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Designing Endoscopic Surgical Approaches for Skull Base Tumours

Skull base tumors for which surgery is indicated invariably pose a challenge, owing to their position and relationship with critical structures. Designing of the surgical approach mandates accurate balance between adequate exposure and morbidity of surgery. Frequently, synchronous or staged combination of multiple anatomical routes might result advantageous, as it provides wide exposure of the lesion boundaries while avoiding excessive manipulation of craniofacial tissues. Transnasal, transoral, transantral and transpetrosal corridors are just some examples of the wide spectrum of anatomical pathways that can be exploited to access areas of the cranial base. Other factors to be considered when designing a surgical approach includes the type of ablation one wants to achieve, planned reconstruction, and intent of surgery. The presentation will go through the contemporary criteria to design a skull base approach by means of clinical cases and relevant literature.

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设计颅底肿瘤的内镜手术入路

由于颅底肿瘤的特殊位置和与关键结构之间的关系,其手术治疗一直是具有困难和挑战性的。手术入路的设计要求在充分暴露术野和手术并发症之间取得准确的平衡。通常,同步或分阶段结合多种解剖路径可能会产生有利的结果,因为它暴露出更大的术野,同时避免了对颅面组织的过度操作。经鼻、经口、经窦和经骨通道是一些常见的解剖学入路,这些入路可以用来进入颅底区域。在设计手术入路时需要考虑的其他因素包括术者想要进行的手术类型、计划重建方式和手术目的。本报告将通过临床案例及相关文献,介绍设计颅底入路的现行标准。