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Skull Base Surgery in Al-Muwasat University Hospital

Samer Al Ayobi*

Abstract

This article aims to assess the application of skull- base approaches and their results in the management of different skull-base pathology in Al-Muwasat university hospital in Damascus.

Different approaches to the skull base (Supraorbital, CranioOrbito-Zygomatic, Extended middle fossa, Petrosal and Transcondylar) were used according to the pathology and site of the lesion.

In a period of 2 years (2002 & 2003), 46 patients with different pathologies involving the base of the skull were treated surgically. The lesions included 13 (29%) meningiomas, two of which were in the orbit, 9 (20%) basal CSF leaks, 4 (9%) glomus jugulare, 3 (6%) acoustic neuromas, 3 (6%) orbital tumors other than the meningiomas, 2 (4%) juvenile angiofibroma, 2 (4%) recurrent giant pituitary adenomas, 2 (4%) epidermoids, 2 (4%) chondrosarcomas, one (2%) each of lymphoma, dermoid cyst, aneurysm, and esthesioneuroblastoma Age and sex varied according to the pathology of the lesion. All lesions except one were totally removed. There were 4 deaths caused by non-direct surgical causes (massive pulmonary embolism, severe acidosis, anaphylaxis to blood transfusion, and cardiac infarction).

It is possible with available resources and with cooperation between different specialties to apply skull-base approaches with excellent results. These approaches should therefore replace the traditional approaches that do not give the same amount of surgical exposure in treating lesion of the base of the skull.

Key words: skull base, Tumors, meningioma, acoustic neuroma, glomus Jugulare, juvenile angiofibroma, pituitary adenoma, epidermoid

* Samer Al Ayoubi-Dept. of Neurosurgery-Al Mouassat hospital – Damascus University.

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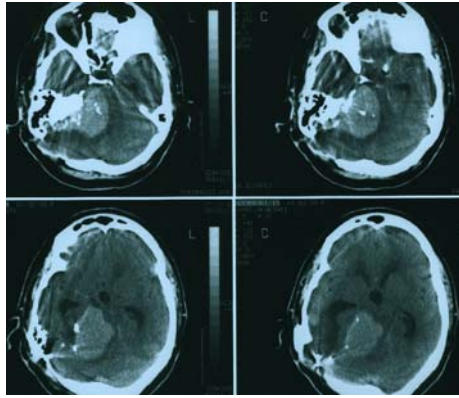
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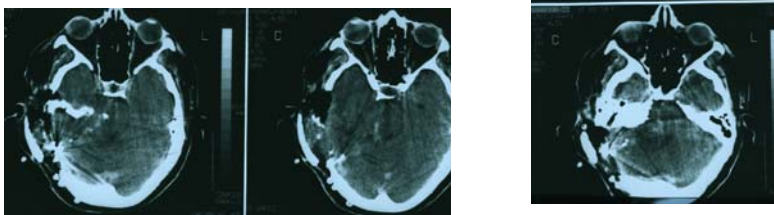
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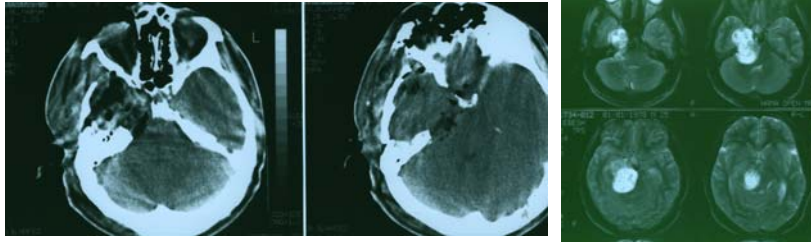
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