Retrosigmoid Approach for Resection of Medium-Sized Vestibular Schwannoma

Michael J. Link[1,2]   Colin L. W. Driscoll[1,2]   Yening Feng[2]   Maria Peris-Celda[1]   Christopher S. Graffeo[1]

[1] Department of Neurologic Surgery, Mayo Clinic, Rochester, Minnesota, United States
[2] Department of Otorhinolaryngology, Mayo Clinic, Rochester, Minnesota, United States

Address for correspondence Michael J. Link, MD, Department of Neurosurgery, Department of Otolaryngology-Head and Neck Surgery, Mayo Clinic School of Medicine, Rochester, MN 55905, United States (e-mail: link.michael@mayo.edu).

Abstract

Objectives   This video was aimed to describe the relevant anatomy and key surgical steps of retrosigmoid approach for gross total resection of a medium-sized vestibular schwannoma (VS).

Design   The procedure is described in a surgical instructional video.

Setting   The surgery took place at a tertiary skull base referral center.

Participant   Patient is a 63-year-old woman who reported with nonserviceable hearing (Pure Tone Average 60 dB Hearing level, Word Recognition Score 45%), occasional tinnitus, and a VS in the left cerebellopontine angle (CPA), extending into internal auditory canal (IAC), measuring 1.7 cm parallel to the petrous temporal bone.

Main Outcome Measures   The VS was resected by retrosigmoid approach.

Results   The surgery results gross total resection of the VS with postoperative House–Brackmann grade 1 facial nerve function and no postoperative complications.

Conclusion   The retrosigmoid approach is a good strategy to remove VS involving the CPA and the IAC.

The link to the video can be found at: https://youtu.be/B6K_UkrKitg.

Keywords
► retrosigmoid
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► acoustic neuroma
► skull base

Conflict of Interest
None.

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