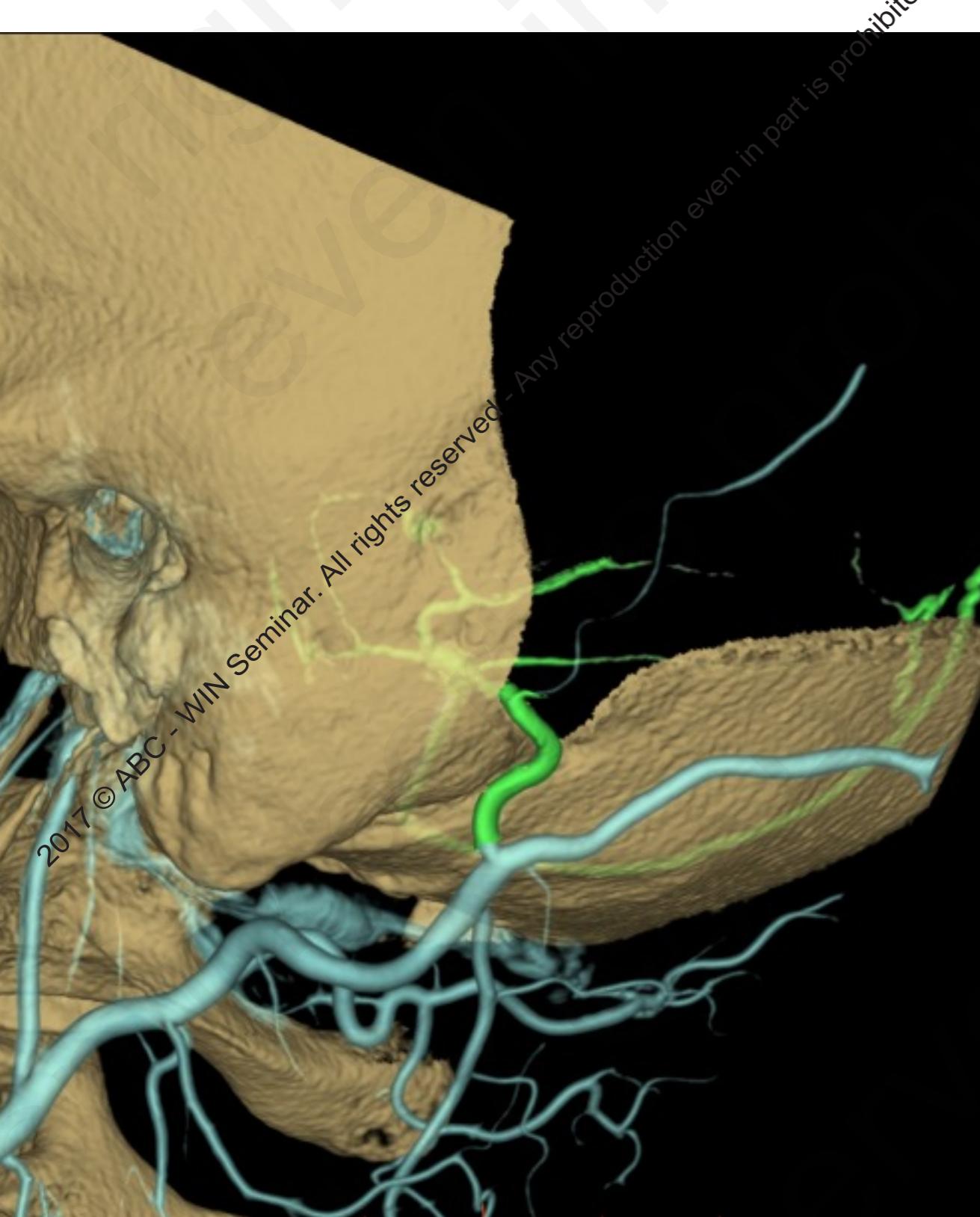
or

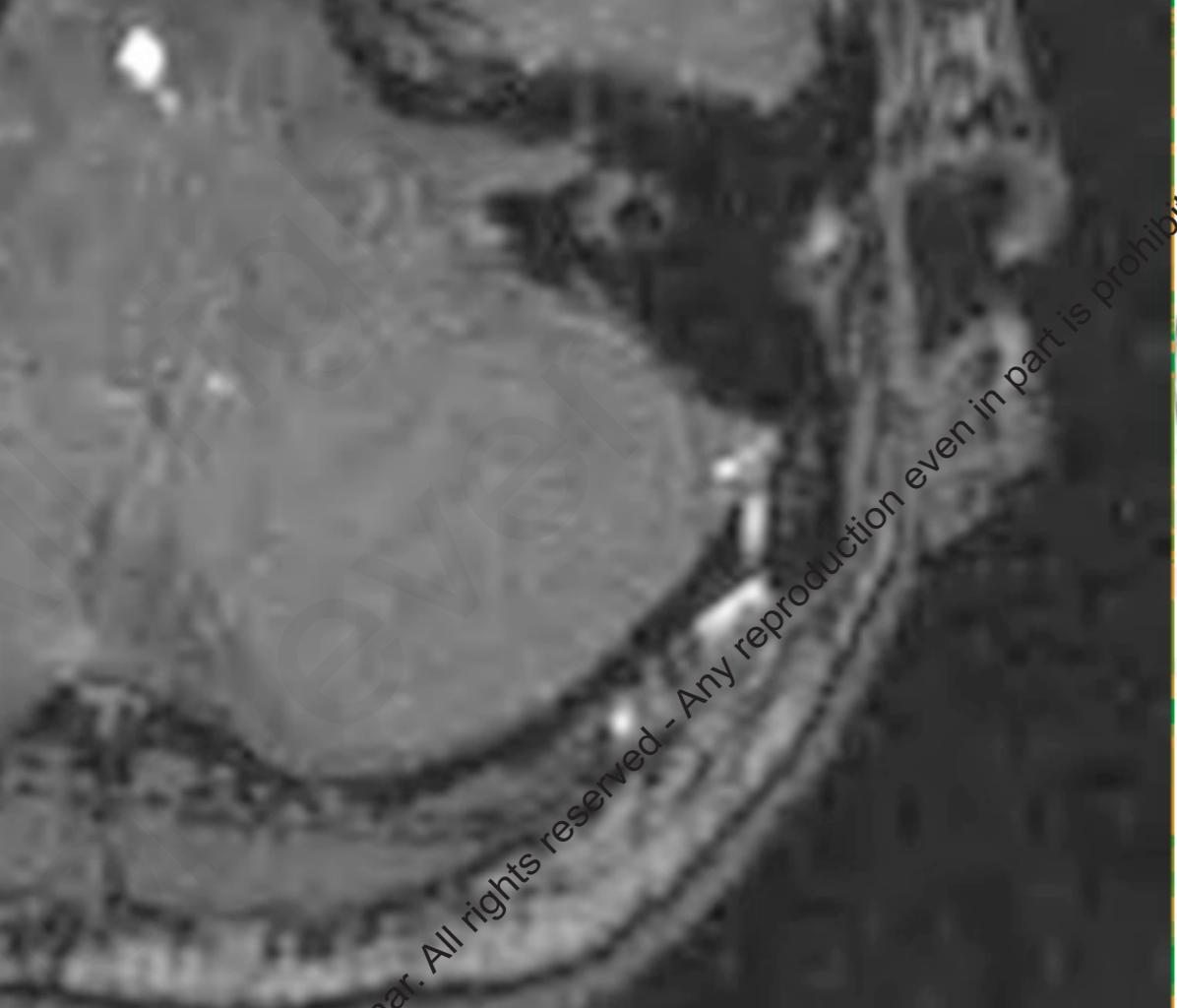
A posterior meningeal artery arises from the PICA?

or

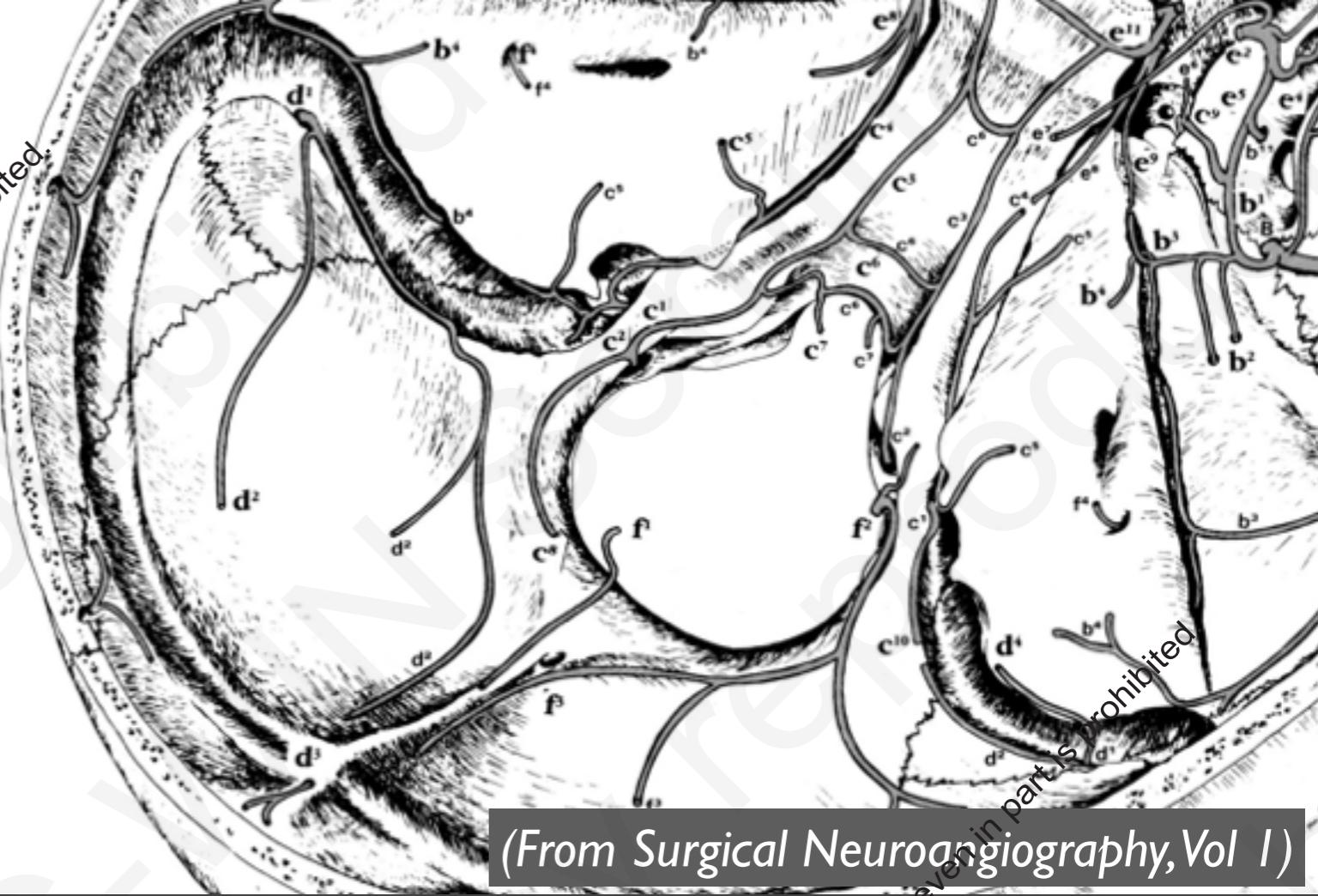
The posterior meningeal artery and a PICA branch shares a common trunk?

# The mastoid branch of the occipital artery



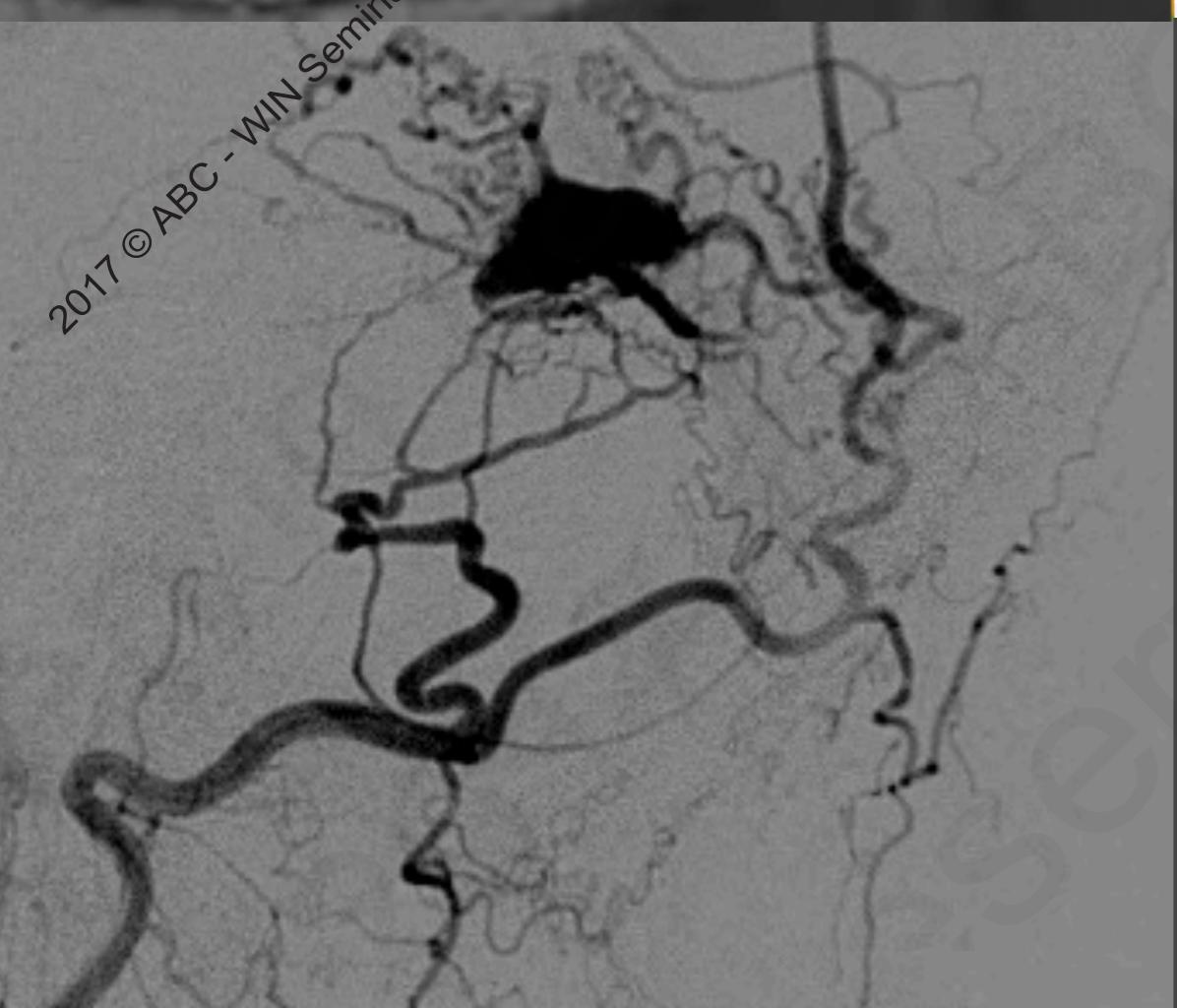


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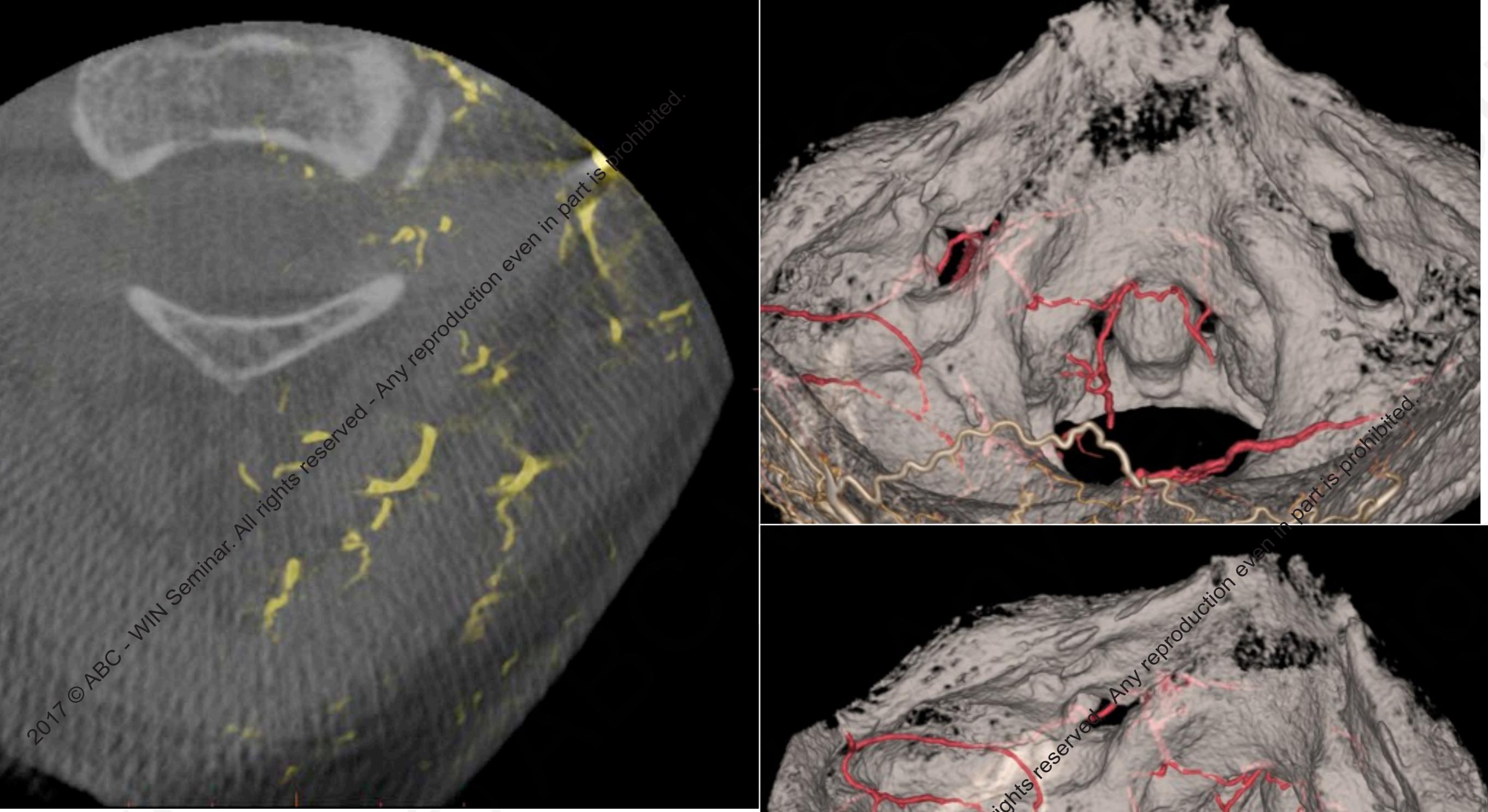


