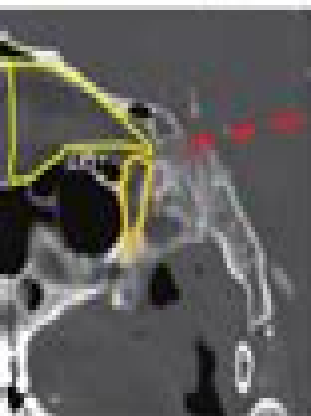
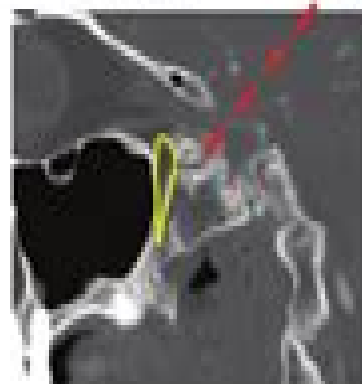


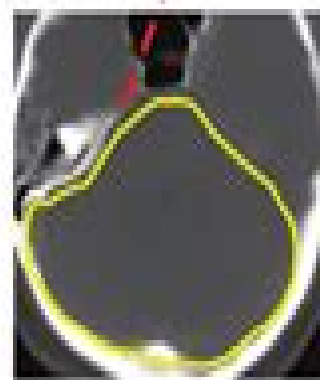
Superior orbital fissure (SOF) to orbit



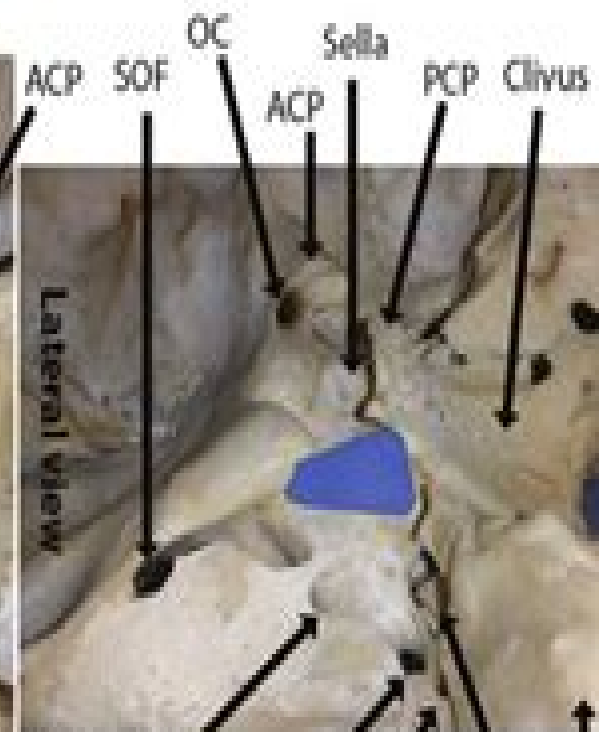
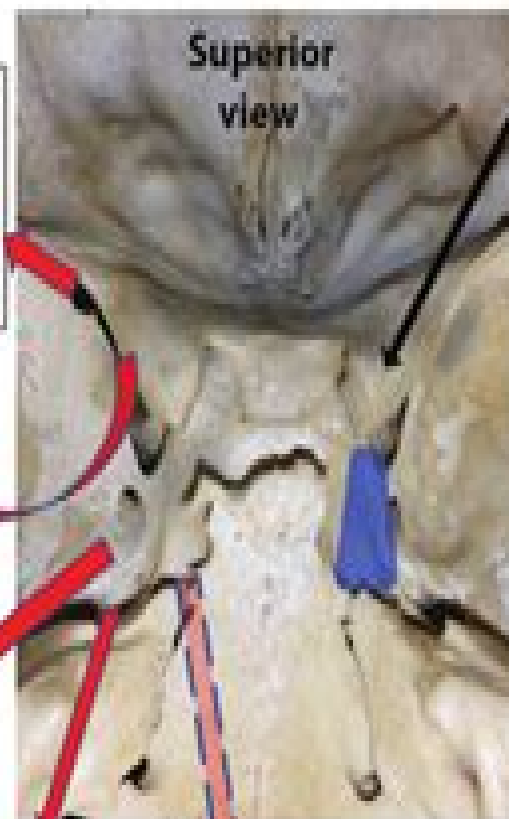
Inferior orbital fissure to orbit and PPF



Meckel's cave to posterior fossa



Foramen lacerum and carotid canal to nasopharynx, parapharyngeal space



Foramen rotundum

Foramen ovale

Internal opening of carotid canal

Foramen spinosum

Petrous pyramid

Anatomy And Surgery Of The Cavernous Sinus

**Feres Chaddad-Neto, Marcos Devanir
Silva da Costa**



Anatomy And Surgery Of The Cavernous Sinus:

