

Supplementary Table 6: Perfusion assessment in cerebral aneurysm surgery

| Ref. No. | Author | Country | Journal | Year | Study design | Patient selection | | Fluoroscopic agent | Dose | Imaging techniques | | | Quantitative measurements | Main endpoints | Imaging accuracy/success rate | Endpoint measures | | Adverse effects | Learning curve | Cost analysis | Other comments | Ref. detail |
|----------|---------------------|-----------------|-------------------------|------|---------------|--------------------|-----------|--------------------|---------------|--------------------|------------------------------------|--|---------------------------|---|---|--|---|-----------------|----------------|---------------|---|---|
| | | | | | | Subject | N (cases) | | | Route | Timing | Imaging system | | | | Clinical impact, changes in intraoperative decision-making | Clinical impact, advantages in postoperative outcomes | | | | | |
| 1 | Raabe | Germany | Neurosurgery | 2003 | Retrospective | Cerebral aneurysms | 14 | ICG | 0.2-0.5 mg/kg | IV | Just before the observation | K-View (Pakson Medical Systems AG, Munich, Germany) & NIR-sensitive digital camcorder Carl Zeiss microscope (Carl Zeiss, Oberkochen, Germany) | NA | Visualization of aneurysms, cerebral arteries | 100% | 21% changes of surgical procedures | NA | None | NA | NA | Compared with postoperative DSA | Raabe A, Beck J, Grubich R, Zimmermann M, Seifert V. Neurosurgery. 2003 Jun;52(1):112-9 |
| 2 | Raabe | Germany | J Neurosurg | 2005 | Prospective | Cerebral aneurysms | 114 | ICG | 25mg | IV | Just before the observation | IC-PULSION (Pulsar Medical Systems AG, Munich, Germany), OPMI Yaris (Carl Zeiss Co., Oberkochen, Germany.) | NA | Visualization of aneurysms, cerebral arteries | 90% | 9% changes of surgical procedures | NA | None | NA | NA | Compared with intra postoperative DSA | Raabe A, Nakaj P, Beck J, Kim J, Hsu FT, Kamenov P, Seifert V, Spetzler RF. J Neurosurg. 2005 Dec;103(6):982-9 |
| 3 | Raabe | Germany | Zentralf Neurochir. | 2005 | Retrospective | Cerebral aneurysms | 20 | ICG | 25mg | IV | Just before the observation | OPMI Pentrio (Carl Zeiss, Oberkochen, Germany) | NA | Visualization of aneurysms, cerebral arteries | 100% | 10% clip correction | NA | None | NA | NA | | Raabe A, Beck J, Seifert V. Zentralf Neurochir. 2005 Feb;60(1):1-6 |
| 4 | Inazu | Japan | Main Invasive Neurosurg | 2008 | Retrospective | Cerebral aneurysms | 13 | ICG | 0.2-0.5 mg/kg | IV | Just before the observation | OPMI Pentrio (Carl Zeiss, Oberkochen, Germany) | NA | Visualization of aneurysms, cerebral arteries | 100% | 23% clip repositioning because of incomplete clipping | NA | None | NA | NA | | Inizu S, Kato Y, Sangi A, Oguri D, Sano H. Main Invasive Neurosurg. 2008 Aug;16(4):199-203 |
| 5 | Ma | China | Clin Neurol Neurosurg | 2009 | Retrospective | Cerebral aneurysms | 45 | ICG | 25mg | IV | Just before the observation | OPMI Pentrio (Carl Zeiss, Oberkochen, Germany) | NA | Visualization of aneurysms, cerebral arteries | 97.7% | 18% changes of surgical procedures | 1 case (2.4%) MCO | None | NA | NA | Compared with postoperative DSA | Ma CY, Shi JX, Wang HD, Hang CH, Cheng HL, Wu W. Clin Neurol Neurosurg. 2009 Dec;111(10):840-6 |
| 6 | Li | China | Neuro India | 2009 | Retrospective | Cerebral aneurysms | 120 | ICG | 25mg | IV | Just before the observation | Leica M525 OH4 (Leica Microsystems, Switzerland) | NA | Visualization of aneurysms, cerebral arteries | 92.6% | 7.5% clip repositioning/adjustment | 2.5% residual aneurysms | None | NA | NA | Compared with postoperative DSA | Li J, Lan Z, He M, You C. Neurol India. 2009 Jul-Aug;57(4):453-9 |
| 7 | Dahl | Finland | Surg Neurol | 2009 | Retrospective | Cerebral aneurysms | 190 | ICG | 0.2-0.5 mg/kg | IV | Just before the observation | OPMI Pentrio (Carl Zeiss, Oberkochen, Germany) | NA | Visualization of aneurysms, cerebral arteries | 88% | NA | 6% neck remnant, 6% branch occlusion | None | NA | NA | Compared with postoperative DSA, CTA | Dahl R, Laakso A, Niemelä J, Pöytä M, Zuo J. Neurosurg. 2009 May;71(5):543-50 |
| 8 | Fischer | Germany | Acta Neurochir (Wien) | 2010 | Retrospective | Cerebral aneurysms | 43 | ICG | 0.5 mg/kg | IV | Just before the observation | OPMI Pentrio, The Carl Zeiss Co., Oberkochen, Germany | NA | Visualization of aneurysms, cerebral arteries | 84% (overall) | NA | NA | None | NA | NA | Compared with postoperative DSA | Fischer G, Stadler A, Oertel JM. Acta Neurochir (Wien). 2010 Sep;152(9):1519-25 |