Dural branches of the occipital artery

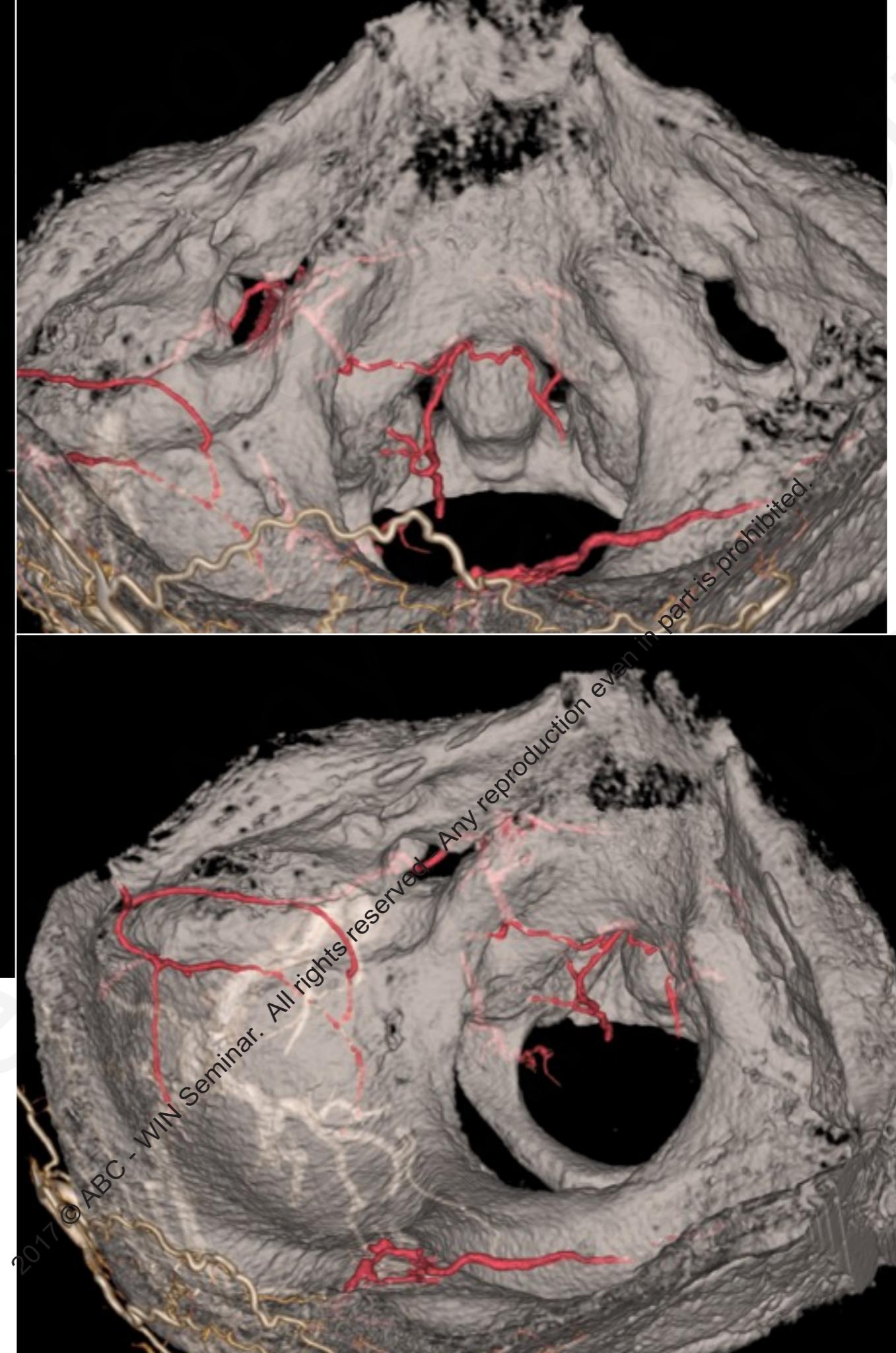
- mastoid branch
- other transosseous branches



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The path and the connections of the mastoid br. to the posterior fossa dural artery system



# 58 M, tentorial dAVF

E MEDICAL SYSTEMS  
okai Univ Hospital

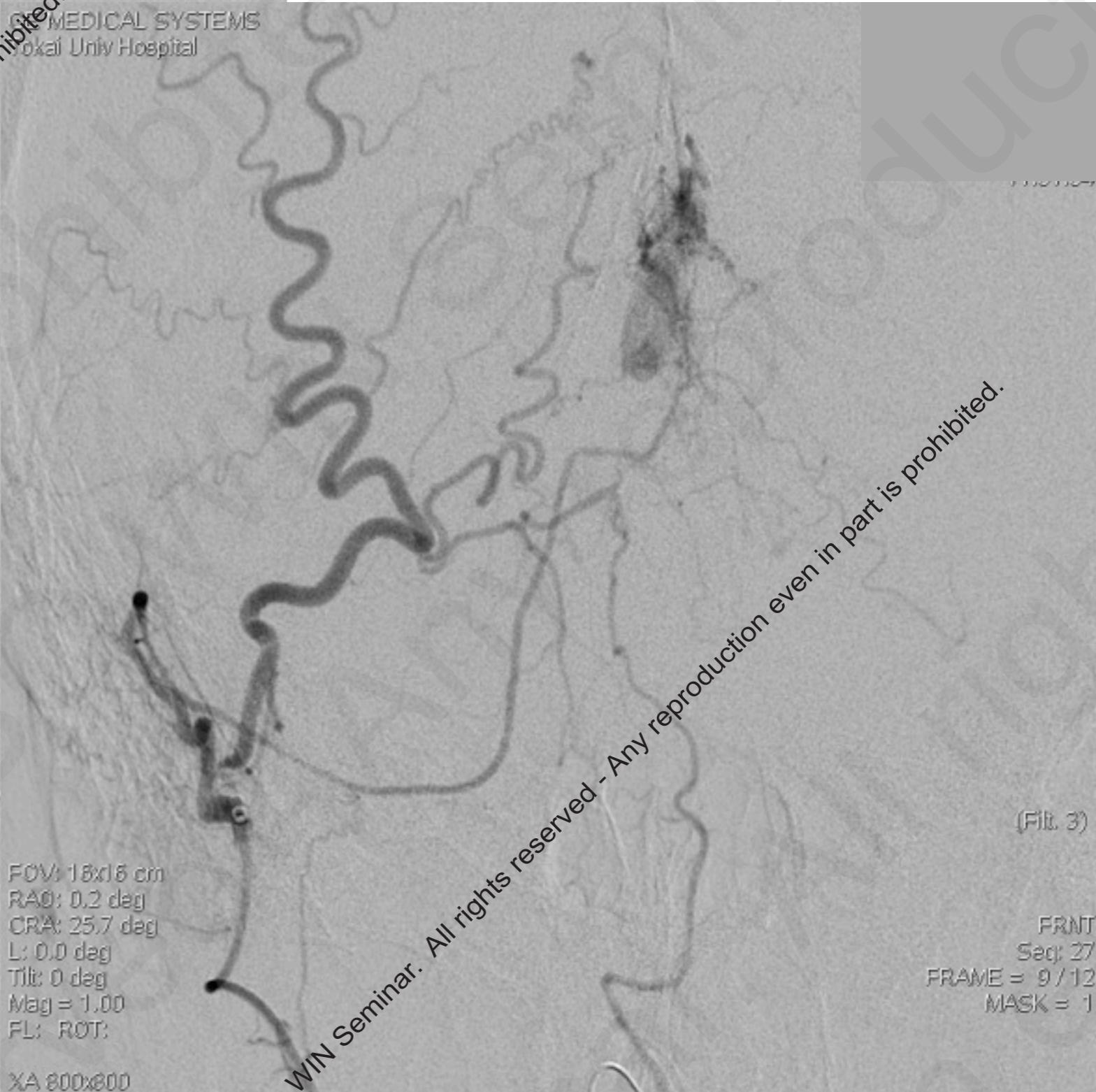


injection from the mastoid branch shows connection to the jugular branch of the ascending pharyngeal artery



GE MEDICAL SYSTEMS  
Tokai Univ Hospital

FOV: 20x20 cm  
LAO: 90.0 deg  
CRA: 0.6 deg  
L: -0.1 deg  
Tilt: 0 deg  
Mag = 1.00  
FL: ROT:  
XA 1000x1000

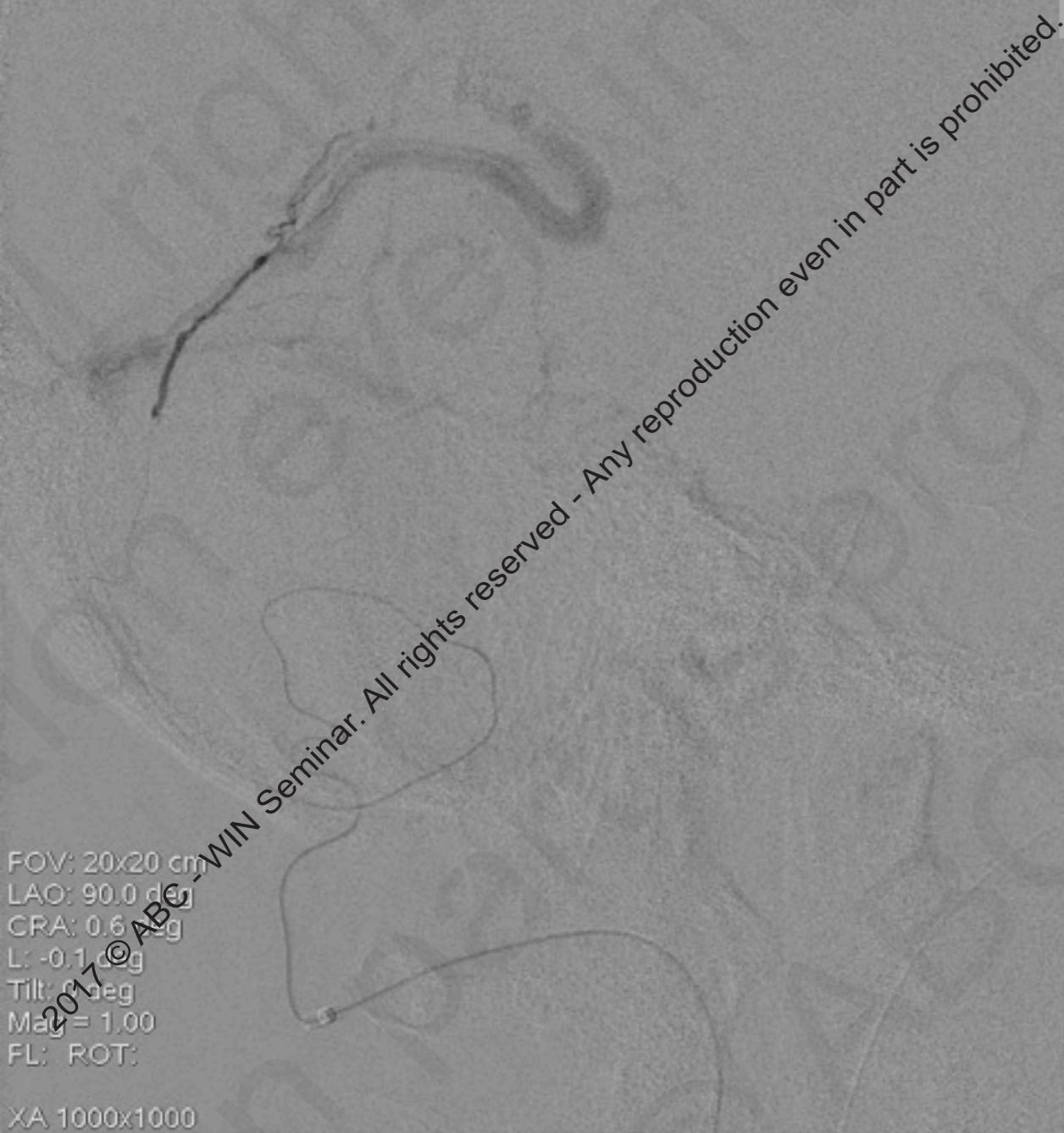


GE MEDICAL SYSTEMS  
Tokai Univ Hospital

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FOV: 20x20 cm  
LAO: 90.0 deg  
CRA: 0.6 deg  
L: -0.1 deg  
Tilt: 0 deg  
Mag = 1.00  
FL: ROT:  
XA 1000x1000

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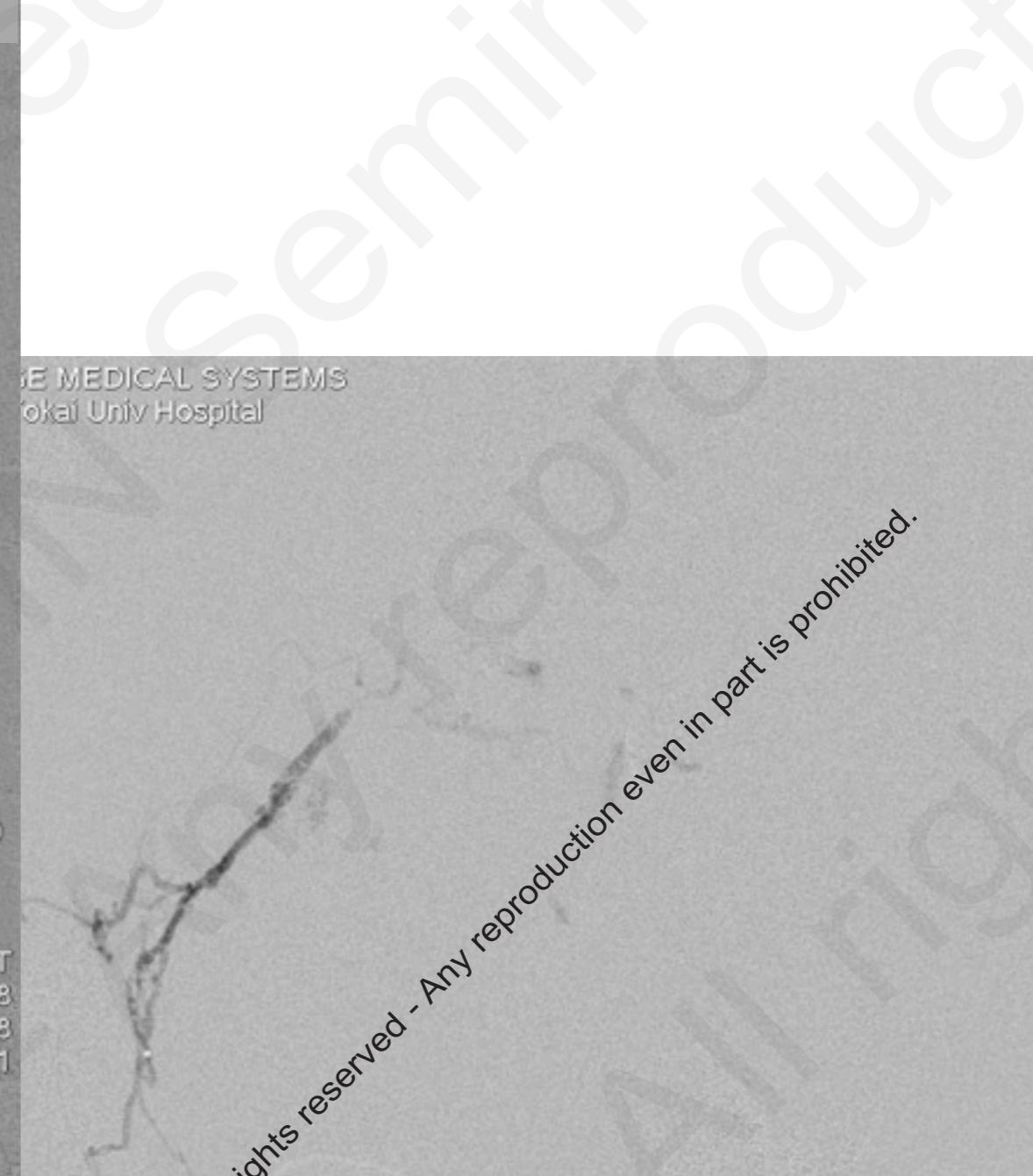


(Filt. 3)  
LAT  
Seq: 28  
FRAME = 18 / 18  
MASK = 1

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Siemens  
GE MEDICAL SYSTEMS  
Tokai Univ Hospital

