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Posterior cerebral artery aneurysms in a mixed population: size, side, multiplicity, morphology, and familial aggregation. In an attempt to determine whether the size, side, morphology, and multiplicity of posterior cerebral artery aneurysms (PCAA) differ between a specific group of patients and a mixed population of patients, the authors reviewed 339 PCAAs in a retrospective analysis of 181 aneurysm patients. Twenty-nine percent (22/77) of patients with a diagnosis of systemic hypertension had multiple aneurysms compared with 14% (3/21) of those without hypertension (p less than 0.05). Patients with PCAAs that were larger than 2 cm were more likely to have multiple aneurysms (35% vs 14%, p less than 0.05). Multiple aneurysms were present in 53% of all aneurysms and in 100% of unilateral aneurysms. Aneurysms in the superior cerebellar artery were six times more common in patients with multiple PCAAs than in those with a single aneurysm. An increased incidence of aneurysms was noted in the children of patients with multiple PCAAs (49%) compared with patients without PCAAs (10%, p less than 0.01). In an analysis that included both hypertensive and nonhypertensive patients, the aneurysm size was significantly greater in hypertensive patients with multiple aneurysms (4.3 +/- 1.7 vs 3.5 +/- 1.3 cm, p less than 0.05). No differences in the rates of side, multiplicity, or morphology were noted in either hypertensive or nonhypertensive patients. Based on these data,

the authors conclude that despite the smaller size of PCAAs in the hypertensive population and their multiplicity, these features do not distinguish PCAAs from other PCAA subtypes in a mixed population. Additionally, whereas the aneurysm size,