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Endoscopic navigation guided trans-sphenoidal pituitary surgery

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Introduction: Advances in nasal endoscopy led to cooperation between neurosurgeons and ENT surgeons in Endoscopic trans-sphenoidal Pituitary surgery. This report discusses the cases treated by our team consisting of one neurosurgeon, one ENT surgeon, two endocrinologists and one ophthalmologist between March 2007 and December 2015.

Methods: Forty-four patients (16 females and 28 males) presented to us between March 2007 and December 2015. Age range was 9-80 years. Most patients presented with visual failure. Pituitary apoplexy was the next most common presentation in our series. Hypopituitarism was present in only nine patients.

Results: Most cases were non-functioning adenomas. There were 3 Craniopharyngiomas, 2 Rathke's Cleft cysts, 2 prolactinomas, 2 GH secreting tumors and one arachnoid cyst. Two cases had CSF leak requiring repair and 10 cases had transient Diabetes Insipidus. Vision improved in 90% of cases. There was no permanent added impairment to pituitary function. There was no mortality and 2 patients suffered postoperative complications.

Conclusions: Endoscopic navigation guided trans-sphenoidal surgery is a safe and reliable procedure. We recommend working as a team of Neurosurgeon and ENT surgeon. We do not recommend preparing a mucosal flap as a routine for each case.

Biography

Kassem El-Shunnar completed his training in Neurosurgery in UK in 1993 following which he took up his first Consultant Neurosurgeon post in January 1994 in Plymouth, Devon. His interest in stereotactic surgery started during his training days in Edinburgh in the late eighties and continued later on with lesional functional neurosurgery and subsequently with image guided surgery. He is now based in the Middle East where he introduced the latest technology in his daily practice.

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