FOV: 20x20 cm  
LAO: 90.0 deg  
CRA: 0.6 deg  
L: -0.1 deg  
Tilt: 0 deg  
Mag = 1.00  
FL: ROT:

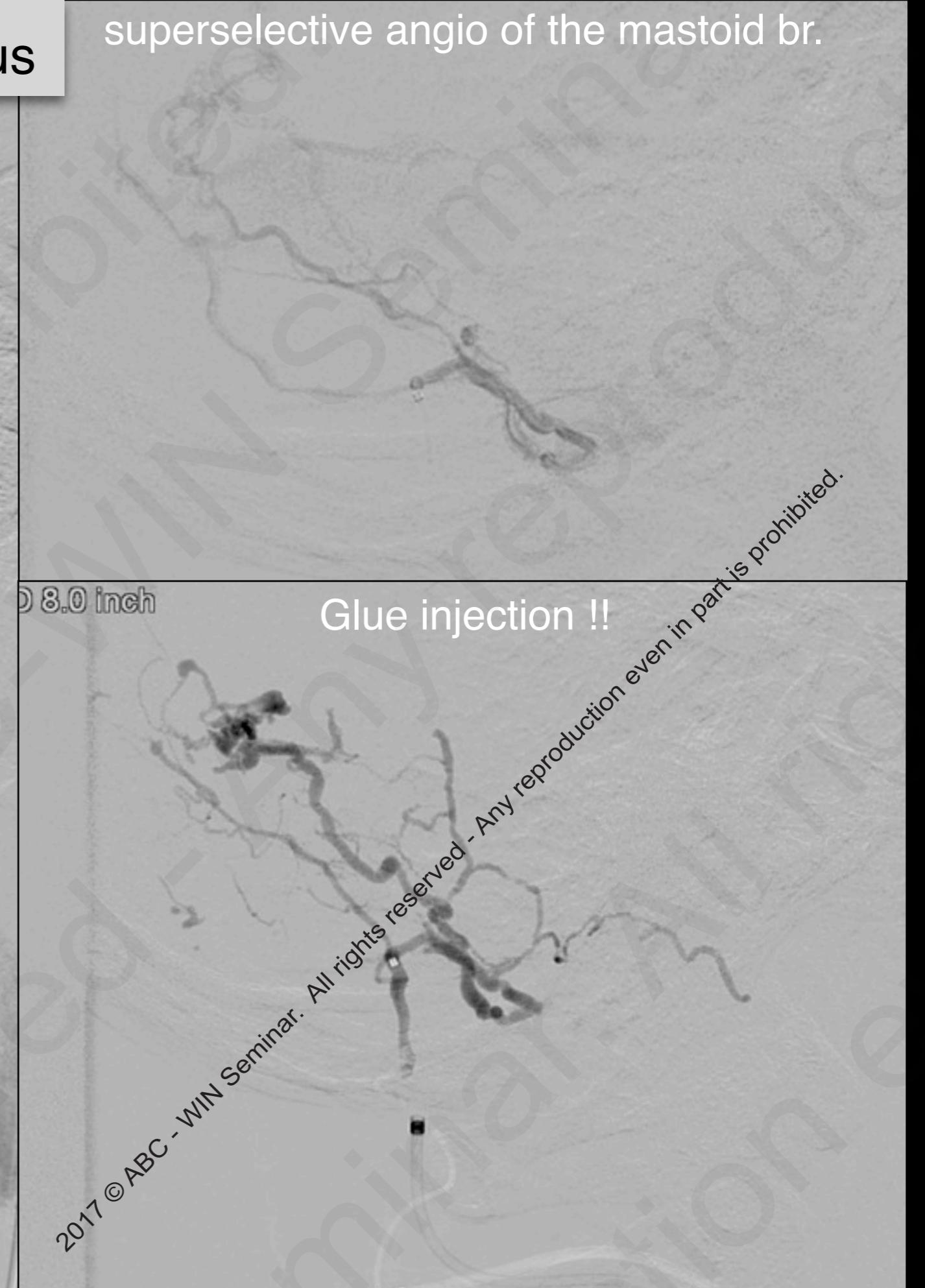
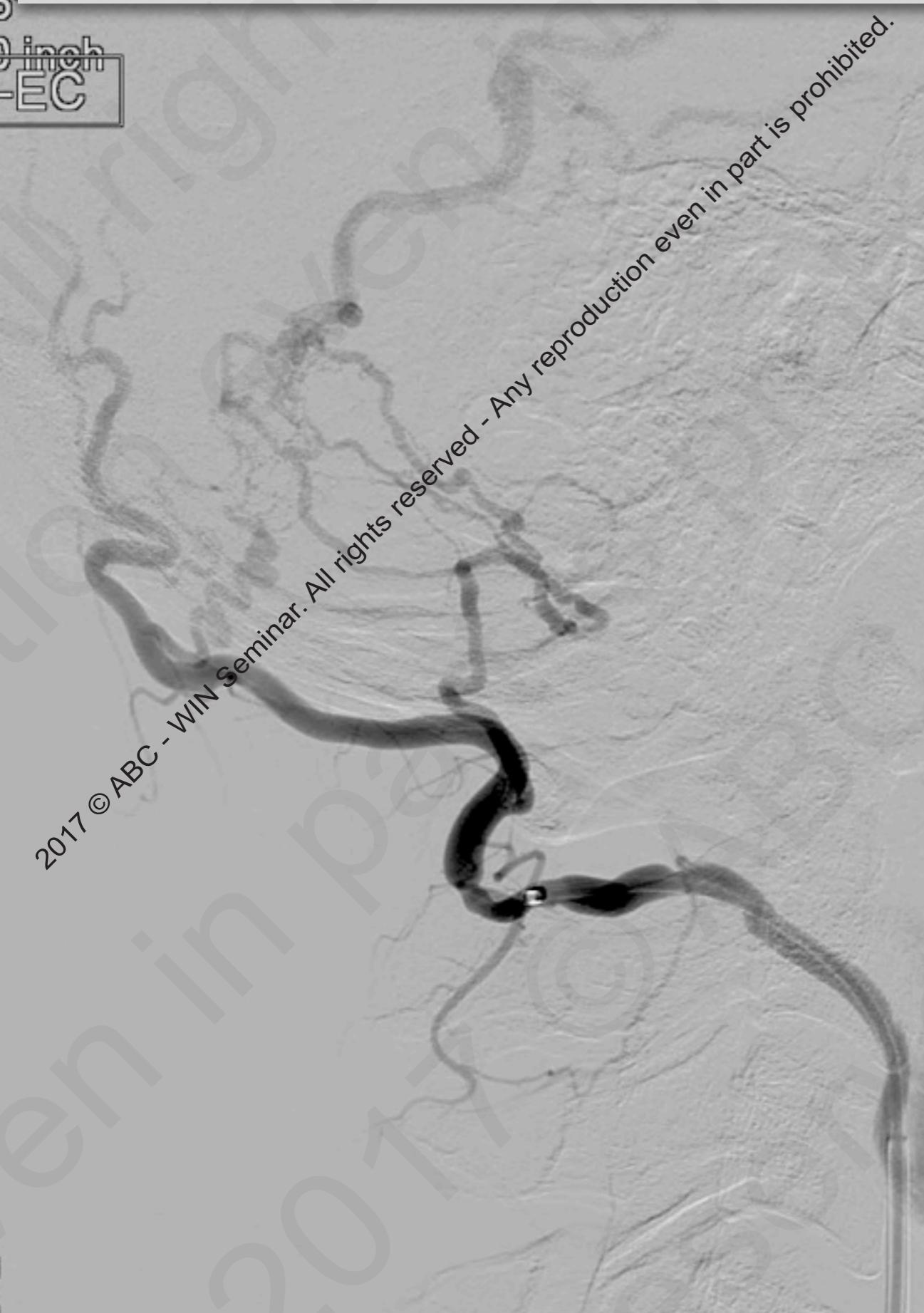


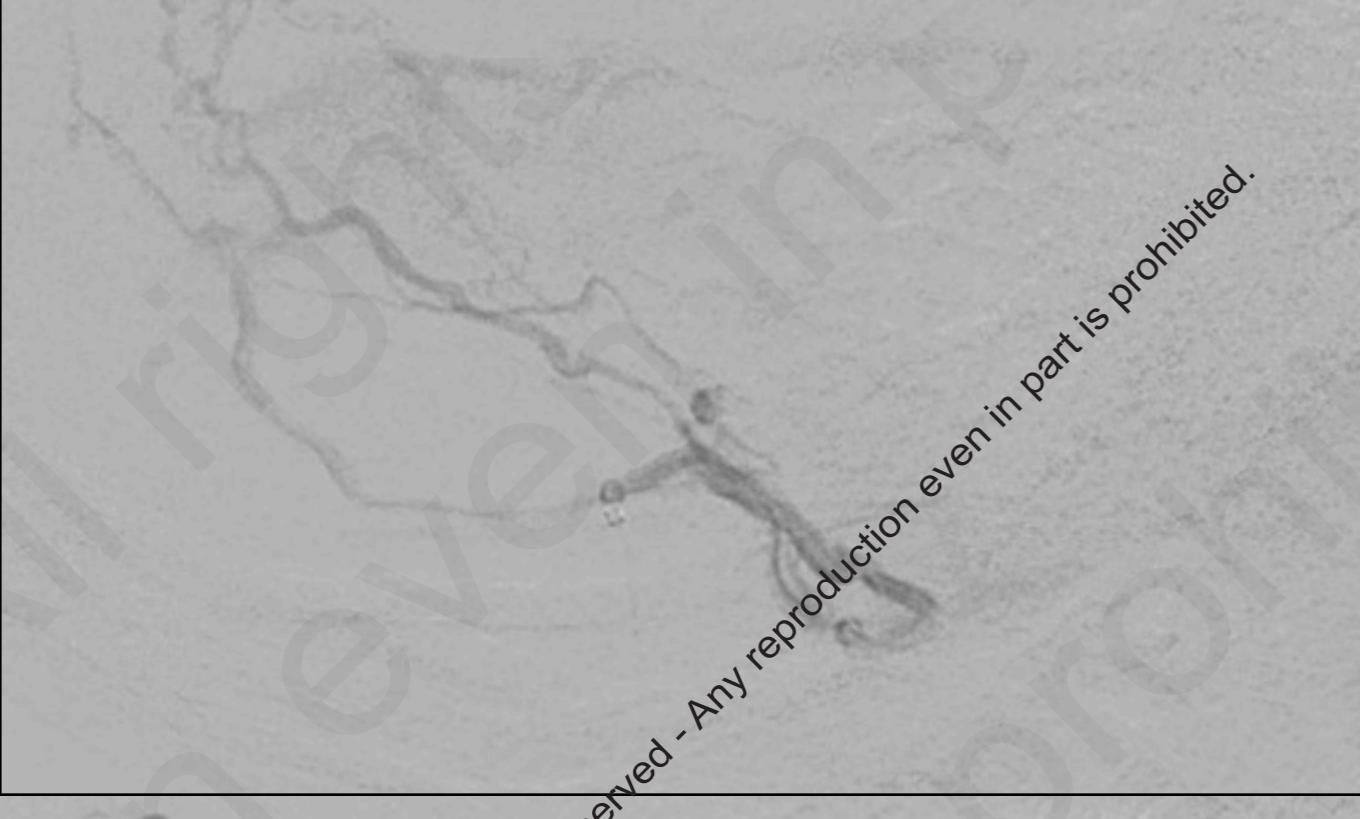
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# 56 M, dAVF of the transverse sinus

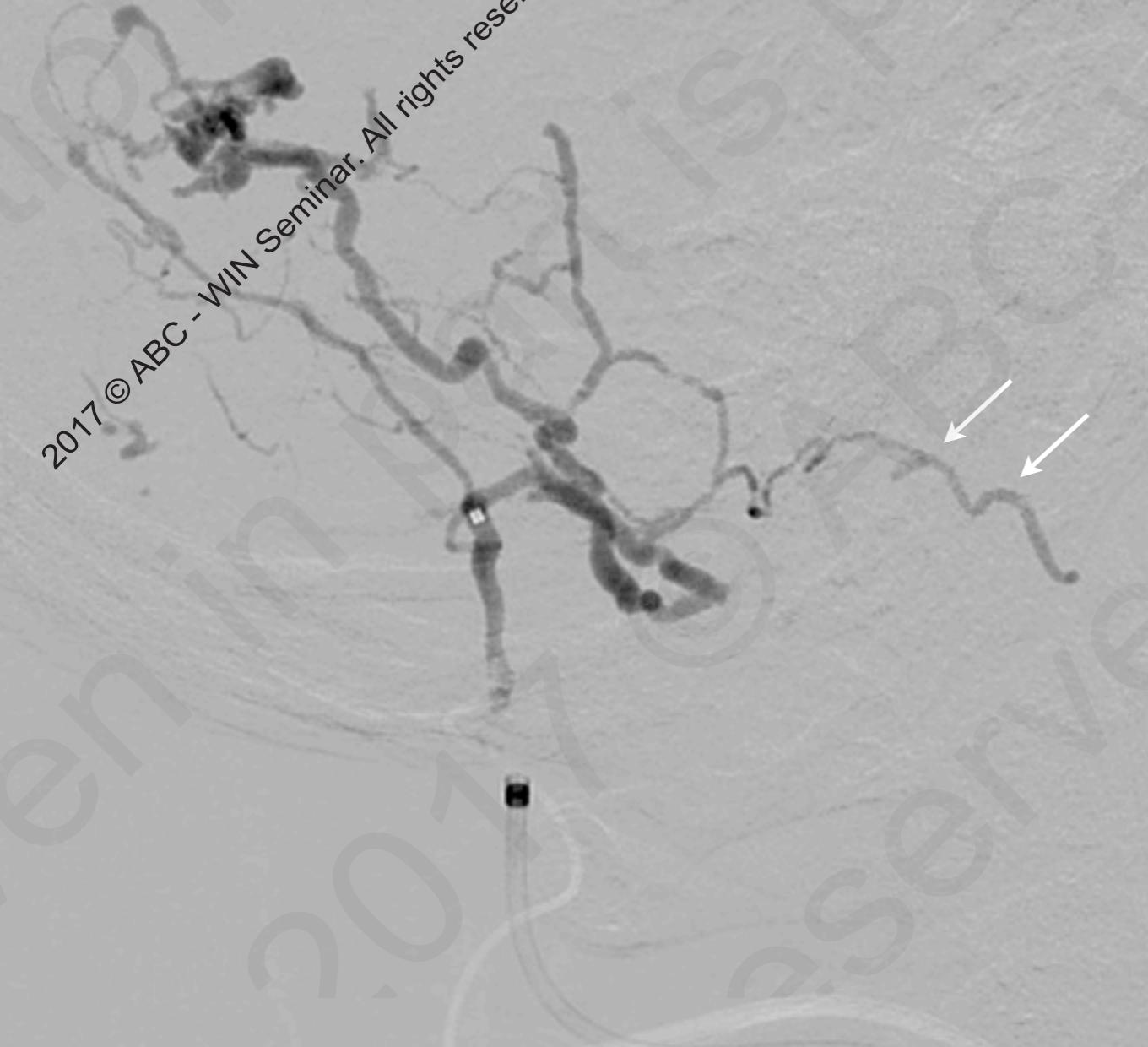
8 inch  
-EC

superselective angio of the mastoid br.