| 9 | Kharana | Australia | Br J Neurosurg | 2010 | Retrospective | Cerebral aneurysms | 27 | ICG | 0.15 mg/kg | IV | Just before the observation | Leica M525 OH4 & near-infrared camera FI 800 (Leica Microsystems, Switzerland), Pentrio (Carl Zeiss, Oberkochen, Germany), Leica OH4 (Leica Microsystems, Switzerland) | NA | Visualization of aneurysms and cerebral arteries, surgical decision-making | 74% | 26% changes of surgical procedures (2% false reassurance) | NA | None | NA | NA | | Kharana VG, Seow K, Duke D. Br J Neurosurg. 2010 Apr;24(2):163-72 |
| 10 | Wang | China | Neurosurg Rev | 2010 | Retrospective | Cerebral aneurysms | 129 | ICG | 25mg | IV | Just before the observation | OPMI Pentrio (Carl Zeiss, Oberkochen, Germany), Leica OH4 (Leica Microsystems, Switzerland) | NA | Visualization of aneurysms and cerebral arteries, surgical decision-making | 99% | 2% changes of surgical procedures | 1 branch occlusion, No neck remnant | None | NA | NA | Compared with intraoperative DSA | Wang S, Liu L, Zhao Y, Zhang D, Yang M, Zhao J. Neurosurg Rev. 2010 Apr;34(2):209-15 |
| 11 | Jing | China | J Clin Neurosci | 2010 | Retrospective | Cerebral aneurysms | 42 | ICG | 25mg | IV | 2-5 minutes before the observation | Leica OH4 FL800 fluorescence system, Weibel, Germany | NA | Visualization of aneurysms, cerebral arteries | 100% | NA | NA | None | NA | NA | Compared with postoperative DSA, CTA, MRA | Jing Z, Ou S, Bai Y, Tang Z, Wang Y, J. Clin Neurosci. 2010 Jun;17(1):26-8 |
| 12 | Murai | Japan | World Neurosurg | 2011 | Retrospective | Cerebral aneurysms | 5 | ICG | 0.2-0.5 mg/kg | IV | Just before the observation | OPMI Pentrio (STRABE D 800 / Carl Zeiss, NA Oberkochen, Germany) surgical microscope (Carl Zeiss, Oberkochen, Germany) | Fluorescence intensity | Visualization of cerebral arteries | 100% | NA | NA | None | NA | NA | | Murai Y, Adachi K, Takagi R, Kobayashi K, Matsuo F, Teramoto A. World Neurosurg. 2011 Nov;76(5):477-477.e10. |
| 13 | Oda | Japan | J Clin Neurosci | 2011 | Retrospective | Cerebral aneurysms | 39 | ICG | 0.2-0.5 mg/kg | IV | Just before the observation | OPMI Pentrio (Carl Zeiss, Oberkochen, Germany) surgical microscope & FLOW 800 (Carl Zeiss, Oberkochen, Germany) | Fluorescence intensity | Visualization of aneurysms, cerebral arteries | 100% | 8% clip repositioning | NA | None | NA | NA | Compared with postoperative CTA | Oda J, Kato Y, Chen SF, Sudojiya P, Watanabe T, Imizu S, Oguri D, Sano H, Hase Y. J Clin Neurosci. 2011 Aug;18(8):1097-100 |
| 14 | Chen | Japan | Surg Neurol Int | 2011 | Retrospective | Cerebral aneurysms | 45 | ICG | 12.5 mg | IV | Just before the observation | OPMI Pentrio, The Carl Zeiss Co., Oberkochen, Germany) | Fluorescence intensity | Visualization of aneurysms, cerebral arteries | 100% | 8% clip repositioning | No branch stenosis or neck remnant | None | NA | NA | Compared with postoperative CTA | Chen SF, Kato Y, Oda J, Kumar A, Watanabe T, Imizu S, Oguri D, Sano H, Hase Y. Surg Neurol Int. 2011 Mar 31;2:42 |
| 15 | Gruber | Austria | Neurosurgery | 2011 | Prospective | Cerebral aneurysms | 104 | ICG | 2.5-25 mg | IV | Just before the observation | Pentrio, The Carl Zeiss Co., Oberkochen, Germany) Leica M720-FL800, Leica Microsystems GmbH, Wehler, Germany) | NA | Visualization of aneurysms and cerebral arteries, surgical decision-making | 97.5% | 24.4% clip repositioning | NA | NA | NA | NA | Compared with intraoperative DSA | Gruber A, Dierck C, Staudhardt H, Hevinski G, Knosp E. Neurosurgery. 2011 Mar;69(3):657-73 |
| 16 | Esposito | The Netherlands | Neurosurgery | 2012 | Retrospective | Cerebral aneurysms | 7 | ICG | 25mg | IV | Just before the observation | OPMI Pentrio (Carl Zeiss, Oberkochen, Germany) | NA | Identification of cerebral recipient vessels to perform selective-targeted EC-BC bypass | 100% | NA | NA | None | NA | NA | Temporary clip occlusion | Esposito G, Durand A, Van Doornaal T, Regl L. Neurosurgery. 2012 Dec;71(2 Suppl Operative):e274-4 |
