

was associated with higher risk of postoperative complications. Original classification and algorithm for selection of surgical approach depending on tumor localization and extent of resection were developed.

**Conclusion:** Primary midline intra-extracranial anterior skull base meningioma was observed in 26 cases and should be regarded as a new type of skull base meningioma. The proposed classification serves for the selection of appropriate surgical approach depending on localization and planned extent of resection of the tumor.

**Keywords:** Skull base tumor, Anterior skull base, Meningioma, Surgical management, Classification, Algorithm

#### EP-0750 [Neuro-oncology » Skull Base]

##### Cavernous Sinus Lymphoma

Ali Ayyad, Lucas Serrano, Amr Amr

*Department of Neurosurgery, Johannes Gutenberg University, Mainz, Germany*

**Background:** Although most malignant lymphomas of the central nervous system are thought to arise in the brain parenchyma, those thought to originate primarily in the cavernous sinus is extremely rare, but it must be considered in the differential diagnosis of an enhanced lesion in the cavernous sinus. It may present as cavernous sinus syndrome or isolated facial pain or/and numbness or diplopia. Here we present 7 cases of primary cavernous sinus lymphoma.

**Method:** 7 with primary patients were operated cavernous sinus lymphoma over 14 years (2000-2014). Age ranged between 43 to 72 years, 4 males, 3 females. 4 presented with facial pain resembling trigeminal neuralgia, 2 with diplopia and one patient with combination of facial pain and diplopia. 4 cases on Rt. Side, 3 on Lt. Side.

**Results:** Total excision achieved in 6 pat. All patients with facial pain improved after operation, diplopia patients were better but not completely recovered. 2 patients developed additional numbness in trigeminal nerve territory.

**Conclusion:** Histological diagnosis of lesions in the cavernous sinus is essential to determine the appropriate treatment which in most cases multidisciplinary in order to ensure better prognosis. Primary cavernous sinus lymphoma must be considered in the differential diagnosis of an enhanced lesion in the cavernous sinus

**Keywords:** Cavernous sinus, Lymphoma, Skull base

#### EP-0751 [Neuro-oncology » Skull Base]

##### Retrosigmoid Approach to the Cerebellopontine Angle Tumors - A Single Center Experience with a Systematic Review of Literature

Andriy Grigorovich Sirko

*Department of Neurology and Neurosurgery, Faculty of Postgraduate Education, Dnipropetrovsk State Medical Academy, Dnipro, Ukraine*

**Aim:** To study special features of applying the retrosigmoid suboccipital approach (RSSA) in surgery for cerebellopontine angle (CPA) tumors, the possibilities for expanding the approach, complications and ways of their prevention.

**Method:** The prospective analysis of the RSSA application in 112 patients with CPA tumors, who were examined and treated in

Mechnikov Hospital from 2010 to 2016 inclusive, has been made. All patients were operated on by the author of the study. TPC tumors were removed using the retrosigmoid approach with the following equipment: microscopes, electrotrepans, ultrasonic dissector aspirator, high-frequency coagulation with bipolar coagulation tweezers, and intraoperative neuromonitoring system.

**Results:** By applying the RSSA, we removed 67 vestibular schwannomas (VS), 4 non-vestibular schwannomas (3 schwannomas of caudal group of CNs and 1 schwannoma of trigeminal nerve), 30 CPA meningiomas, 7 epidermoid tumors, 1 hemangioblastoma, 1 chondroblastoma, 1 choroid papilloma, 1 cancer mts. Own experience and literature analysis allow to make the conclusions about advantages and disadvantages of RSSA application.

**Conclusion:** RSSA is a safe and relatively simple technique with a very low percentage of complications. RSSA provides an excellent panoramic examination of the entire CPA and a wide opening of the tumor regardless of its type and size. At all stages dissection is performed under a direct visual control, in such a case the location of the cranial nerves can be determined at an early stage, thus increasing the chances of preserving the nerves and allowing radical removal of the tumor.

**Keywords:** Retrosigmoid suboccipital approach, Cerebellum-pontine angle, Tumor surgery, Advantages, Disadvantages, Complications

#### EP-0752 [Neuro-oncology » Skull Base]

##### Vestibular Schwannoma

Raziul Md Haque

*Neurosurgery Department, Dhaka Medical College, Dhaka, Bangladesh*

**Background:** Complete removal of vestibular schwannoma without producing neurodeficit is one of the most challenging operation in neurosurgery. In this subcontinent, most of the patients usually present to neurosurgeon with large size of tumor and in these cases preservation of facial nerve function are very difficult though anatomical continuity well maintained. Aim of presentation is to share our experience of total or near total excision of vestibular schwannoma totally or near totally by drilling internal acoustic meatus without damaging facial nerve or other neural structures with suboptimal facility with our colleagues.

**Method:** Vestibular schwannomas that were operated from April 2005 to 2016 were studied. We are removing the tumor near totally by drilling the internal acoustic meatus with identification and preservation of facial nerve. In most of the cases, we have to leave last 3-4 mm of tumor capsule. 211 operated patients with vestibular schwannomas were prospectively studied.

**Results:** Postoperatively facial nerve function was alright in 21 cases (H&B gr 1/2) and in rest of the cases (H&B gr 3/4) some form of facial paresis occurred that recovered completely (in few cases) or incompletely. Per operative brain swelling in three cases needed partial cerebellar hemispherectomy, postoperative CSF fistula developed in 05 cases, 03 of them need re-exploration. Four patients expired early postoperative period, three of them due to haematoma.

**Conclusion:** Aim of vestibular schwannoma surgery is to remove tumor totally or near totally without further neurodamage which can bring cure to the patient. Our initial results are very encouraging.

**Keywords:** Vestibular schwannoma, Facial n preservation