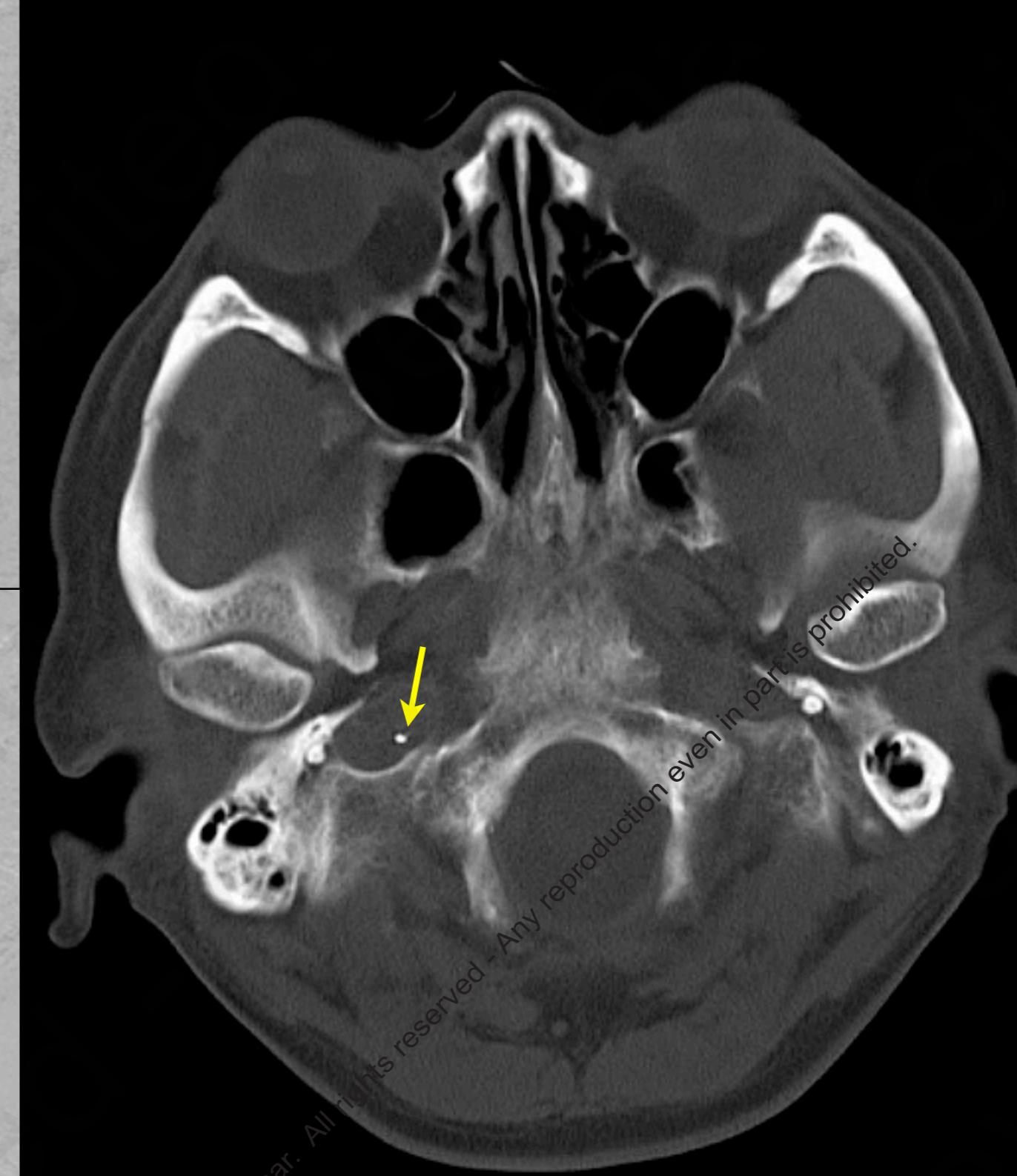




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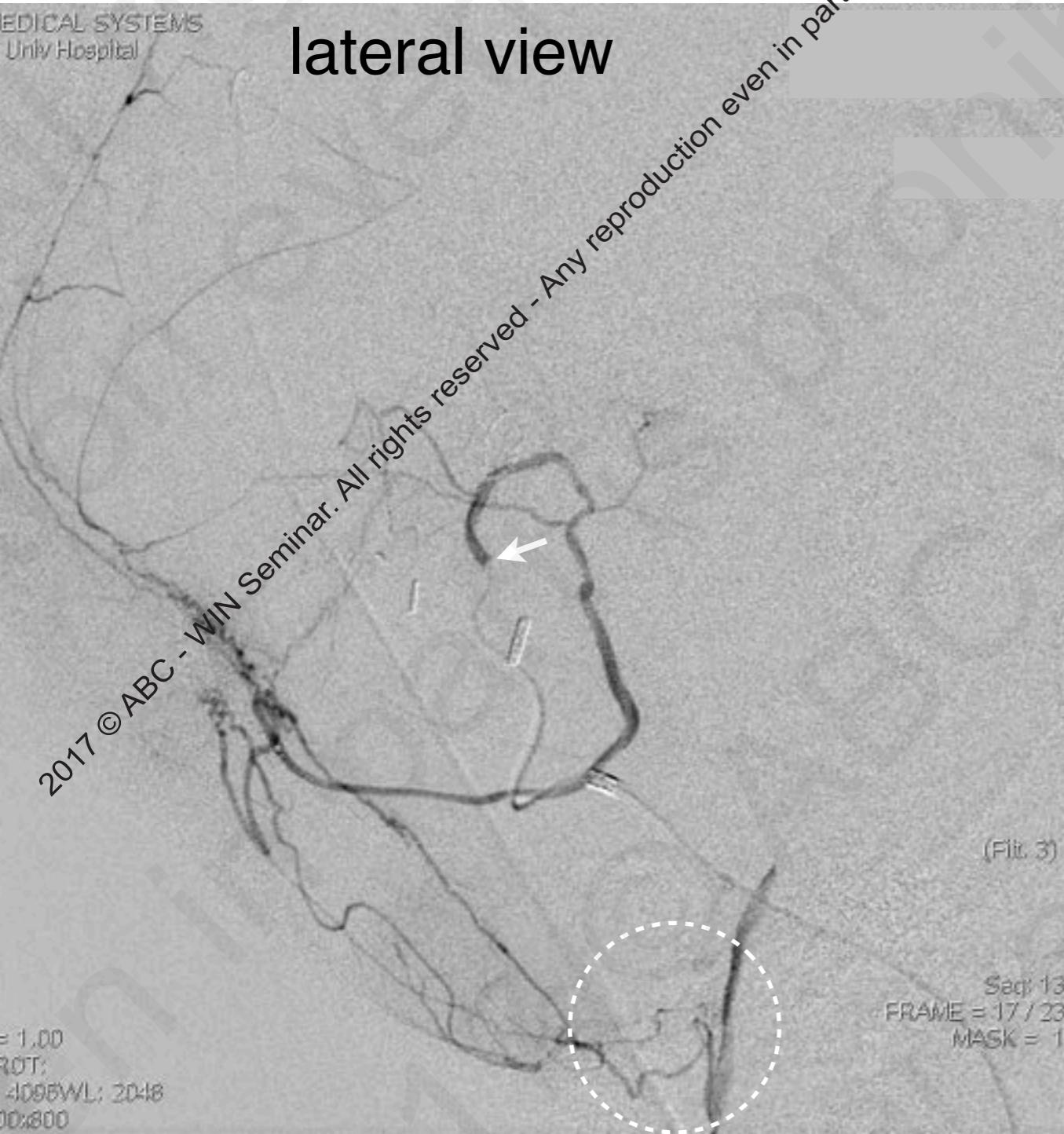
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In this case, there was some glue penetration into the jugular branch of OA. The injection was stopped immediately and there was no related symptoms.

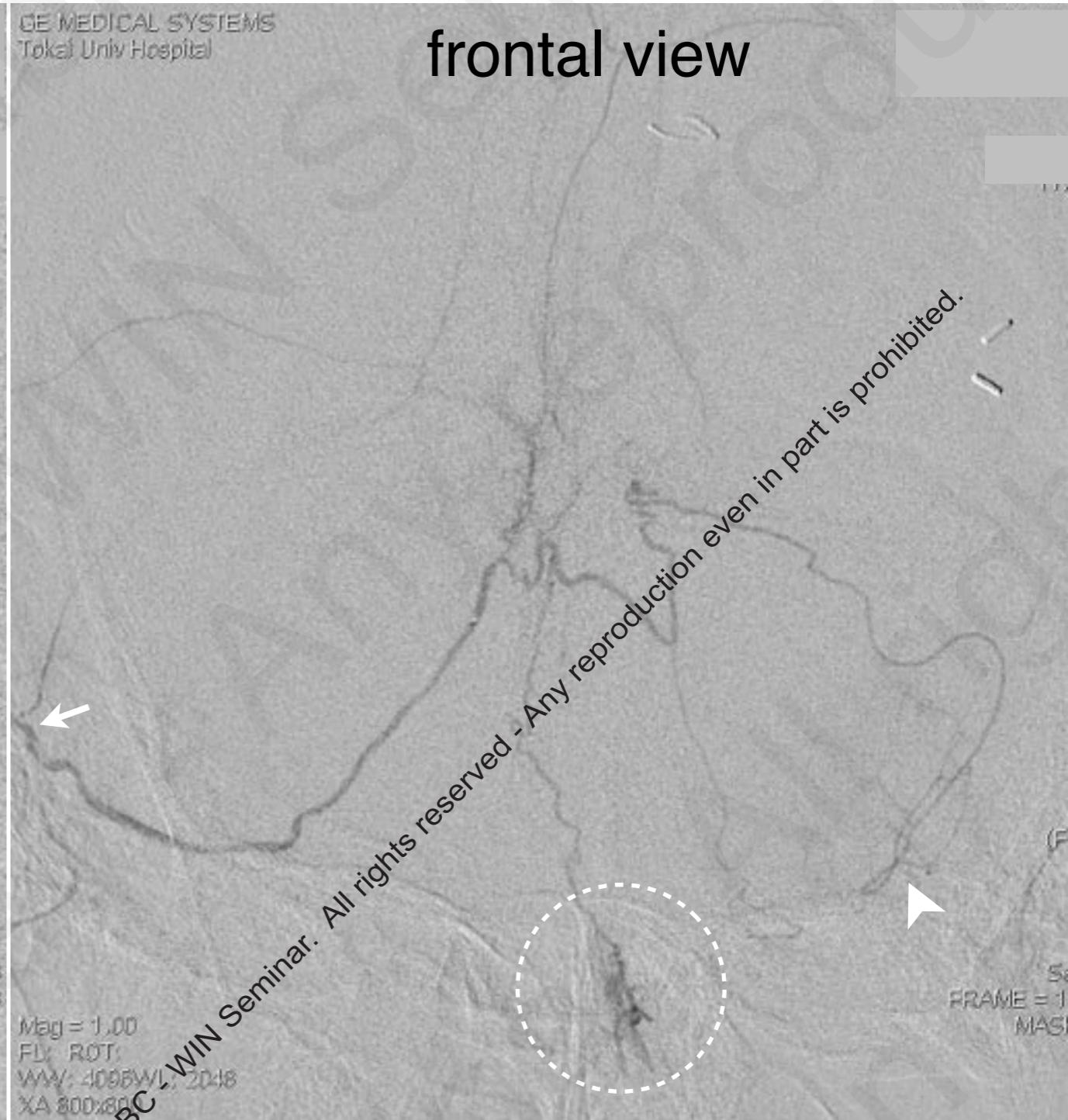
60 M, investigated for multiple intracranial shunts

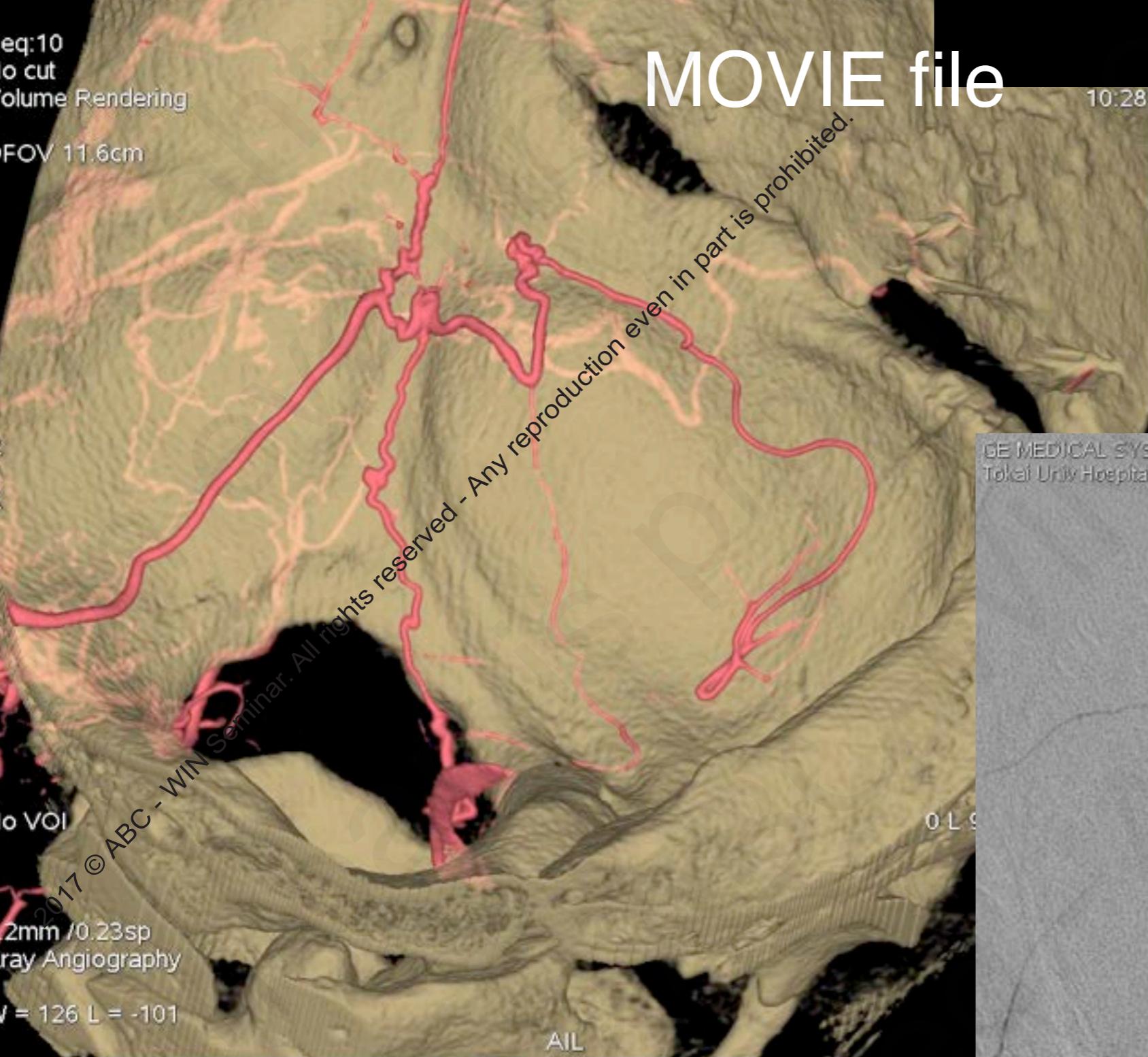
## Selective injection of mastoid br of right OA

lateral view



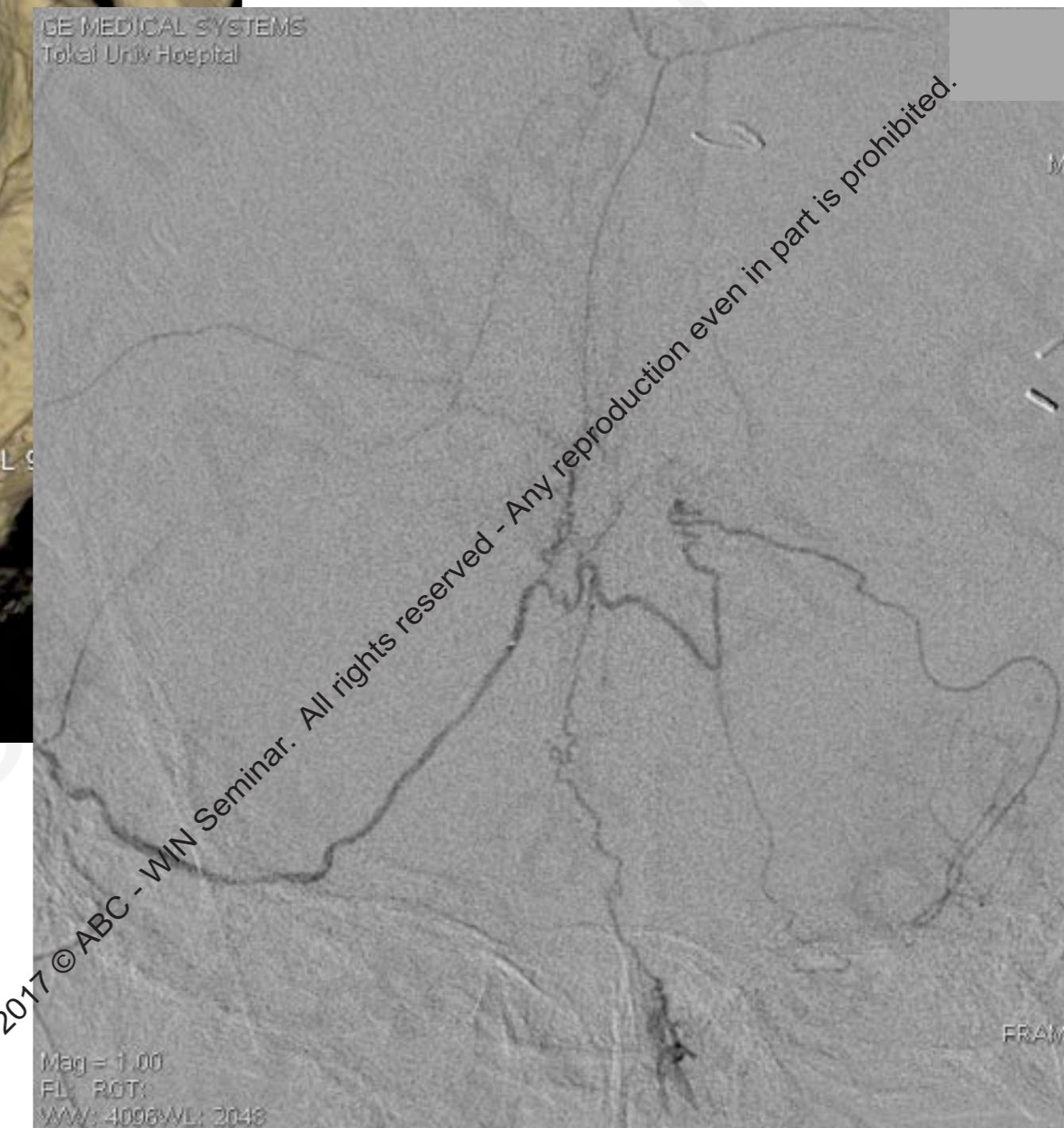
frontal view





connections to the

- VA, AICA
- supratentorial dural br



## The posterior meningeal artery can have origins from

- various parts of the VA (near its entrance to the dura mater)
- PICA
- ascending pharyngeal artery
- mastoid branch of the occipital artery
- the odontoid arterial arcade system