Anatomy and Surgery of the Cavernous Sinus Vinko V. Dolenc, 1989-10-11 The decision of Harvey Cushing to leave general surgery and concentrate on the infant field of central nervous system surgery was in retrospect a landmark in the history of neurosurgery His concentrated work and also that of his colleague Walter Dandy originated with the desires of both pioneers to understand surgical anatomy and neurophysiology The fundamental knowledge and surgical techniques that they provided became the standard of excellence for several generations of neurosurgeons so much so that the general belief was that the surgical techniques could not be improved upon Twenty five to thirty years ago microtechniques began to appear in a few surgical research centers they were then gradually applied to clinical neurosurgery and have contributed to a new level of understanding in surgical anatomy and neurophysiology We are now fortunate to have a new standard of morbidity and mortality in the surgical treatment of intrathecal aneurysms angiomas and tumors It has been said that microneurosurgery was reaching its limits especially when treating lesions in and around the cavernous sinus and skull base those lesions notorious for involvement of the dural and extradural compartments with a tendency to infiltrate adjacent nerves and blood vessels The dangers of uncontrollable hemorrhage from the basal sinuses and post operative CSF rhinorrhea appeared unsurmountable The lateral aspects of the petro clival region have been of interest to a few pioneering ENT surgeons and neurosurgeons but the cavernous sinus in most respects has remained the final unconquered summit

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Cavernous Sinus Vinko V. Dolenc, Larry Rogers, 2009-07-31 20 years ago Professor Dolenc edited the first

comprehensive and up to date text dealing with the cavernous sinus and addressing anyone concerned with the diagnosis and treatment of lesions of the skull base Now he has edited a new volume with articles by specialists in this topic presenting the state of the art in this technology Handbook of Skull Base Surgery Antonio Di Ieva, John Lee, Michael

Cusimano, 2016-01-11 Handbook of Skull Base Surgery is a state of the art surgical guide that provides clinicians and surgeons with step by step instructions on how to perform microscopic and endoscopic procedures Encompassing the entire skull base this handbook is designed for busy residents and clinicians seeking to hone their surgical skills It presents a multidisciplinary approach to the pathologies diagnosis and management of skull base lesions Key Features Bulleted format with step by step descriptions of procedures accompanied by high quality illustrations of key points Succinct summaries of content enable readers to quickly obtain the information they need Includes coverage of relevant basic sciences advanced imaging and adjunctive treatments such as radiosurgery and chemotherapy Comprehensive yet conveniently compact this book is a must have reference for residents clinicians nurses and researchers caring for patients with skull base pathologies

Neuroanatomy Guidance to Successful Neurosurgical Interventions Imad N. Kanaan, Vladimír Beneš, 2024-11-08 This unique book covers a wide spectrum of neurosurgical science and practice Authored by world renowned neurosurgeons it aims to bridge the gap between practical anatomy and the recent advances in neurosurgical interventions A special section on neurovascular surgery demonstrates the surgical skills required and challenges faced during surgery of complex aneurysms vascular malformations and options for special revascularization procedures Distinctive chapters highlight the anatomical landmarks for tailored microsurgical and endoscopic approaches to skull base ventricular and spinal tumors This textbook outline the role of white matter dissection in glioma and epilepsy surgery with an update on functional and peripheral nerves neurosurgery and a special chapter on the anticipation and management of complications in adult and paediatric neurosurgery **Microneuroanatomy and Surgery** Feres Chaddad-Neto, Marcos Devanir Silva da

Costa, 2022-01-31 Microneuroanatomy is essential to understanding the brain In many cases passing on neuroanatomical knowledge is a difficult task to accomplish yet this is chiefly due to those who are tasked with conveying this knowledge in classes and lectures or in books In reality neuroanatomy is simple and needs to be understood as a tool for approaching the different areas of the brain not as an obstacle and the only way to overcome this problem is to correlate neuroanatomy with various types of disease arteriovenous malformations aneurysms tumors cavernomas hydrocephalus etc This book provides a novel approach to the relation between microneuroanatomy and brain diseases Each chapter addresses a specific neuroanatomical region and correlates all the key neuroanatomical aspects with diseases that affect it further each chapter provides detailed insights into safely performing brain surgery in the respective region **Neurosurgical Management of Aneurysmal Subarachnoid Haemorrhage** I.A. Langmoen, Tryggve Lundar, Rune Aaslid, Hans-J. Reulen, 1999-04-19 The small neck of the aneurysm afforded an easy surgical attack An ordinary flat silver clip was placed over the sac and tightly

