

The Role of 3-D Modeling in Patient Education of Facial Pain Syndromes Megan M Jack MD, PhD; Mairaj Sami; Alex Shearin; Michael Kinsman MD Department of Neurosurgery, The University of Kansas Medical Center, Kansas City, KS 66160

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Introduction

Technology is increasingly being utilized to educate both surgeons and patients. 3-D printing technology that simulates patient specific anatomy for surgical planning is thought to increase procedural accuracy and aid in determining needed equipment and resources, as well as increasing surgeon confidence. Similarly, this technology will better assist in patient education by allowing the physician to discuss the pathology and surgical treatment with the patient using the model made from the patient's MRI scan. Currently, there are few studies using 3-D printed models to educate patients undergoing surgical interventions in the literature.

Learning Objectives

By the conclusion of this session, participants should be able to: 1) Describe how 3-D models can be used to educate patients 2) Discuss the benefits of using a 3-D model for education of facial pain syndromes 3) Identify other novel applications for 3-D printing technology

Methods

We utilized 3-D printing technology to create patientspecific, three dimensional models of the brainstem, trigeminal or facial nerve, and any associated vasculature. These models were used to educate the patient about their facial pain condition along with the surgical procedure. Prior to this education, the patients will complete a survey regarding their baseline knowledge of their diagnosis. Patients then fill out a second survey to access their knowledge after the education session and overall satisfaction regarding the use of the 3D model.

Results

Following education with a patient-specific 3-D model, patients with facial pain syndromes demonstrated improved knowledge regarding their diagnosis, pathophysiology, and treatment options. Similarly, patient satisfaction regarding the use of the model was high.



(A) 3-D model of the posterior fossa vasculature, brainstem, and skull base. (B) Arrow demonstrates the superior cerebellar artery compression of the trigeminal nerve near where the nerve exits the brainstem.

Figure 2



3-D model showing compression (red arrow) of the trigeminal nerve (green asterix) by the superior cerebellar artery (blue asterix).

Figure 3	
Trigoniani Neuralgia Anatomy- key structures involved: I. The trigoniani acrev has three main branches that provide sensation to the face. a. True b. False c. I'm not zere	 Mechanism Physiology of Trigominal neuroligis: Trigominal neuroligis is caused by compression of a nerve by a blood vessel.
 In addition to sensing light touch, pressure, and vibration on the face, the trigerminal nerve is also responsible for movement of the face like blinking or smiling. a. True b. Falor c. True or are 	 Injury to the trigeminal nerve can cause chronic pain of the face. a. True b. False c. I'm not sure
The number of the state of a first or core-bulk a ratery lies immediately next to, and often makes direct contect with, the triggeninal nerve. a. True b. False	 Facial pain can be caused by other conditions like tumors or multiple scherosis. True Falo I'med I'm for strue
 c. I'm not sure 4. The trigenianal nerve originantes from the brainstem. a. True b. Faile c. I'm not sure 	 Medication is the first treatment option for patients with trigeminal neuralgia. True False True neuralgia
5. Normally, each person has two trigenninal nerver, one for each side of the face. a. True b. False c. I'm not sure	5. Most people do not improve with medication. a. True b. Falle c. I'm not sure
Knowledge regarding how surgical procedure will be performed:	♦ Baseline knowledge regarding TN prior to initial consultation:
 Part of my skull will be opened in my surgery. True Faize Tan ot sure. 	 On a scale from 1-10 (1= none, 10=excellent) how would you rate your personal understanding of trigeminal neuralgia prior to your first neurosurgical consultation?
 My surgeon will not enter the brain or brainstem during my operation. True False 	 Have you used any other resources to learn about trigeminal neuralgin? YES No
c. I'm not sure	If YES, have you used any of the following:
 My surgeon will cut the trigeminal nerve during my surgery. a. True b. False c. I'm not sure 	 c. Online resource (web md, another website) d. Books or scientific publications/journals e. Discussion with non-physician individuals f. Other:
 My surgeon will remove or coagulate any artery or vein found compressing my trigminal nerve. a. True b. False c. In our true 	 Has another physician, such as a neurologist or primary care physician, explained your condition to you? YES NO
 I'm now sure My surgeon will protect my trigeninal nerve from compression by placing a conton-like material over it as padding. a. True b. False 	If YES, how would you rate your understanding of trigeminal neuralgia after discussion with that provider on a 1-10 scale (1= none, 10=excellent)?
c. I'm not sure	
 Patient satisfaction with 3D model: Player rate from 1-10 (1= no ber 	aff. Doof much leaded) how much your
personalized 3D printed model h	ents, 10-of great benefit) now much your elped you to understand the following:
1. Learning about the trigemina	al nerve and nearby structures in the brainstern.
2. Learning about your condition	m, trigeminal neuralgia.
3. Understanding of how your s	urgical procedure will be performed.
 Your understanding of poten will undergo. 	tial and risks associated with the surgery you
Overall, would you recommend patients with your condition betw a. YES b. NO	asing a personalized 3D printed model to help er understand trigerninal neuralgin?
Questionaire for patients with trigeminal neuralgia.	

Conclusions

3-D printing technology can facilitate pre-operative surgical education regarding the diagnosis and treatment options for facial pain syndromes.