| 17 | Schubert | Austria | Neurosurgery | 2012 | Retrospective | Cerebral aneurysms | 11 | ICG | 0.2-0.5 mg/kg | IV | Just before the observation | OPMI Pentrio 900, FLOW 800, (Carl Zeiss, Oberkochen, Germany) | Fluorescence intensity | Perfusion changes early after SAH | The velocity of signal change in SAAI patients was significantly lower in all 3 compartments (P < .001, P < .01, P < .001, respectively), as was the peak fluorescence intensity (P < .001) | NA | NA | None | NA | NA | Cortical perfusion study | Schubert GA, Seif-Rosenblum M, Oertel M, Czabanka M, Schöffler KM, Thomé C. Neurosurgery. 2012 Dec;71(2 Suppl Operative):e266-7 |
| 18 | Schnell | Germany | Acta Neurochir (Wien) | 2012 | Prospective | Cerebral aneurysms | 10 | ICG | 0.2-0.5 mg/kg | IV | Just before the observation | OPMI Pentrio (Carl Zeiss, Oberkochen, Germany) | NA | Visualization of cerebral arteries | 90% | NA | NA | None | NA | NA | Compared with intraoperative CTA | Schnell O, Morhard D, Holmannop F, Fritzer M, Reiser M, Tom AC, Schellack C. Acta Neurochir (Wien). 2012 Oct;154(10):1861-8. |
| 19 | Nishiyama | Japan | J Neurosurg | 2012 | Retrospective | Cerebral aneurysms | 3 | ICG | 25mg | IV | Just before the observation | light source (Visera CLV, Salfino Olympus) endoscopes (A1994A, A1994L, Olympus) video processor (Visera OTV, STPro, Olympus) | NA | Visualization of aneurysms, cerebral arteries | 100% | NA | NA | None | NA | NA | Endoscopic system | Nishiyama Y, Kinouchi H, Saitohsaka N, Kato T, Kanemaru K, Yoshikawa H, Horikoshi T. J Neurosurg. 2012 Aug;117(2):302-8 |
| 20 | Rodriguez-Hernandez | US | Neurosurgery | 2012 | Retrospective | Cerebral aneurysms | 3 | ICG | NA | IV | NA | NA | NA | Visualization of cerebral arteries | 100% | NA | NA | None | NA | NA | | Rodriguez-Hernandez A, Laviton MT. Neurosurgery. 2012 Jun;70(2 Suppl Operative):200-20 |
| 21 | Gilzer | US | Surg Neurol Int | 2013 | Retrospective | Cerebral aneurysms | 2 | ICG | NA | IV | NA | NA | NA | Visualization of arterial perfusion after temporary clipping | 100% | NA | NA | NA | NA | NA | Compared with postoperative angiography | Gilzer H, Attar V, Cilia U, Hauer A, Barkas MK. Surg Neurol Int. 2013 Sep 25;4:122 |

Supplementary Table 6: Perfusion assessment in cerebral aneurysm surgery

| Ref. No. | Author | Country | Journal | Year | Study design | Subject | N (cases) | Fluorogenic agent | Dose | Imaging techniques | Route | Timing | Imaging system | Quantitative measurements | Main endpoints | Imaging accuracy/success rate | Endpoint measures | Clinical impact, changes in intraoperative decision-making | Clinical impact, advantages in postoperative outcomes | Adverse effects | Learning curve | Cost analysis | Other comments | Ref. detail | | |
|----------|------------|-----------|----------------------------------|------|---------------|--------------------|--------------------|-------------------|---------------------|--------------------|-----------------------------|--------|---|---------------------------------|--|--|--|---|---|-----------------|----------------|--|--|---|---|---|
| 22 | Ozgray | US | Clin Neurol Neurosurg | 2013 | Retrospective | Cerebral aneurysms | 109 | ICG | 0.2-0.5 mg/kg | IV | Just before the observation | | M720-F1800 (Leica Microsystems GmbH, Wetzlar, Germany) | NA | Visualization of vessel patency and aneurysm obliteration | 93.5% (4.5% false negative, 0.9% false positive) | NA | NA | None | NA | NA | Compared with intraoperative pounce & postoperative DSA | Ozgray E, Altare F, Patel N, Haggott C, Borkan M, Neumann D, Nakagawa MK, Cho Neard Neurosurg. 2013 Jul;115(7):870-8. | | | |
| 23 | Son | Korea | J Cerebrovasc Endovasc Neurosurg | 2013 | Retrospective | Cerebral aneurysms | 16 | ICG | 25mg | IV | Just before the observation | | OPMI® Penetro™, The Carl Zeiss Co., Oberkochen, Germany; GenPayer (Ver. 2), J. Sk. Gretech Corp., Seoul, Korea; Inmagi (Ver. 1.2.2); http://rah.info.nih.gov/j/ ; NIH, USA | Fluorescence intensity | Feasibility | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | Son YJ, Kim JE, Park SH, Lee SH, Chung YS, Yang HJ, J Cerebrovasc Endovasc Neurosurg. 2013 Jun;15(2):76-84. |
