

Accidental [anterior skull base defects](#) associated with [surgery](#) are difficult to treat. There are several [methods](#) for the [repair](#), yet [postoperative rhinorrhea](#) can occur despite the [closure](#). A 56-year-old female patient was admitted for the treatment of a [paraclinoid internal carotid artery aneurysm](#). The surgery included removal of the [anterior clinoid process](#), unroofing the [optic canal](#), decompressing the [optic nerve](#), and [clipping](#) the [aneurysm](#). During the surgery, the [planum sphenoidale](#) was accidentally [drilled](#) and the [nasal cavity](#) exposed. The [dural defect](#) was repaired using a [U-flap technique](#). No postoperative [cerebrospinal fluid rhinorrhea](#) occurred in the [patient](#), and she was [discharged](#) on [postoperative](#) day 3. On follow-up examination the patient did not have evidence of [Cerebrospinal fluid fistula](#) ¹⁾.

¹⁾

Ozdol C, Aghayev K. U-shaped Dural Flap: A Simple Method for Transcranial Skull Base Defect Repair- Technical Report. J Neurol Surg A Cent Eur Neurosurg. 2019 May 10. doi: 10.1055/s-0039-1688558. [Epub ahead of print] PubMed PMID: 31075811.

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