## THE ARUBA TRIAL

#### A Randomised Trial of Unruptured Brain Arteriovenous Malformations

# WHAT IS AN ARTERIOVENOUS MALFORMATION?

An arteriovenous malformation (AVM) is a tangled network of blood vessels that disrupts the usual flow of blood and oxygen in the brain. It creates abnormal connections

between arteries and veins, causing a disturbance in the natural circulation process.



#### THE ARUBA TRIAL

The ARUBA Trial was conducted to determine the risk of death and stroke in patients with Brain AVMs. The study assessed whether medical management (noninvasive treatment and medicine) is superior to interventional therapy (surgery or embolization) in regard to treatment outcomes.



#### **METHODS**

AVM patients age ≥18
years from 39 clinical sites
across numerous countries were
enrolled in this trial. 223 patients had
been enrolled in the trial, with a mean
follow-up of about 33.3 months. Through a
process of randomization, participants were
assigned to either the medical management
group or the interventional therapy group. The
medical management group received
conservative care and AVM monitoring.
The intervention group underwent
invasive treatments (surgery or
embolization) to eliminate or
reduce the AVM.



### THE FUTURE OF AVM RESEARCH

The results of the ARUBA Trial left many unanswered questions. While the trial showed that medical management is safer in terms of preventing stroke and death, it did not explain which patients might still **benefit from interventional therapies**. Further research is necessary to identify specific patient characteristics, AVM characteristics, and risk factors that could help guide the treatment decision approach. The trial failed to address the use of combination therapies, where medical management is paired with less invasive interventions. Since medical management is emphasized as a safer treatment approach, further research can refine treatment protocols, formulate new medications, and help understand how to effectively manage AVM-related symptoms without resorting to invasive interventions. Fundamentally, the trial's outcomes have set the stage for a new era of AVM research, ultimately leading to improved outcomes for patients

with unruptured AVMs.

#### **RESULTS**

The trial began in 2007
and was stopped in early 2013
due to preliminary findings. Data
was collected from each participant.
The findings suggested that medical
management alone is superior to
interventional therapy treatment, as the
risk of stroke, death, and neurological
disability was more than 3 times higher for
participants who underwent interventional
therapy. The trial's results have major
implications for patient care, treatment
decision-making, and the future and
advancement of knowledge in
AVM research.

#### By: Ian Klimov



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