## The posterior meningeal artery can have communication with

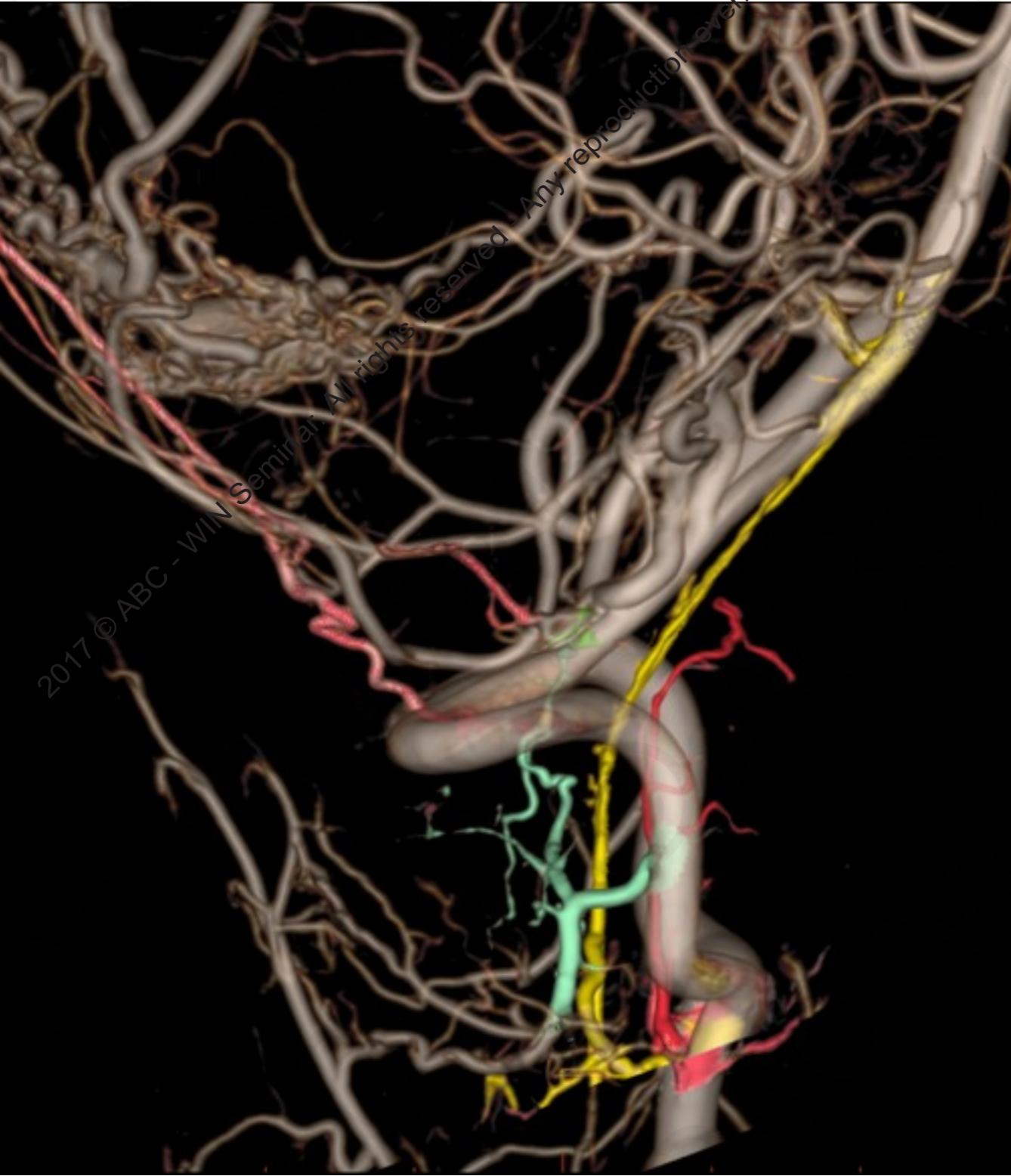
- all of those mentioned in the left row
- the middle meningeal artery
- the clival branches of the ICA
- AICA

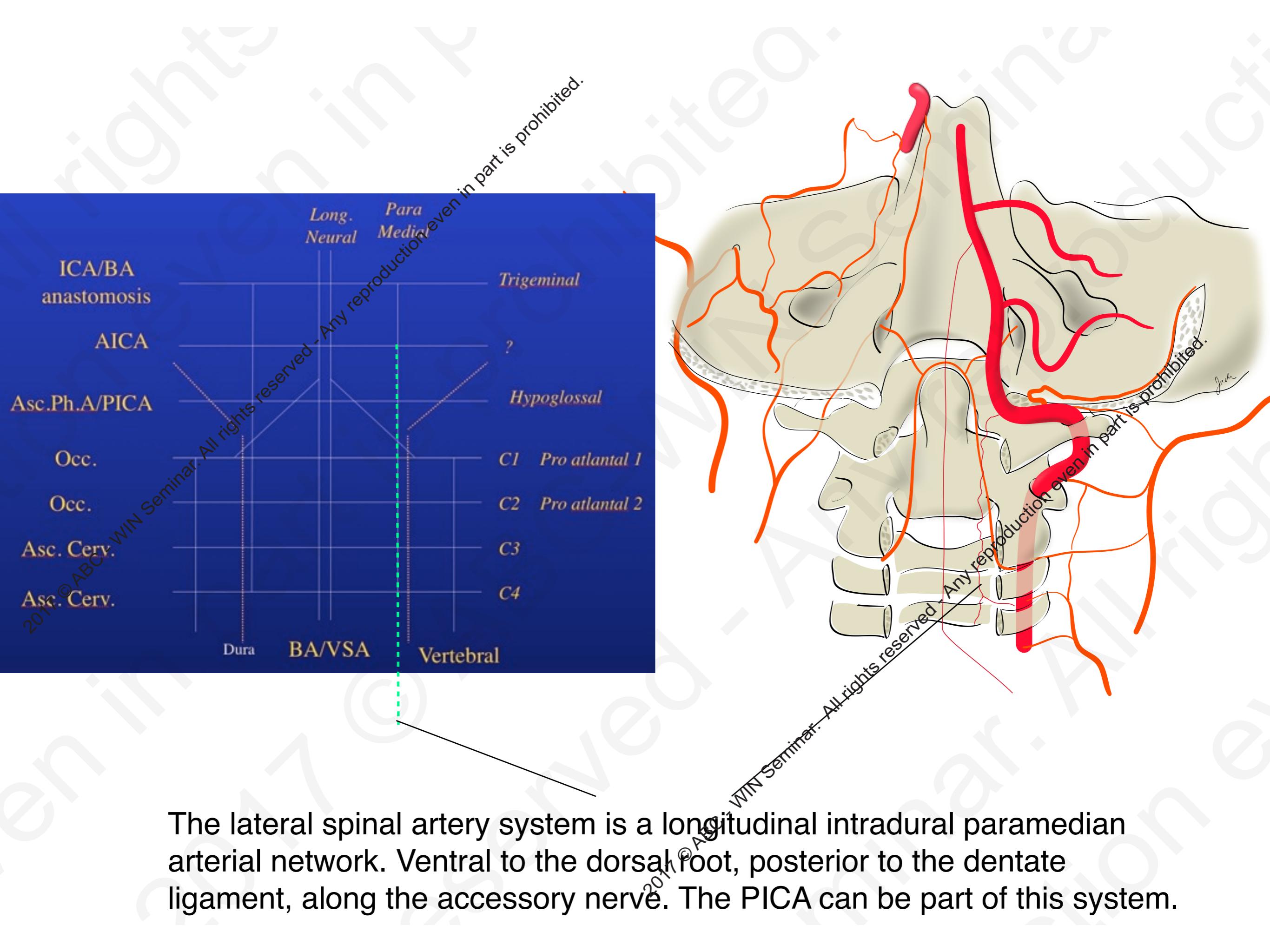
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# The lateral spinal artery system...

...and the PICA





The lateral spinal artery system is a longitudinal intradural paramedian arterial network. Ventral to the dorsal foot, posterior to the dentate ligament, along the accessory nerve. The PICA can be part of this system.

# Visualization of lateral spinal artery system in normal anatomy is not easy



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# 11 F, cerebellar AVM with hemorrhage



43



# 32 M, tympanic paraganglioma



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2155



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# anterior view



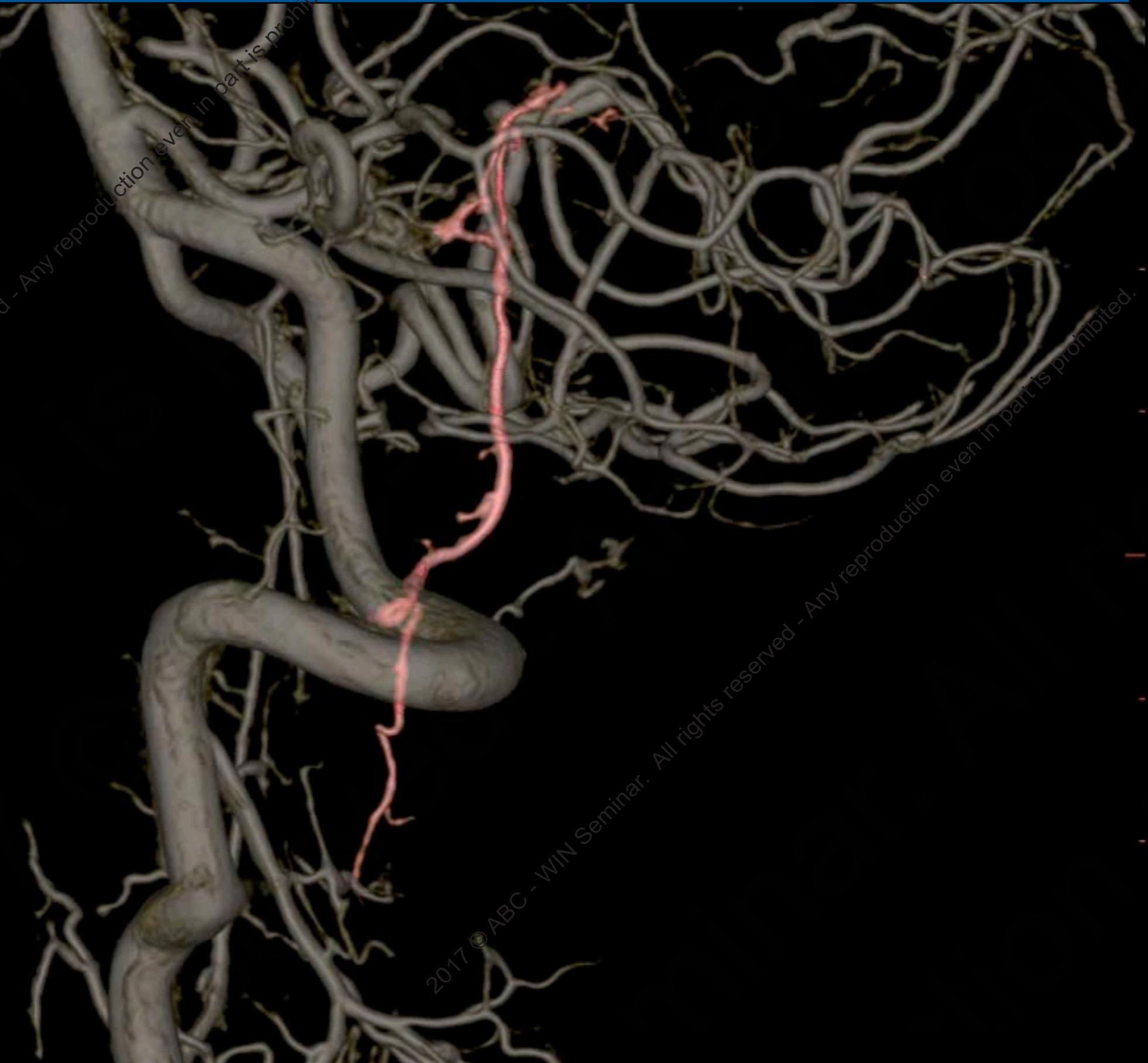
# posterior view



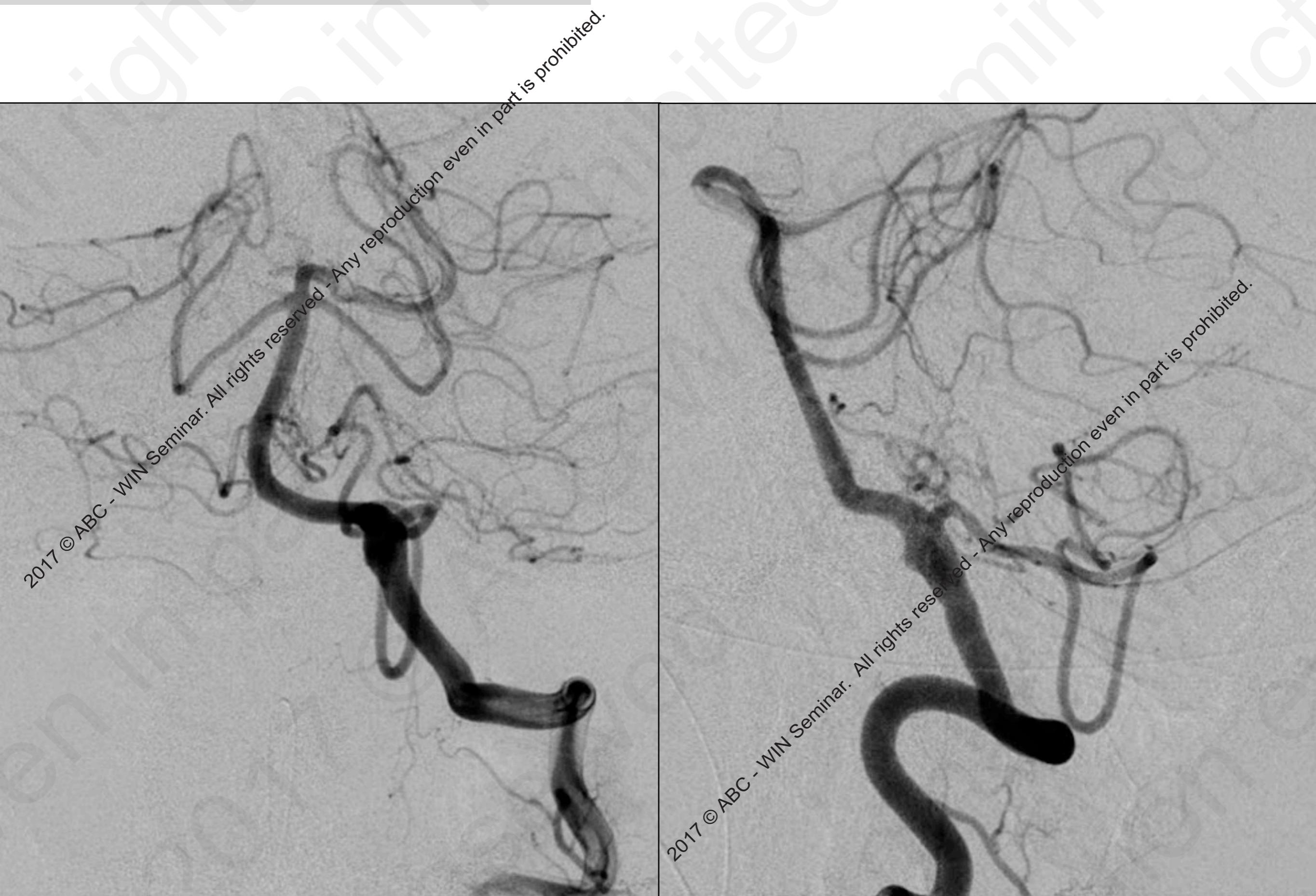
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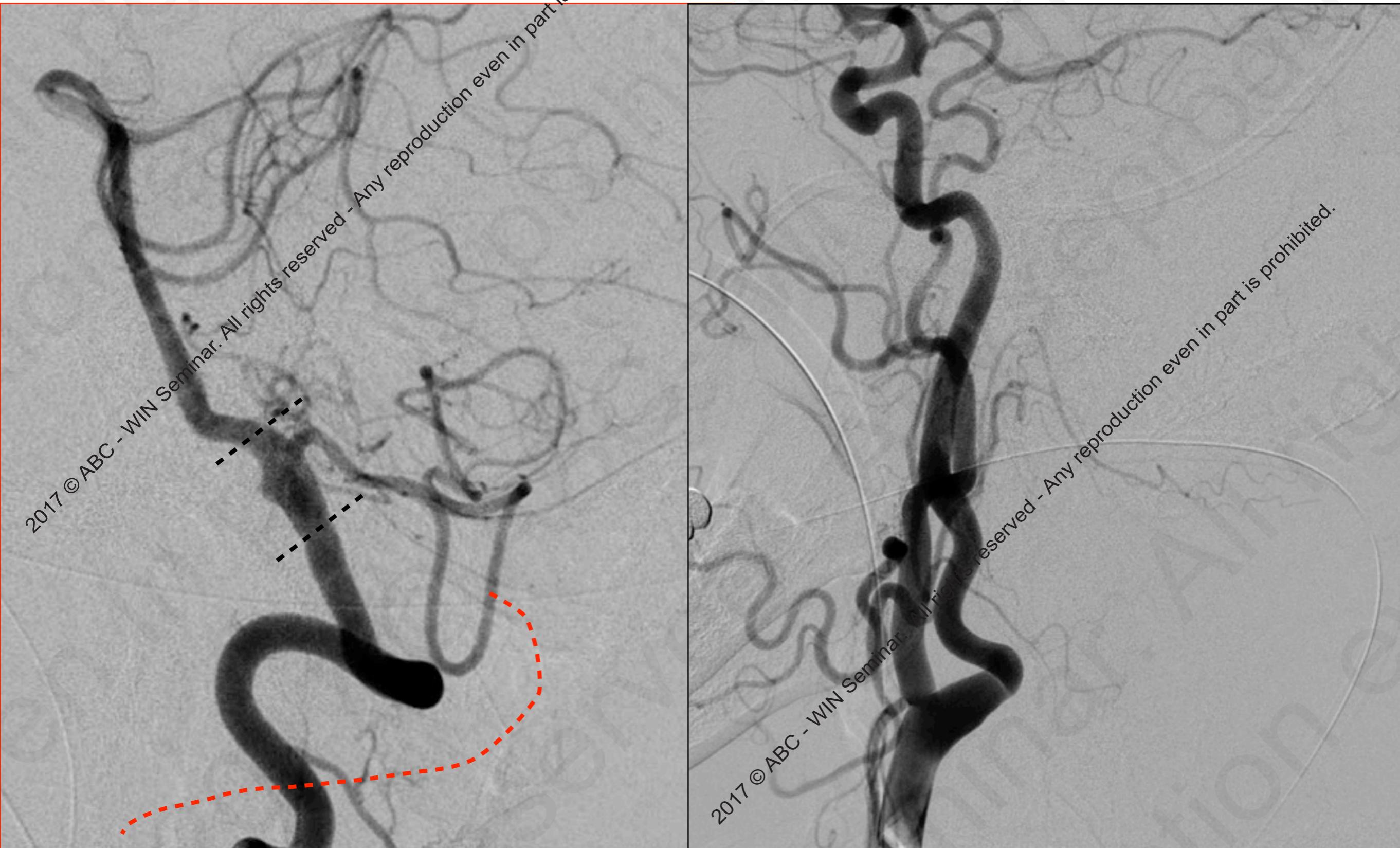
**“lateral spinal artery” originating from the C1 segment**  
**The ascending branch supplies the choroid plexus of the 4th ventricle.**



# 42 M, left VA dissection(SAH)



Trapping of the dissected part (with the PICA) with OA-PICA bypass was done. But the bypass artery has occluded.