compressed obliterated it completely The clip was flush with the wall of the carotid artery The sac lateral to the silver clip was then picked up with the forceps and thrombosed by the electrocautery Walter Dandy reporting his successful operation of a posterior communicating aneurysm on March 23 1937 Walter Dandy's patient left the hospital in good health 2 weeks later and from his report one may gain the impression that the operation was an easy task Despite continuous developments during the following decades it was not until the introduction of the operating microscope and microsurgical techniques that surgical treatment was generally accepted During the microsurgical era surgical results have continued to improve due to diagnostical neuroanaesthesiological and microsurgical refinements and improved neurointensive care Endovascular obliteration has become an important treatment alternative but this has not been included in this particular volume The purpose of the present supplement of the ACTA NEUROCHIRURGICA is to review some of the elements in the neurosurgical management of patients with aneurysmal subarachnoid haemorrhage that are important for a successful outcome Professor Helge Nornes has been a major force in the development of new techniques and research strategies in this area for a number of years and has recently retired from the National Hospital in Oslo

Radiosurgery D. Kondziolka, P. K. Sneed, M. W. McDermott, L. Ma, K. Huang, R. L. Jensen, I. Paddick, 2006-05-15 This volume Radiosurgery presents of topical and exciting developments in the field of radiosurgery as discussed at the 7th International Stereotactic Radiosurgery Society Meeting Brussels 2005 These peer reviewed reports include new studies on radiosurgery of benign and malignant brain tumors and vascular malformations as well as results following the management of patients with functional disorders such as trigeminal neuralgia and pain Physics assessments of different radiosurgical technologies are also discussed Further reports review the expanding field of intracranial and extracranial radiosurgery If you are a neurosurgeon radiation oncologist medical physicist neurologist or oncologist who requires the most up to date information on the use of stereotactic radiosurgery you will find the answers in this publication

Endoscopic Transorbital Surgery of the Orbit, Skull Base and Brain Theodore H. Schwartz, Doo-Sik Kong, Kris S. Moe, 2024-09-26 Endoscopic transorbital surgery of the orbit skull base and brain is a new surgical discipline that has developed over the last decade out of a collaboration between otolaryngologists neurosurgeons and oculoplastic surgeons Tumors and other pathology of the skull base are some of the most difficult to approach and treat for surgeons since they lie at the interface of several traditional specialties namely the eye the paranasal sinuses and the brain For this reason no single surgical specialty is fully trained to independently reach this region which requires collaborative approaches that are technically demanding and often long and arduous procedures In the last decade using the endoscopic techniques and instrumentation otolaryngologists oculoplastic surgeons and neurosurgeons have together shown that the orbit can be used as a minimally disruptive corridor to reach the skull base lateral to the carotid artery as well as other areas that are difficult to access through transcranial or endonasal approaches These approaches are now even being used to remove brain tumors involving the frontal and temporal lobes including those that extend through the middle cranial

fossa and into the posterior fossa without visible external scars or the need for a traditional craniotomy. In addition, they have been used to clip aneurysms, treat seizure disorders, drain abscesses, repair CSF brain fluid leaks, and restore skull fractures, all without the additional risks of trauma and prolonged recovery of previous open surgical techniques. The literature is now demonstrating that these endoscopic procedures have comparable or improved safety compared to open surgery while creating less collateral damage and result in reduced patient stays. Due to their novelty, few surgeons have acquired the necessary experience, knowledge, and expertise to introduce these approaches into their practice; yet, due to their safety and efficacy, they are rapidly becoming a critical skill set. This is the first text of its kind to codify and proliferate these new approaches more rapidly through the country and world, appealing to otolaryngologists, oculoplastic surgeons, and neurosurgeons who deal with pathology involving the skull base.

Endoscopic Approaches to the Skull Base Amin B. Kassam, Paul Andrew Gardner, 2012

Reviews the role of endoscopic endonasal techniques. During the last decade, the endoscopic endonasal approach (EEA) to the skull base has become a very powerful method to add to the array of neurosurgical technologies. This volume provides a broad overview of the role of transnasal approaches in a wide spectrum of skull base diseases. It starts with a historical perspective of the evolution from the microscope to the endoscope in endonasal surgery and then explores in depth the principles and techniques of the various methods. Discussed are topics based on anatomical boundaries: pituitary fossa to the suprasellar space to the cavernous sinus, clivus, and the anterior cranial fossa. Access to the infratemporal and posterior fossae via both the endoscopic endonasal and the retrosigmoid approaches are reviewed. In addition, the critical topic of reconstruction following minimally invasive skull base surgery and finally the learning curve and complications associated with the applications of these new and exciting approaches are discussed. This volume will provide the latest knowledge to help neurosurgeons, otolaryngologists, head and neck surgeons, as well as craniofacial surgeons, understand the applications and practice of this important technique.

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Anatomy And Surgery Of The Cavernous Sinus Introduction

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