| 24 | Washington | US | J Neurosurg | 2011 | Retrospective | Cerebral aneurysms | 49 | ICG | 25 mg | IV | Just before the observation | | OPMI Penetro (Carl Zeiss, Oberkochen, Germany) or Leica Fluorescence Module (Leica Microsystems, Wetzlar, Germany) | NA | Identification of aneurysmal remnant or unsecured vessel stenosis or occlusion and incidence of clip-adjustment post-IA clip | 75.50% | Clip adjustment rate was 4.1%; disconnection rate requiring clip adjustment was 14.3% | NA | NA | NA | NA | IA should remain the gold standard, but can be supplemented by ICG-VA | Washington CW, Zigel GI, Chotiner MR, Doolittle CP, Resh KM, Meenan CJ, Chou DT, Thacy RJ, J Neurosurg. 2011 Feb;114(2):429-7. doi: 10.3171/2010.10.PNS.11818. Epub 2012 Nov 16. | | | |
| 25 | Sharma | US | World Neurosurg | 2014 | Retrospective | Cerebral aneurysms | 112 | ICG | 25mg | IV | Just before the observation | | OPMI® Penetro, flow 800, Carl Zeiss | NA | Completeness of aneurysm occlusion and parent and branching vessel compromise, clip repositioning rate | 96% | 8% clip repositioning | NA | NA | NA | NA | NA | Compared with postoperative DSA | Sharma M, Ambekar S, Ahmed O, Nisam M, Sharma A, Nanda A, Gadhikar B, World Neurosurg. 2014 Nov;32(5):e607-13. | | |
| 26 | Caplan | US | Neurosurgery | 2014 | Retrospective | Cerebral aneurysms | 37 (+60 control) | ICG | 12.5 mg | IV | Just before the observation | | OPMI® Penetro (Carl Zeiss, Oberkochen, Germany) | NA | Visualization of aneurysms (additional benefit of ICG-IV to monitor IA) | 89.2% (4 false negatives requiring clip adjustment) | NA | NA | NA | NA | NA | NA | NA | Compared with intraoperative DSA | Caplan JM, Sainey E, Tang W, Babazon MG, Cady CP, Coe AL, Tamargo RJ, Huang J Neurosurgery. 2014 Oct;75(4):417-43. | |
| 27 | Hardisty | US | J Clin Neurosci | 2014 | Retrospective | Cerebral aneurysms | 100 | ICG | NA | IV | NA | | NA | NA | Clip repositioning rate, operative outcomes, cost | NA | 4.4% clip repositioning (6% by DSA only) | No differences in the rate of postoperative stroke or rate of false-negative studies | None | NA | NA | The per-patient cost of intraoperative imaging within the DSA era was significantly higher than in the ICG era | Hardisty DA, Thind H, Zabramski JM, Spector RF, Nakaj P, J Clin Neurosci. 2014 Aug;21(8):1377-82. doi: 10.1016/j.jocn.2014.02.001. | | | |
| 28 | Murai | Japan | Clin Neurol Neurosurg | 2014 | Retrospective | Cerebral aneurysms | 13 | ICG | 0.3 mg/kg | IV | Just before the observation | | Carl Zeiss Surgical Microscope OPMI Penetro/SPRABE D 800 (Carl Zeiss, Oberkochen, Germany) | NA | Visualization of cerebral arteries (relationship between the distal M1 and proximal M2) | 84.6% | NA | NA | NA | NA | NA | NA | NA | Temporary parent artery clip occlusion | Murai Y, Mizumai T, Koketsu K, Taniyama K, Kobayashi S, Umeda K, Teramoto A, Morita A, Clin Neurol Neurosurg. 2014 Apr;19:70-4. | |
| 29 | Roesler | Germany | Neurosurg Focus | 2014 | Retrospective | Cerebral aneurysms | 232 | ICG | 25mg | IV | Just before the observation | | Carl Zeiss Surgical Microscope OPMI Penetro, INFRARED 800 (Carl Zeiss, Oberkochen, Germany) | NA | Visualization of aneurysms, clip repositioning rate | 90.1% (9.1% false negative for neck remnant) | 9% clip repositioning | Postoperative coil embolization for neck remnant was needed in 1 patient | NA | NA | NA | NA | Compared with postoperative DSA | Roesler K, Kraivagna M, Dörfler A, Buchfelder M, Ganslandt O, Neurosurg Focus. 2014 Feb;36(2):e7. | | |
| 30 | DeLu Pappa | Italy | Clin Neurol Neurosurg | 2014 | Retrospective | Cerebral aneurysms | 26 | ICG | 0.2-0.5 mg/kg | IV | Just before the observation | | OPMI® Penetro (Carl Zeiss, Oberkochen, Germany) | NA | Visualization of aneurysms, clip repositioning rate | 96.2% | 9% clip repositioning by ICG-VA | 1 postoperative neck remnant | None | NA | NA | NA | Compared with postoperative DSA/CT | DeLu Pappa A, Volpi F, Giuffrè G, Rizzoni O, Tomasi L, Sestini R, Clin Neurol Neurosurg. 2014 Jan;16:35-40. | | |
| 31 | Lai | Australia | J Clin Neurosci | 2014 | Retrospective | Cerebral aneurysms | 91 | ICG | 25mg | IV | Just before the observation | | OPMI® Penetro, flow 800 (Carl Zeiss, Oberkochen, Germany) Leica OGH (Leica Microsystems, Wetzlar, Germany) | NA | Visualization of aneurysms, clip repositioning rate | 94% (4% no benefit and 2% misleading) | 6% critical changes of intraoperative strategies | 3.3% postoperative ischemic complications (vs. 7.7% in historical control, P = 0.001) | 1.1% (transient decrease of O2 saturation) | NA | NA | NA | Compared with historical control without a use of ICG/VA | Lai LT, Morgan MK, J Clin Neurosci. 2014 Jun;21(1):67-72. doi: 10.1016/j.jocn.2014.02.001. | | |