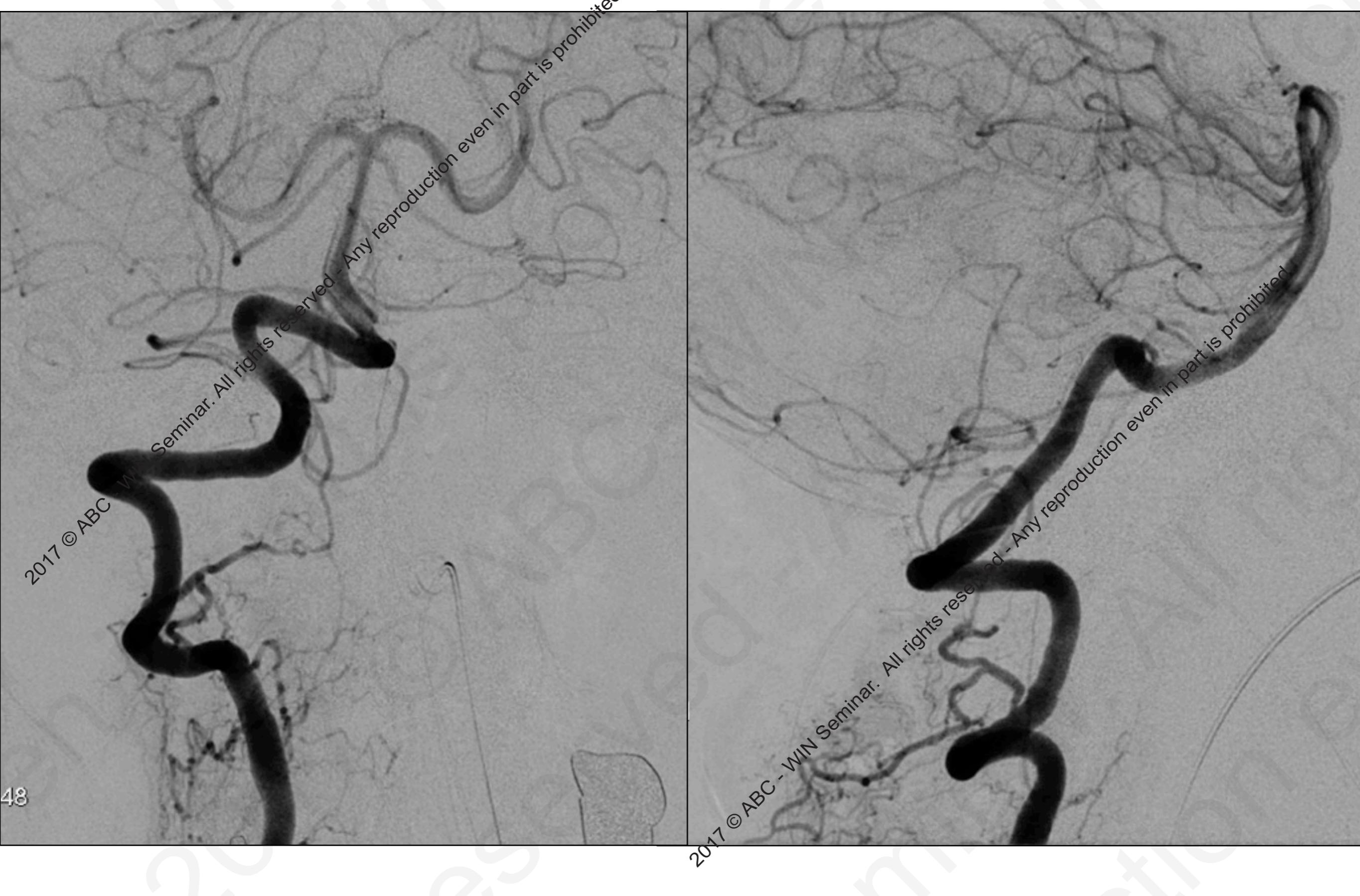
left VA  
frontal view

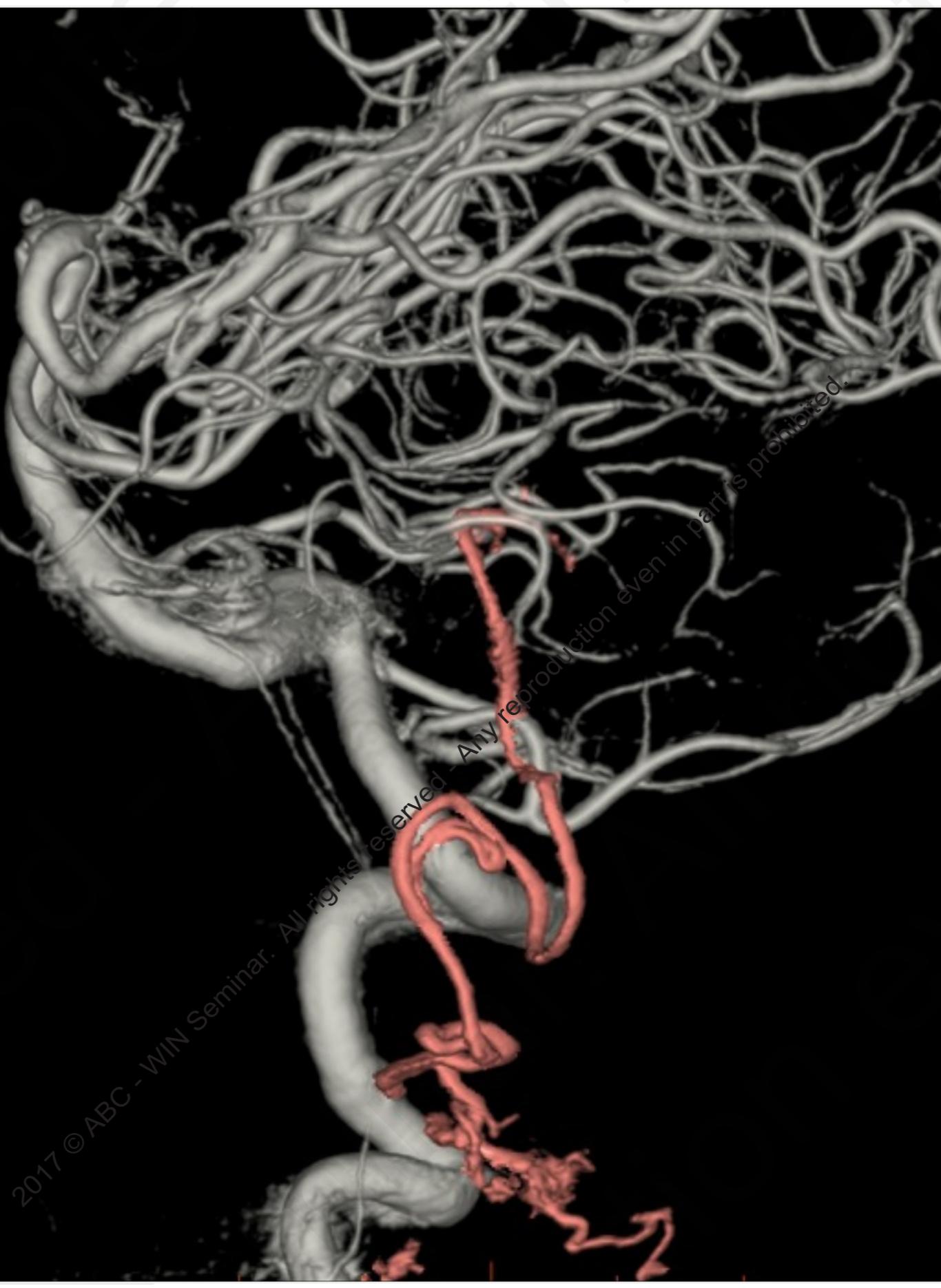
left VA  
lateral view



At the follow up angiogram, the **PICA** is reconstructed through the connection with the lateral spinal artery arising from C2 segment

# 62 F, left intracranial VA dissection

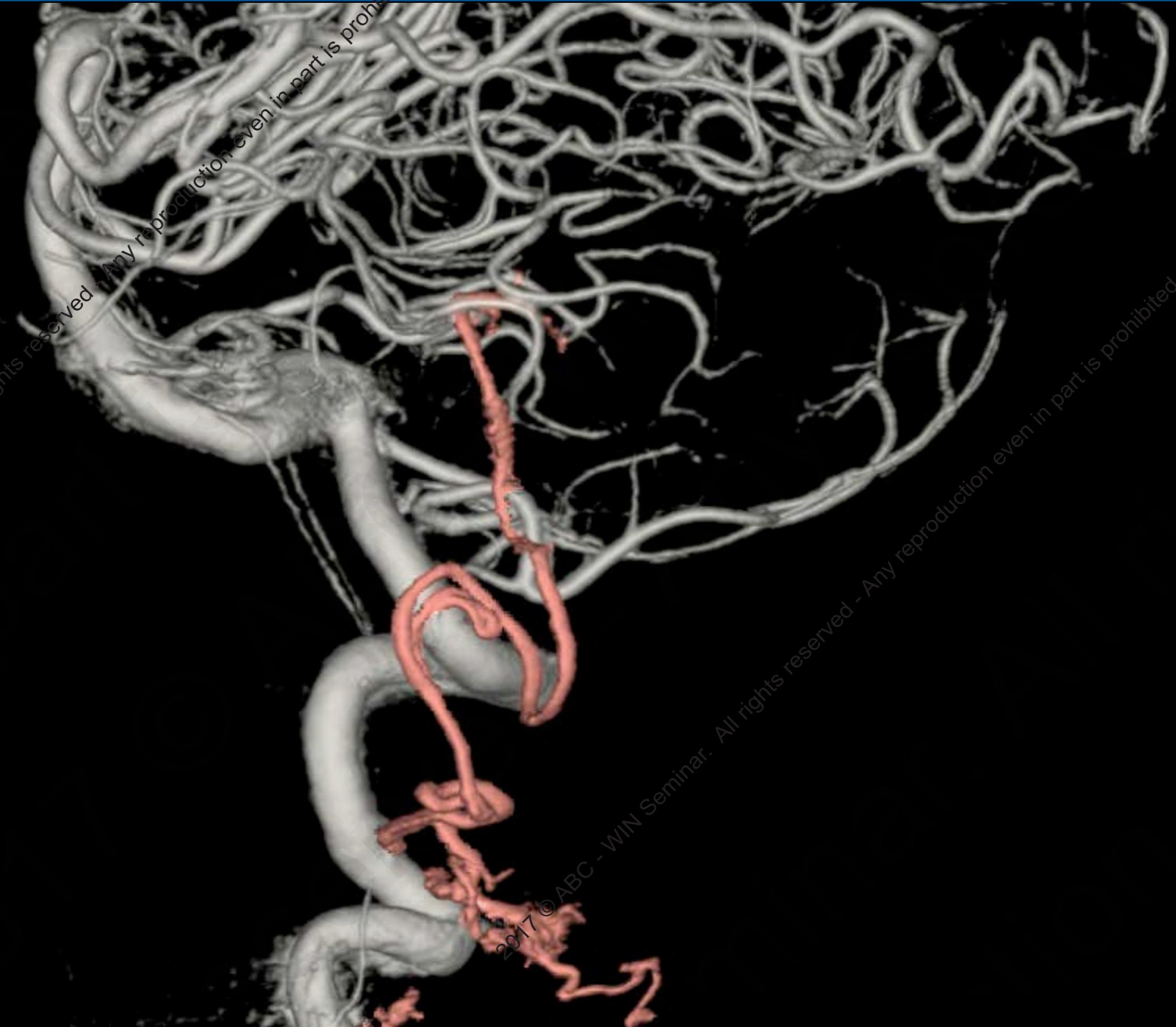




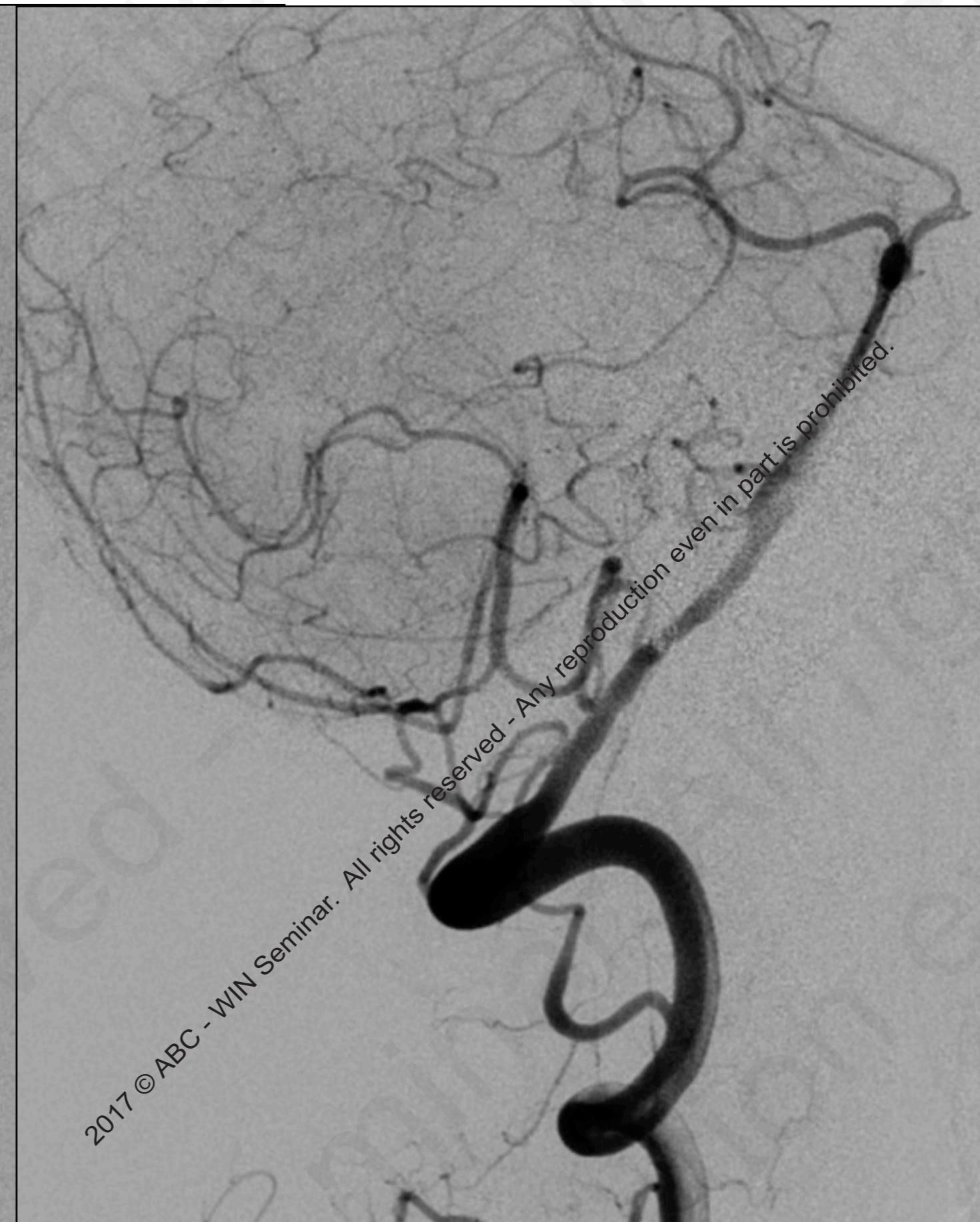
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“lateral spinal artery” originating from the C2 segment giving out a branch functioning as part of the PICA.



