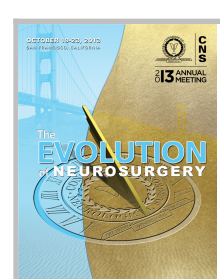


# Petroclival Meningiomas: Reverting Back to Retrosigmoid Approach

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## Introduction

A retrospective analysis of 123 cases of petroclival-premeatal meningiomas surgically managed in their institute from 1st Jan 1990 till 31st March 2013 was carried out to see the outcome with various approaches.

## Methods

While the tumor resection was carried through an anterolateral/lateral route in 32(27%), it was through a combined posterior subtemporal /pre or trans-sigmoid (posterior petrosal) in 24(20%) & retrosigmoid supra-paracerebellar route in 58 cases (46%). In three cases with extra cranial extension to infratemporal area, a modified Fisch approach was used. Six patients who were in poor clinical condition had only a CSF diversionary procedure. The tumor could be radically removed in 80 patients (66%), subtotally in 27 (22%) and decompression only in 9. Seven patients had tumor excision in two stages. There was an operative mortality of 8.2% (10 cases).

## Results

Forty of the 53 patients who underwent surgical decompression since Jan 2004 were operated by the retrosigmoid route and operative mortality for this group of 53 patients have been less than 4%(2 cases). There was only oneoperative mortality among the last 40 cases operated by the retrosigmoid route. Out of the 85 patients on long term follow up 58 are independent. Seven out of the nine patients who had symptomatic recurrence were re-operated

## Conclusions

The percentage of these tumors operated by conventional retrosigmoid route has increased in the later part of the series thus proving that in many of these tumors without significant middle fossa extension, it is not necessary to use complex and time consuming skull base approaches which in themselves can cause morbidity.

## Learning Objectives

Many of the premeatal-petroclival meningiomas without significant middle fossa extension can be removed by conventional retrosigmoid route with reduced morbidity and mortality

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