| 32 | Liu | China | Turk Neurosurg | 2014 | Retrospective | Cerebral aneurysms | 65 | ICG | 25mg | IV | Just before the observation | | OPMI® Penetro, flow 800 (Carl Zeiss, Oberkochen, Germany) | NA | Visualization of aneurysms, cerebral arteries | 100% | NA | NA | NA | None | NA | NA | Compared with postoperative imaging | Liu J, Li X, Sun S, Wang Y, Zang P, Turk Neurosurg. 2014;24(3):139-22. | | |
| 33 | Hardisty | US | J Clin Neurosci | 2014 | Retrospective | Cerebral aneurysms | 100 (+100 control) | ICG | NA | IV | NA | | NA | NA | Rates of preoperative stroke, postoperative aneurysm residuals, and parent vessel stenosis | 99% (rate of 1% of false negatives) | Clip repositioning rates, rates of preoperative stroke, and rates of false negative were similar between patients who received DSA and patients who received ICG | NA | NA | NA | NA | DSA cost much more than ICG-VA is typically safe and effective | Hardisty DA, Thind H, Zabramski JM, Spector RF, Nakaj P, J Clin Neurosci. 2014 Aug;21(8):1377-82. doi: 10.1016/j.jocn.2014.02.001. | | | |
| 34 | Roesler | Germany | Neurosurg Focus | 2014 | Retrospective | Cerebral aneurysms | 236 | ICG | 25 mg | IV | NA | | OPMI Penetro (Carl Zeiss, Oberkochen, Germany) | NA | Quality the efficacy and advantages of ICG-VA in aneurysm surgery | Around 90% | 9% clip repositioning, 4.5% required additional clip for residual perfusion; overall 15% intraoperative clip modification rate | 9.1% neck remnants were found postoperatively | NA | NA | NA | NA | Digital subtraction angiography is essential to postoperative assessment | Roesler K, Kraivagna M, Dörfler A, Buchfelder M, Ganslandt O, Neurosurg Focus. 2014 Feb;36(2):e7. doi: 10.3171/2013.1.FOCUS.1475. | | |
| 35 | Sato | Japan | Acta Neurochir (Wien) | 2015 | Retrospective | Cerebral aneurysms | 10 | ICG | 0.25mg/kg | IV | NA | | OPMI® Penetro 900 (Carl Zeiss, Oberkochen, Germany) | NA | Visualization of aneurysm and vessels | 100% | 50% additional procedures | NA | None | NA | NA | NA | NA | NA | Sato T, Suzuki K, Sakuma J, Takata N, Kojima Y, Sugano T, Saito K, Acta Neurochir (Wien). 2015 Sep;157(9):1295-301. | |
| 36 | Pahl | Brazil | Acta Neurospina | 2015 | Retrospective | Cerebral aneurysms | 56 | ICG | 25mg | IV | Just before the observation | | Carl Zeiss Surgical Microscope OPMI Penetro, IR 800 (Carl Zeiss, Oberkochen, Germany) | NA | Visualization of aneurysm and vessels, clip adjustment rates | 96.7% (1.3% false negative occlusion rate) | 3.2% clip repositioning | 3.3% (2 cases) false negative occlusion rate. | None | NA | NA | NA | Compared with direct puncture | Pahl FH, Oliveira MF, Brock RS, Lucio HE, Acta Neurospina. 2015 Jul;7(3):67-10. | | |
| 37 | Doss | US | Interv Neurol | 2015 | Retrospective | Cerebral aneurysms | 47 | ICG | NA | IV | NA | | NA | NA | Visualization of aneurysms, adequacy of the clipping | 84.3% (9 false negative for neck remnant) | NA | NA | NA | NA | NA | Compared with postoperative DSA | Doss YF, Gray N, Humphries W, Hsu F, Archer A, Elvick L, Interv Neurol. 2015 Jul;3(3-4):129-34. | | | |
| 38 | Lane | US | J Neurosurg | 2015 | Prospective | Cerebral aneurysms | 22 | ICG, FL | FL: 75 mg, ICG 25mg | IV | Just before the observation | | Carl Zeiss OPMI Penetro 900 (Carl Zeiss, Oberkochen, Germany) | NA | Aneurysm exclusion and the patency of adjacent arteries | FL-VA provided superior detail of small arteries than ICG-VA | NA | NA | NA | NA | NA | NA | NA | Compared with postoperative DSA | Lane B, Bhatnagar BN, Cohen-Gadol AA, J Neurosurg. 2015 Mar;123(3):618-26. | |
| 39 | Murai | Japan | Neurol Med Chir (Tokyo) | 2015 | Retrospective | Cerebral aneurysms | 3 | ICG | 0.3mg/kg | IV | Just before the observation | | Fluorescence intensity | Fluorescence intensity | Visualization of aneurysms, the distal parent artery | 100% | NA | NA | NA | None | NA | NA | NA | Temporary clip occlusion | Murai Y, Mizumai T, Koketsu K, Taniyama K, Kobayashi S, Morita A, Teramoto A, Neuro Med Chir (Tokyo). 2015;55(8):e83-8. | |