# 61 F, right VA-PICA aneurysm



# “lateral spinal artery” as a “C2 PICA”.

Volume Rendering No cut

DFOV11.8cm

A

4  
9

No VOI



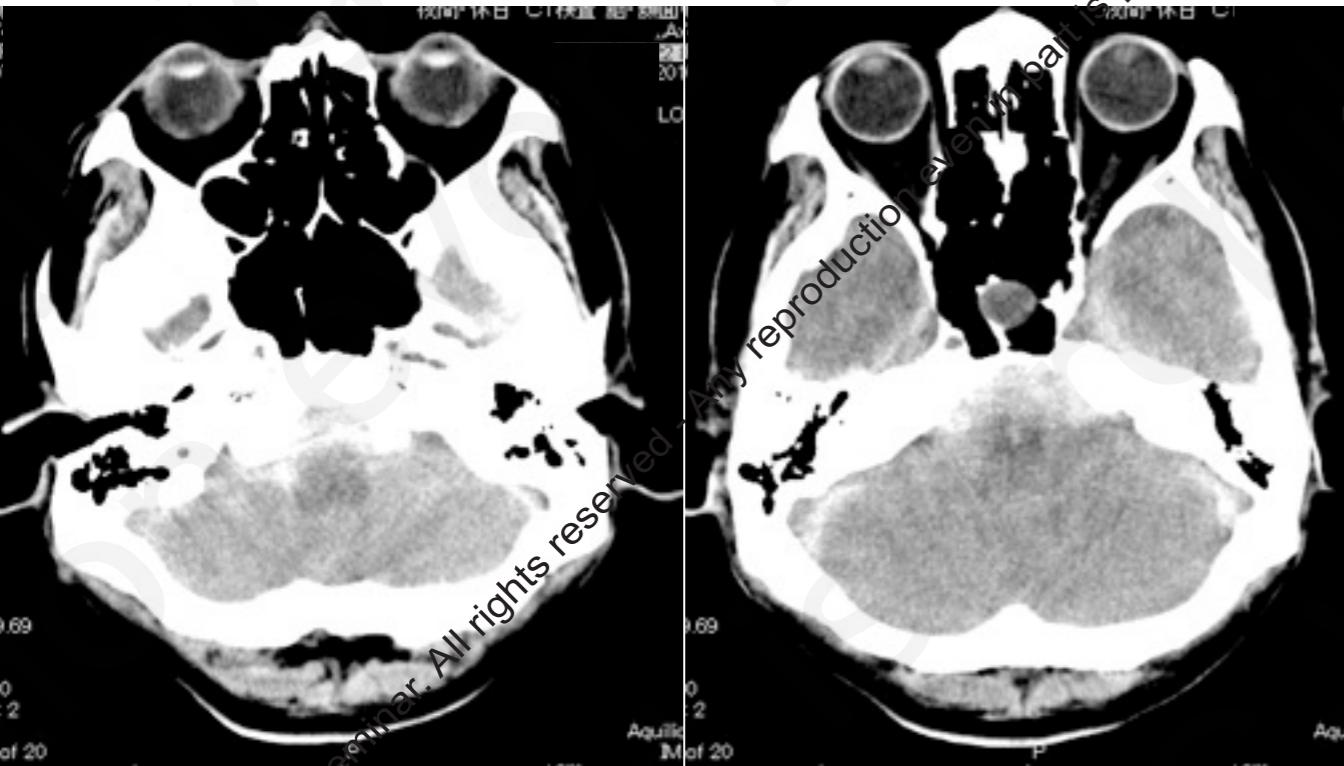
P

8  
4

Gantry OFF

0 L90 LA0 CRA

81 M, SAH



Run Number: 5012  
Volume Type: 3DRA  
Run Date: 2011/11/22  
Run Time: 16:56:20  
Cube Size: 70.24 mm

Rot: -55°  
Ang: -2°

Head Side



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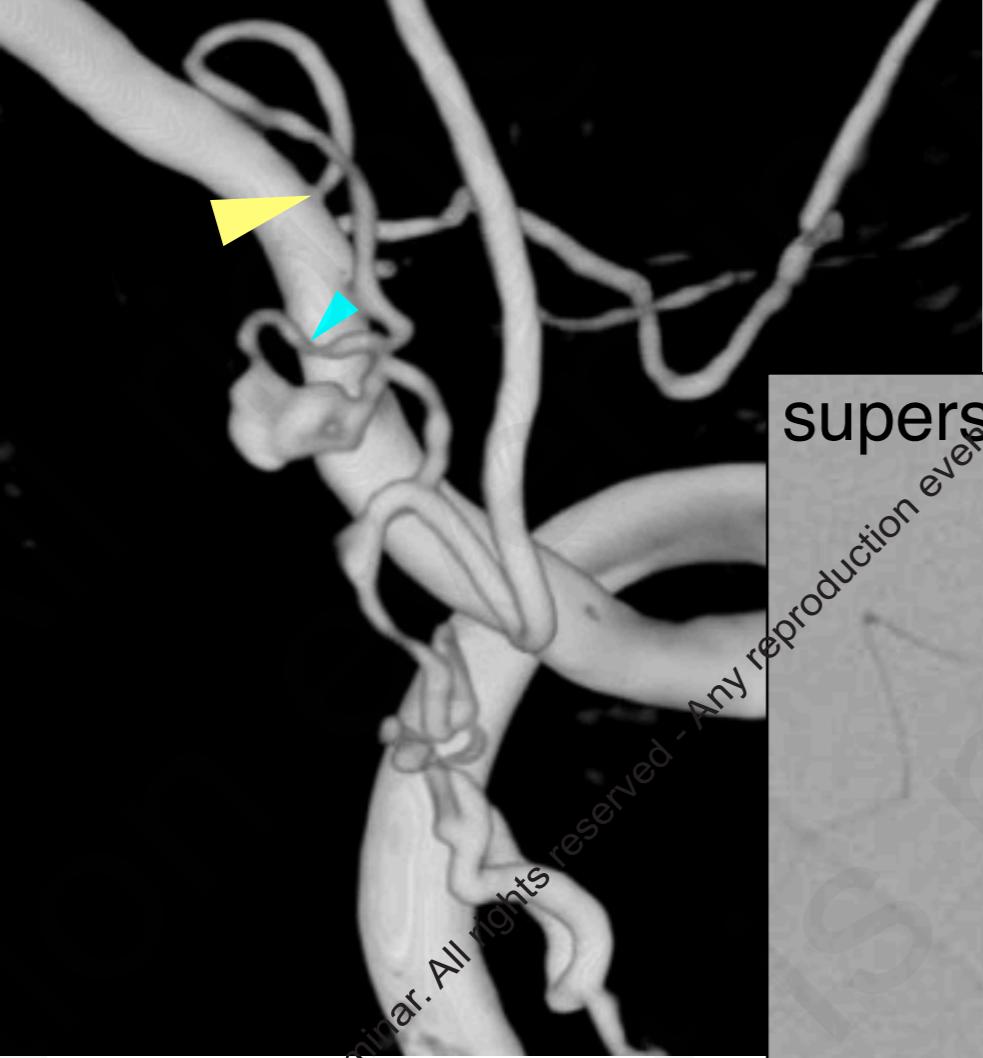
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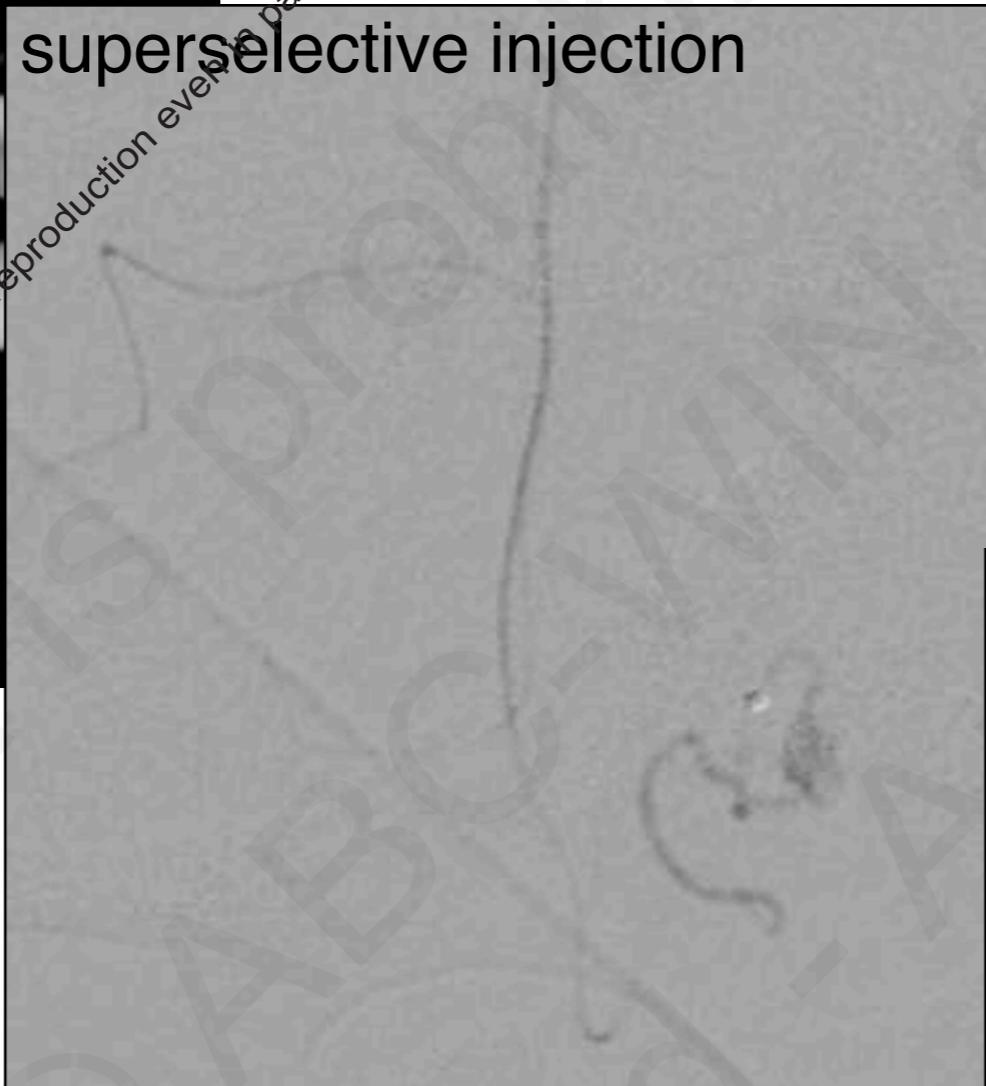
Made In OsiriX



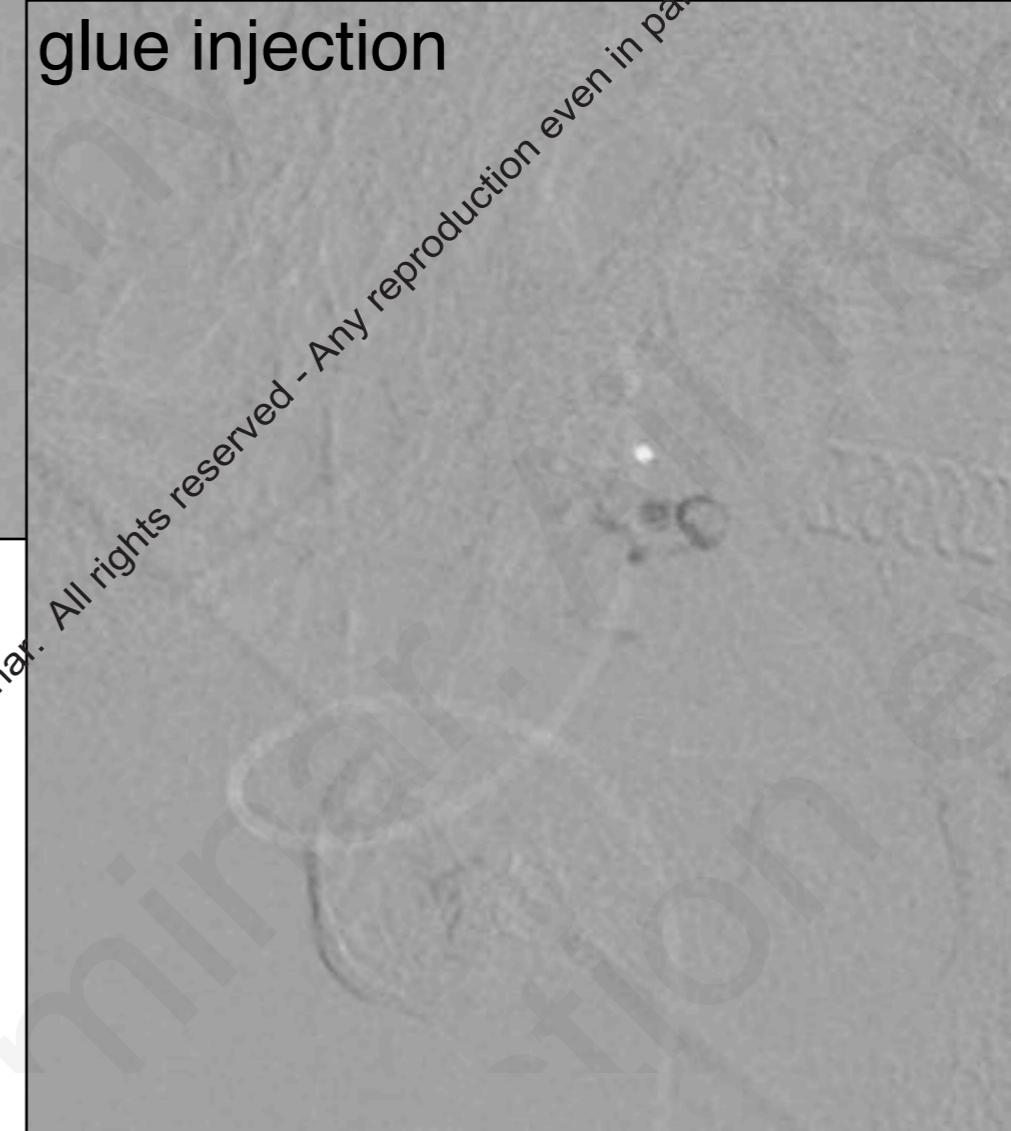
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## superselective injection

