Society of Interventional Radiology- Hereditary hemorrhagic telangiectasia

Trans-catheter embolization

Pulmonary AVMs are typically first identified on CT scans. Interventional radiologists will use trans-catheter embolization to treat these AVMs.

First, a tiny cut is made in the skin near the groin. A needle is then used to gain access to the large vein in the groin. Once the radiologist gains access, a catheter (a thin flexible tube) is inserted, and dye is then injected through the tubing to be able to identify and locate the AVMs. Once the tubing reaches an AVM, coils are positioned through the catheter in order to stop blood flow within the AVM. Multiple AVMs can be treated during a single treatment.

The vast majority of treatments are successful in treating pulmonary AVMs. Occasionally new blood flow to the AVM may require repeat embolization.

A follow-up CT scan should be performed 3-to-6 months following therapy to see if the AVM is getting smaller.