| 40 | Murai | Japan | Neurosurg Rev | 2016 | Retrospective | Cerebral aneurysms | 13 | ICG | 0.2-0.5 mg/kg | IV | Just before the observation | | FRW900 & OPMI Penetro 900 (Carl Zeiss, Oberkochen, Germany) | Time-intensity curves (TI-CURV) | Detection of cerebral blood flow direction | 100% | NA | NA | NA | None | NA | NA | NA | NA | Murai Y, Nakagawa S, Manano F, Shikama K, Teramoto A, Morita A, Neurosurg Rev. 2016 Oct;39(4):e85-90. | |
| 41 | Li | China | Med Sci Monit | 2016 | Retrospective | Cerebral aneurysms | 28 | ICG | 25mg | IV | Just before the observation | | Zeiss fluorescence microscope | NA | Visualization of aneurysm and vessels | 100% | 10.7% clip repositioning | NA | NA | NA | NA | NA | NA | NA | Li Z, Zhang G, Huang G, Wang Z, Yin H, Liu L, J. Adv. Med. Sci. Monit. 2016 Feb;4:2237-9. | |

Supplementary Table 6: Perfusion assessment in cerebral aneurysm surgery

| Ref. No. | Author | Country | Journal | Year | Study design | Patient selection | | Fluorogenic agent | Dose | Imaging techniques | | | Endpoint measures | | | | Adverse effects | Learning curve | Cost analysis | Other comments | Ref. detail | |
|----------|-------------|----------------|-----------------------------|------|---------------|--------------------|--------------------|-------------------|-------------------------------------|--------------------|-----------------------------|--|-------------------------------|---|--|---|--|---|---------------|----------------|--|---|
| | | | | | | Subject | N (cases) | | | Imaging system | Quantitative measurements | Main endpoints | Imaging accuracy/success rate | Clinical impact, changes in intraoperative decision-making | Clinical impact, advantages in postoperative outcomes | | | | | | | |
| 42 | Kakucs | Romania | World Neurosurg | 2017 | Retrospective | Cerebral aneurysms | 10 | FL (Fluorescein) | 500mg | IV | Just before the observation | OPMI Pentax 900 (Carl Zeiss, Oberkochen, Germany) | NA | Patency of the arteries adjacent to the aneurysm. | 100% | NA | NA | Transient yellowing of the skin in all patients | NA | NA | Kakucs C, Florian IA, Ungreanu G, Florian BS. World Neurosurg. 2017 Sep;10(4):e1-11. | |
| 43 | Kumar | India | J Neurosci Rural Pract | 2017 | Prospective | Cerebral aneurysms | 30 | ICG | 0.2-0.5 mg/kg | IV | Just before the observation | NA | NA | Occlusion of aneurysms | Sensitivity 91.7%, 6.5% false negative occlusion rate | 25.8% clip adjustment | NA | None | NA | NA | Compared with postoperative DSA. Kumar V, Jagota A, Singh D, Srivastava AK, Tandon MS. J Neurosci Rural Pract. 2017 Jul-Sep;9(3):342-345. | |
| 44 | Matano | Japan | Oper Neurosurg (Hagerstown) | 2017 | Prospective | Cerebral aneurysms | 18 | ICG, FL | FL 250 mg, ICG 12.5mg | IV | Just before the observation | Carl Zeiss OPMI Pentax 900 (Carl Zeiss, Oberkochen, Germany) and Flow 800. Fluorescence intensity (Himmatsu Fluorescence Co., Shizuoka, Japan) endoscope (LAP-2C, Korea Electro-technology Research Institute, Seoul, Korea) | NA | Fluorescence intensity | Visualizability of the cerebral arteries | Thick-walled artery, such as parent artery (P = .0017) and STA1 (P = .018). was more significantly visualized by ICG-VAG than FL-VAG. | NA | NA | None | NA | NA | Compared with Fluorescein videography. Matano F, Mizunari T, Mura Y, Kabata A, Fujiki Y, Kobayashi S, Morita A. Oper Neurosurg (Hagerstown). 2017 Jun 1;15(5):361-366. |
| 45 | Cho | Korea | World Neurosurg | 2017 | Retrospective | Cerebral aneurysms | 10 | ICG | 0.3-0.4 mg/kg | IV | Just before the observation | OPMI Pentax 900 (Carl Zeiss, Oberkochen, Germany) and FL800. Leica Microsystems, Wetzlar, Germany) | NA | Visualizability of the cerebral arteries | 100% visualization by endoscopic system | 40% clip adjustment | Frontal palsy (1) and anosmia (1) | None | NA | NA | Comparison between microscope system and endoscopic system. Cho WS, Kim JH, Kang HS, Ha EJ, Jung M, Lee C, Shin HJ, Kang U. World Neurosurg. 2017 Apr;100:316-324. | |
| 46 | Feketi | Japan | World Neurosurg | 2017 | Retrospective | Cerebral aneurysms | 5 | ICG | 12.5 mg | IV | Just before the observation | OPMI Pentax, flow 800 (Carl Zeiss, Oberkochen, Germany) | NA | Visualizability of aneurysm and vessels | 100% | NA | NA | NA | NA | NA | Feketi A, Wang S, Tanaka R, Yamada Y, Soyama D, Kawase T, Sano H, Kato Y. World Neurosurg. 2017 Mar;97:572-579. | |