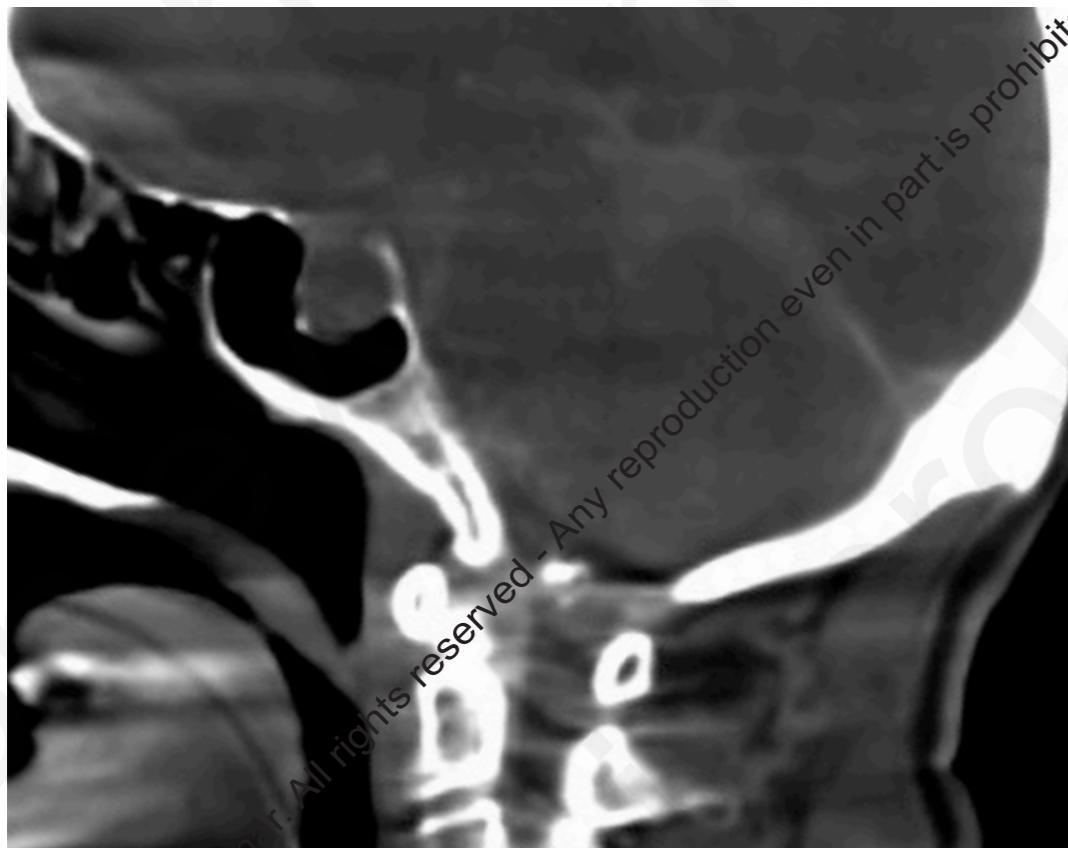


## glue injection



\*2D and 3D images are shown from opposite direction

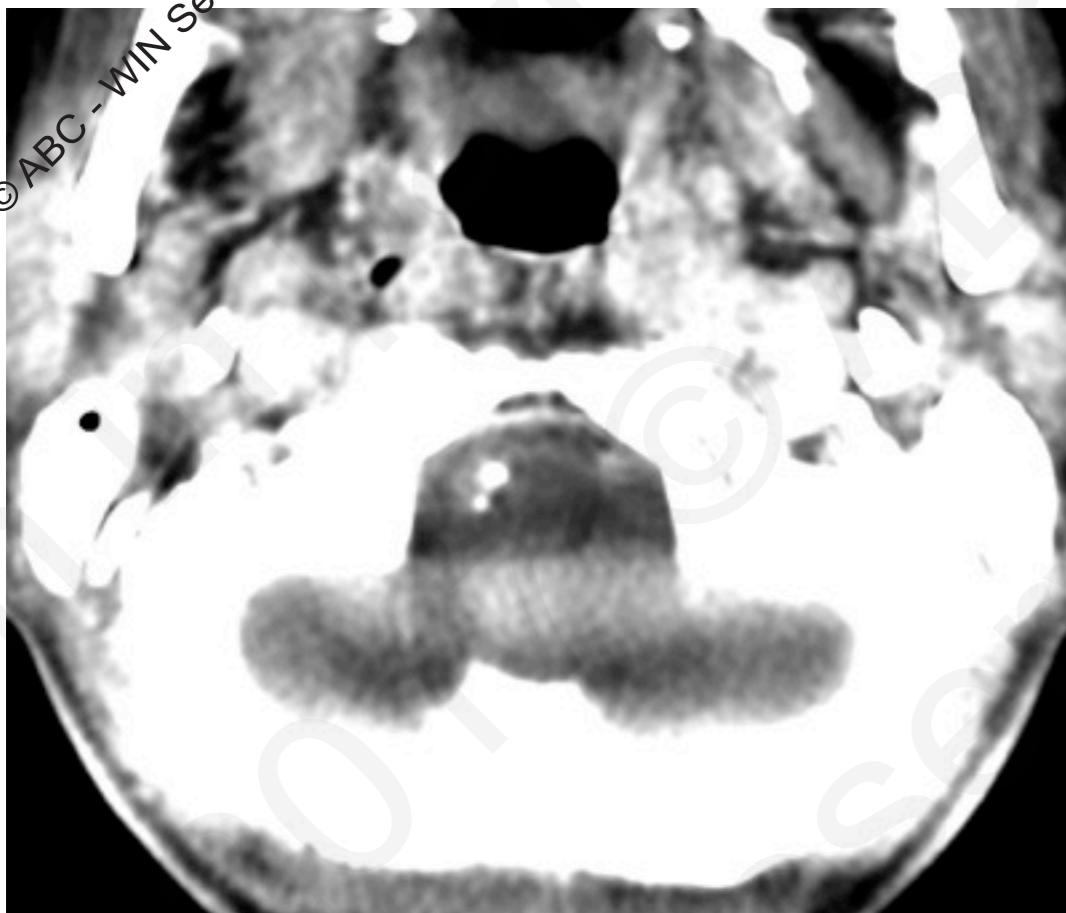
## Post-embo CBCT



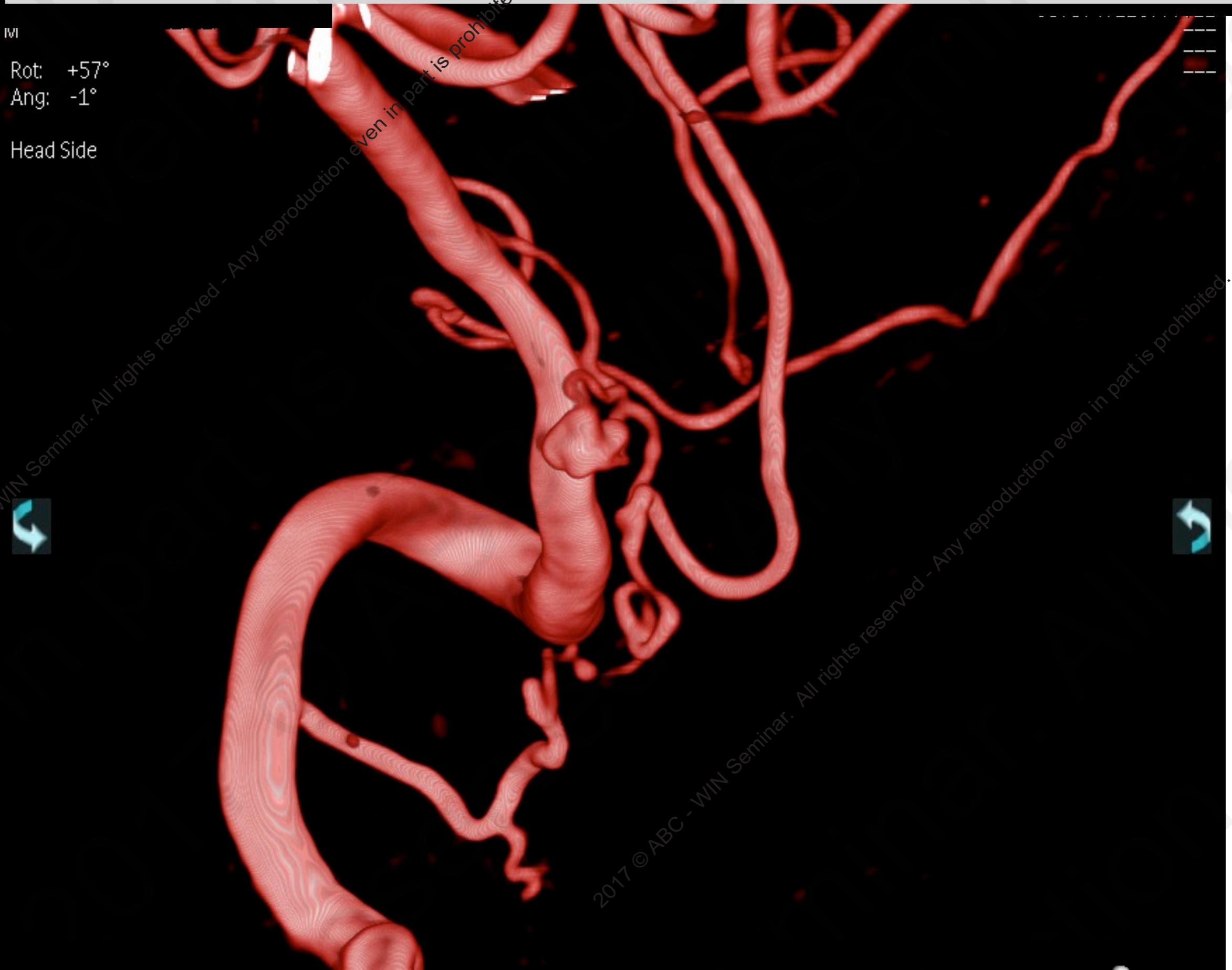
## Post-embo DSA



## DWI MRI



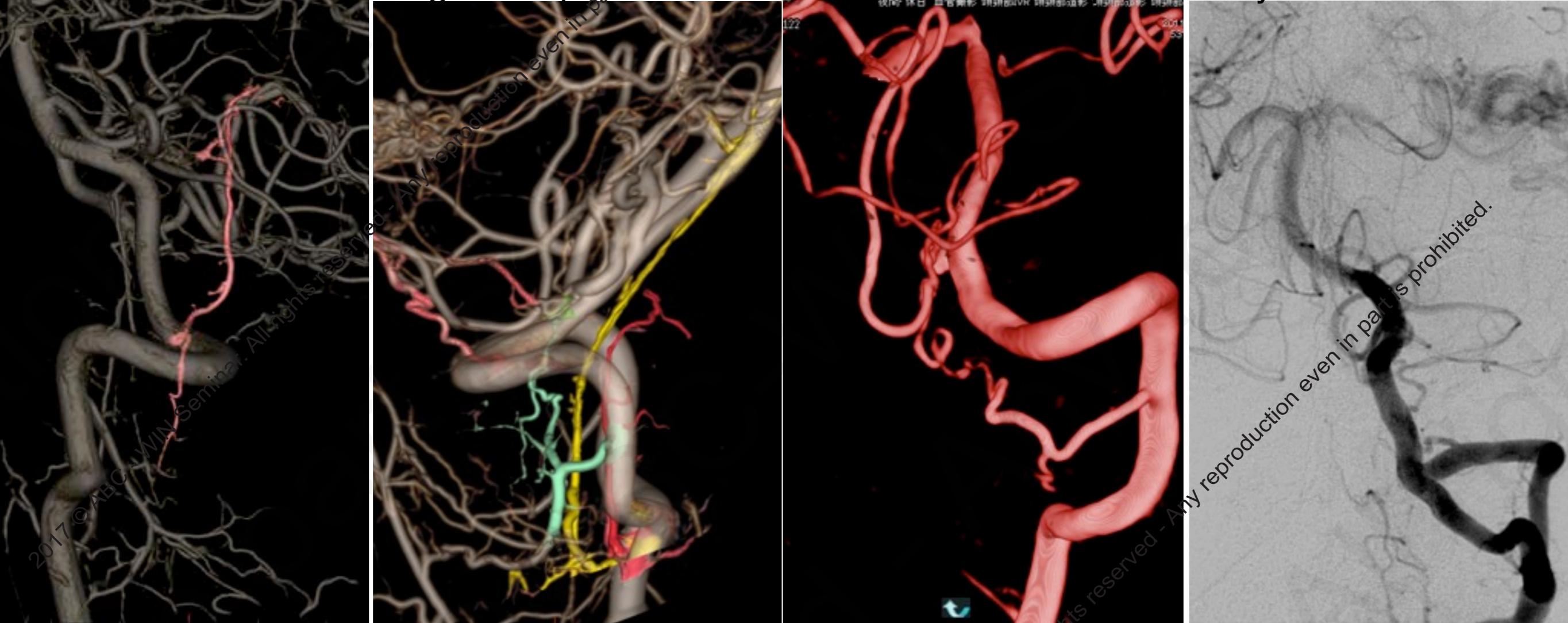
The PICA arises from the lateral spinal artery system and embolizing part of the lateral spinal artery resulted in brain stem infarction.



# The lateral spinal artery system...

...and the PICA

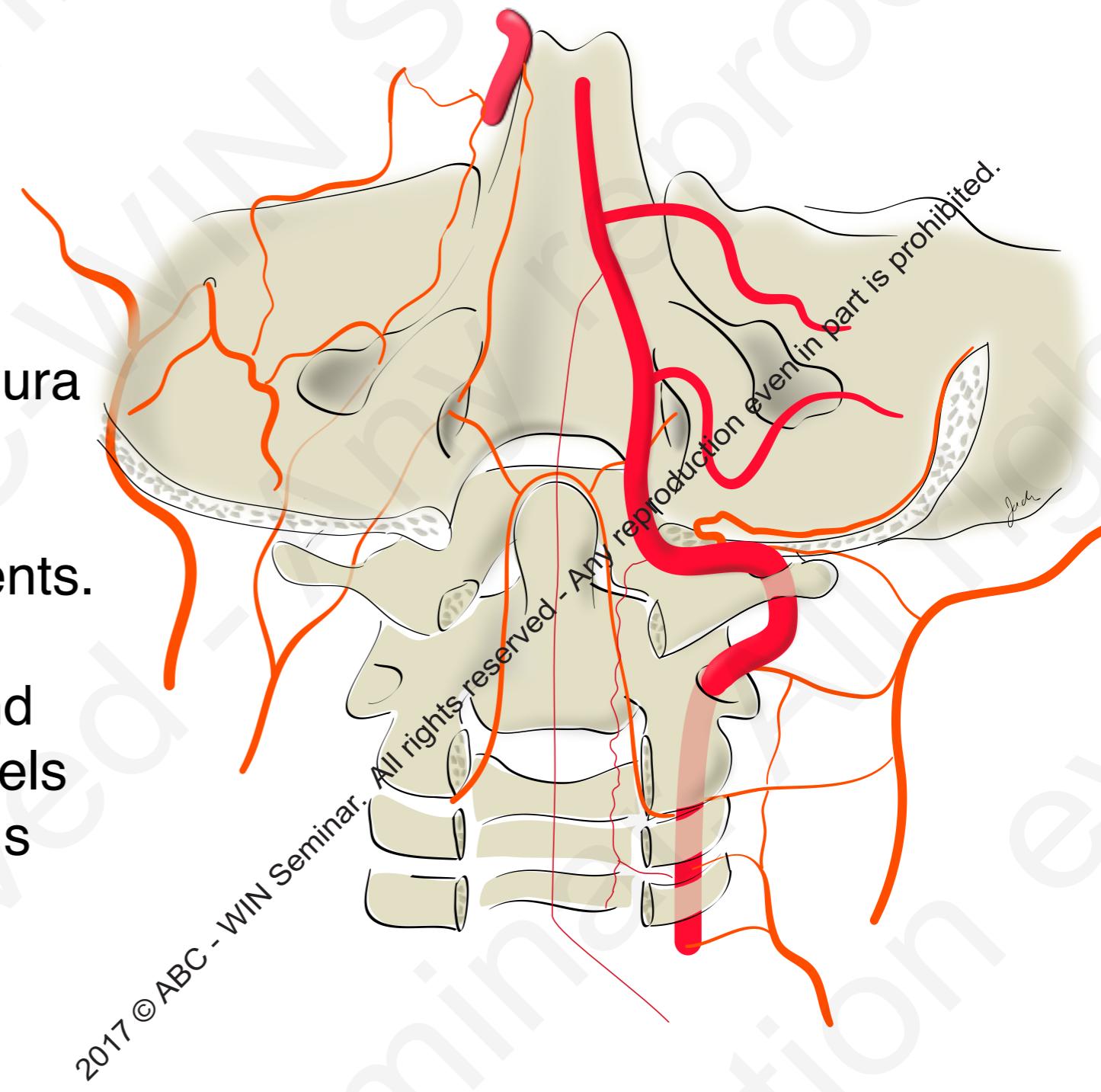
varyations in the origin and perfusion territory of the lateral spinal artery and PICA.



Although a large artery in this area, the PICA is only a part of the pial supply system (but with the perforators) of the posterior fossa. It can arise from the intra/extradural VA or any other segments as a “lateral spinal artery”.

# Summary of the arterial system in the CCJ area

- The arteries in the CCJ area have close relationship and various connections to one another.  
(dural  $\leftrightarrow$  pial system)
- The VA close to the entrance to the dura has a long “transitional” part (as the C1 segment) that can give all types of artery as of any other segments.
- Considering the close relationship and the difficulty of visualizing these vessels on angiogram, one should be cautious when using liquid embolic material around this area.



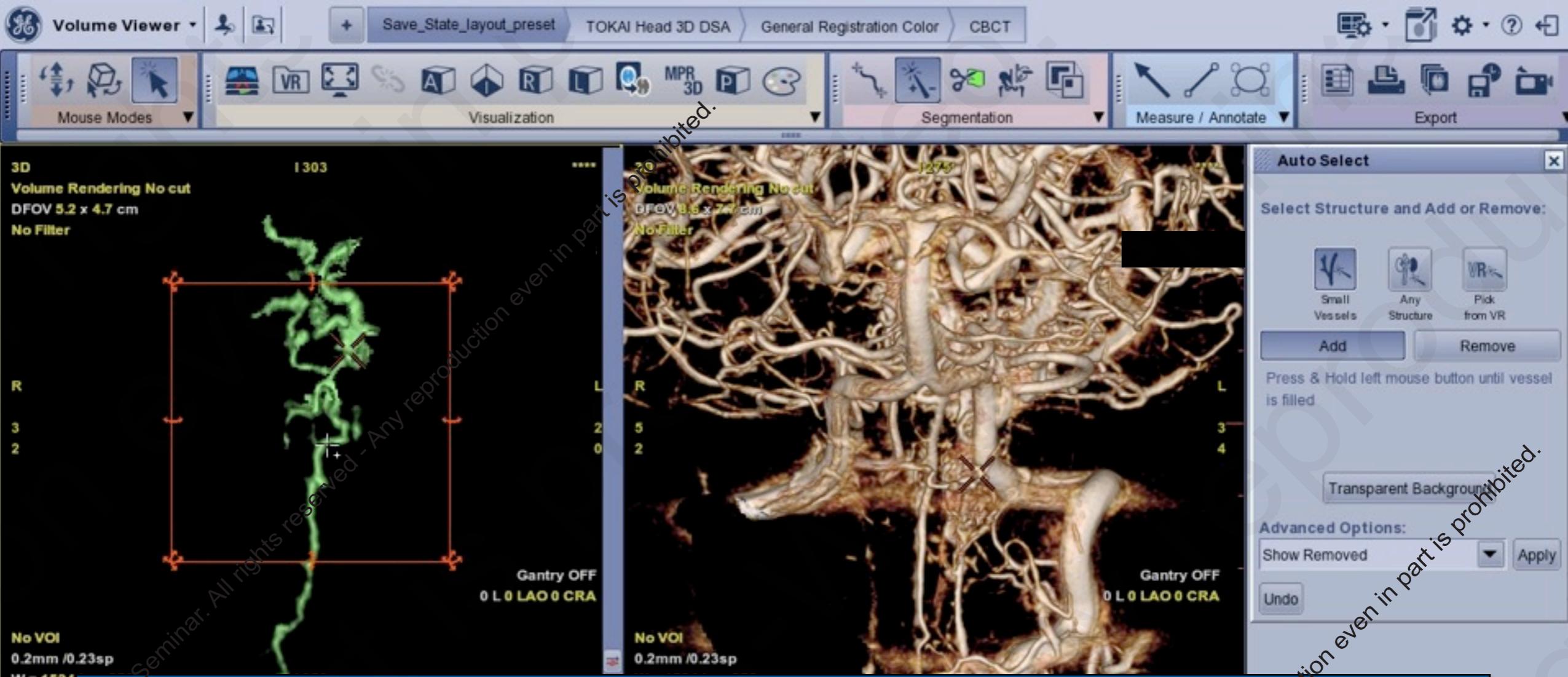
# A word on how we obtain the 3D images

5-second subtracted rotational angiography

VR images and MIP images analysis

coloring and/or extracting and/or  
dilating vessel(s) of interest

*Unless mention otherwise, the region of  
interest will not be directly involved in the  
lesion, to show the normal anatomy and not  
secondarily induced dural branch(es).*



extracting a lateral spinal artery from a rotational DSA on a workstation