| 47 | Marbacher | Switzerland | J Neurosurg | 2018 | Retrospective | Cerebral aneurysms | 120 | ICG | NA | IV | NA | NA | NA | The need for intraoperative clip readjustment | 11% | 11% clip repositioning | ICG and 3D/DSA concordance rate | NA | NA | NA | Compared with intraoperative 3D/DSA. Discrepancy: 71.4% mean. Marbacher S, Mendelsohn I, Gfeller R, Depers M, Remonda L, Faudon J. J Neurosurg. 2018 Jul 13;131(1):64-71. | |
| 48 | Della Puppa | Italy | World Neurosurg | 2018 | Retrospective | Cerebral aneurysms | 85 | ICG | NA | IV | Just before the observation | OPMI Pentax with Infrared 800 (Carl Zeiss, Oberkochen, Germany) | NA | Rate of aneurysm occlusion and postoperative occurrence of ischemic injury. | 98.8%, NPV 98.8% (one false negative remnant neck) | 8.3% clip repositioning | 2.1% postoperative symptomatic ischemic injury | None | NA | NA | Compared with postoperative CTA. Della Puppa A, Rosetto M, Volpin F, Ramoni O, Cecco A, Gerardi A, Ortolan R, Casati F, Monami M, Scasna R. World Neurosurg. 2018 May;113:16-184. | |
| 49 | Bozkurt | Turkey | Turk Neurosurg | 2018 | Retrospective | Cerebral aneurysms | 196 | ICG | 0.2-0.5 mg/kg | IV | Just before the observation | OPMI Pentax 900 (Carl Zeiss, Oberkochen, Germany) | NA | Aneurysm neck remnants and vessel patency | 95.2%, 1.6% false negative occlusion rate | 6.1% clip repositioning | NA | None | NA | NA | Compared with direct puncture. 0.8% neck remnant rate. Bozkurt M, Ozgural O, Kahaloğlu G, Ergül U, Duman I, Sekmen H, Ergonen N. Turk Neurosurg. 2018;28(6):970-978. | |
| 50 | Gekka | Japan | Acta Neurochir (Wien) | 2018 | Retrospective | Cerebral aneurysms | 89 | ICG | 0.1 mg/kg | IV | Just before the observation | Carl Zeiss OPMI Pentax 900 (Carl Zeiss, Oberkochen, Germany) | NA | Occlusion of aneurysms | 91.6%, 8.4% false negative occlusion rate | 6.5% additional clip placement | 8.4% false negative occlusion rate. Wall thickness around the neck was greater. | NA | NA | NA | Confused by direct puncture. Gekka M, Nakayama N, Ushino H, Honka K. Acta Neurochir (Wien). 2018 Feb;160(2):209-276. | |
| 51 | Fong | Taiwan | World Neurosurg | 2018 | Retrospective | Cerebral aneurysms | 24 | ICG | 25 mg | IV | Just before the observation | OPMI Pentax (Carl Zeiss, Oberkochen, Germany) and Carl Zeiss OPMI Pentax 900 and Flow 800 (Carl Zeiss, Oberkochen, Germany) | NA | Rate of clip repositioning | 82.9% | 17.1% clip repositioning | NA | None | NA | NA | Compared with intraoperative 3D/DSA. Fong YW, Hsu SK, Huang CT, Hsieh CT, Chen MH, Huang JS, Chang CJ, Lee W. World Neurosurg. 2018 Jun;14:e573-e580. | |
| 52 | Nakagawa | Japan | World Neurosurg | 2018 | Retrospective | Cerebral aneurysms | 37 | ICG | 0.3 mg/kg | IV | Just before the observation | Carl Zeiss OPMI Pentax 900 and Flow 800 (Carl Zeiss, Oberkochen, Germany) and FIFIBIO microscope-integrated ICG-VA, OPMI Pentax (Carl Zeiss, Oberkochen, Germany) | NA | Time-intensity curves (FLOW800) | Patency of anastomosis | 89.7% | NA | NA | NA | NA | NA | Nakagawa S, Mami Y, Matano F, Hishika F, Morita A. World Neurosurg. 2018 Feb;10(6):e709. |
| 53 | Fischer | Germany | J Neurosurg | 2018 | Retrospective | Cerebral aneurysms | 95 | ICG | 0.5 mg/kg (both imaging techniques) | IV | Just before the observation | OPMI Pentax (Carl Zeiss, Oberkochen, Germany); for endoscope-integrated ICG-VA, near-infrared endoscopic system (Karl Storz, Tuttlingen, Germany) | NA | Efficacy of endoscope-integrated ICG-VA vs. that of microscope-integrated ICG-VA in evaluating occlusion and blood flow | 92.2% for microscope-integrated ICG-VA and 86.9% for endoscope-integrated ICG-VA | Endoscope-integrated ICG-VA was more effective than microscope-integrated ICG-VA at evaluating occlusion and blood flow and preventing remnants and residuals | Small ischemic infarctions in 6.5% | NA | NA | NA | Endoscope-integrated ICG-VA provides additional information. Fischer G, Radtke J, Oertel J. J Neurosurg. 2018 Oct 1;130(4):doi: 10.3171/2018.4.JNS.17260. | |
| 54 | Mankami | Nepal | F1000Res | 2018 | Prospective | Cerebral aneurysms | 40 | ICG | NA | NA | Just before the observation | OPMI Pentax (Carl Zeiss, Oberkochen, Germany) | NA | Predictive value of intraoperative FLOW 800 vascular map of postoperative vasospasm and delayed cerebral ischemia | NA | NA | The model showed good prediction of postoperative vasospasm from the absorption intensity of the ICG dye and CT Fisher grading | NA | NA | NA | Mankami S, Poudel D. F1000Res. 2018 Aug 07;7:1188. doi: 10.12688/f1000research.15627.1. | |
| 55 | Seng | Japan | Asian J Neurosurg | 2018 | Retrospective | Cerebral aneurysms | 9 | ICG | NA | IV | NA | NA | NA | Surgical outcome of unruptured basilar tip aneurysms treated by clipping | NA | NA | Oculomotor nerve palsy in two patients (resolved spontaneously) | NA | NA | NA | Seng LH, Yamada Y, Rajagopal N, Mohammad AA, Teramichi T, Mizumoto K, Kawase T, Kato Y. Asian J Neurosurg. 2018 Oct;13(4):1148-1157. doi: 10.4103/ajns.ajns.199_18. | |
| 56 | Remmert | US | Oper Neurosurg (Hagerstown) | 2019 | Retrospective | Cerebral aneurysms | 3 | ICG | 0.2 mg/kg | IV | Just before the observation | Kineco & Pentax (Carl Zeiss, Oberkochen, Germany), FLOW 800 | NA | Time-intensity curves (FLOW800) | Occlusion of aneurysms, cortical perfusion | 100% | 1/3 clip repositioning | NA | NA | NA | NA | Remmert BC, Strickland BA, Ravina K, Balshahram J, Froelichson V, Carey J, Ryan D. Oper Neurosurg (Hagerstown). 2019 May 1;16(5):583-592. |
| 57 | Tajiri | United Kingdom | Acta Neurochir (Wien) | 2019 | Retrospective | Cerebral aneurysms | 212 (200 controls) | ICG | NA | NA | Just before the observation | OPMI Pentax (Carl Zeiss, Oberkochen, Germany) | NA | Reduction in vascular compromise or injury during clipping from use of ICG-VA | NA | Procedural vascular error rate was 9.5% in group that did not receive ICG-VA and 3.3% in the group that received ICG-VA | NA | NA | NA | NA | Use of ICG-VA reduces technical errors. Tajiri T, Cullen J, Galloyle M, Hickey A, Kailash R, Kalkanik P, Trevelin R. Acta Neurochir (Wien). 2019 Nov;161(11):2397-2401. doi: 10.1007/s00701-019-04029-6. | |
| 58 | Goertz | Germany | World Neurosurg | 2019 | Retrospective | Cerebral aneurysms | 54 | ICG | 10 mg | IV | Just before the observation | OPMI Pentax (Carl Zeiss, Oberkochen, Germany) | NA | Maximum fluorescence intensity, time to peak, delay, arteriovenous transit time, and arteriovenous transit time before and after clip placement | Reference values for FLOW 800 parameters before and after clipping and FLOW 800 NA | Clip repositioning rate was 17.9% | Two cases of clip stenosis may have been missed under standard ICG-VA | NA | NA | NA | NA | Goertz L, Hof M, Timmer M, Schulte AP, Kabbsch C, Kriesche H, Stavrou P, Reiner M, Gellerauer R, Bräker G. World Neurosurg. 2019 Nov;131:192-e200. doi: 10.1016/j.wneu.2019.07.113. |
| 59 | Kanman | Japan | Asian J Neurosurg | 2019 | Retrospective | Cerebral aneurysms | 347 | ICG | NA | NA | NA | OPMI Pentax (Carl Zeiss, Oberkochen, Germany) | NA | Validate in-house protocol of tools used during clipping surgery | NA | NA | NA | NA | NA | NA | Conducting intraoperative imaging tools optimizes surgery outcomes. Kanman S, Yamada Y, Mputiani K, Teramichi T, Masuda AR, Nishio K, Kawase T, Kato Y. Asian J Neurosurg. 2019 Jul-Sep;14(3):773-779. doi: 10.4103/ajns.ajns.19_19. | |

Supplementary Table 6: Perfusion assessment in cerebral aneurysm surgery

| Ref. No. | Author | Country | Journal | Year | Study design | Patient selection | | Fluorogenic agent | Imaging techniques | | | Imaging system | Quantitative measurements | Main endpoints | Imaging accuracy/success rate | Endpoint measures | | Adverse effects | Learning curve | Cost analysis | Other comments | Ref. detail |
|----------|---------|---------|-----------------|------|---------------|--------------------|-----------|-------------------|--------------------|-------|--------|--|---------------------------|------------------------|-------------------------------|--|---|-----------------|----------------|---------------|---|---|
| | | | | | | Subject | N (cases) | | Dose | Route | Timing | | | | | Clinical impact, changes in intraoperative decision-making | Clinical impact, advantages in postoperative outcomes | | | | | |
| 40 | Rennert | US | J Clin Neurosci | 2019 | Retrospective | Cerebral aneurysms | 10 | ICG | 0.2 mg/kg | IV | NA | FR/WMU, Patena and Kinco (Carl Zeiss, Oberkochen, Germany) | NA | Postoperative ischemia | NA | NA | 20% of cases experienced ischemia | NA | NA | NA | Intraoperative ICG-based flow analyses can assist in assessing the risk of ischemia | Frederickson V, Carey J, Rotstein JJ. <i>J Clin Neurosci</i> . 2019; Sep;71:191-197. doi: 10.1016/j.jocn.2019.06.056. |

NA, not available or not assessed