

Anterior cranial base reconstruction

Anterior [cranial base reconstruction](#) is occasionally necessary following severe [trauma](#). Several methods for [reconstruction](#) have been described and some authors have described their experiences regarding the use of a [pericranial flap](#) for anterior skull base reconstruction after trauma. A 26-year-old woman was admitted to our department with multiple facial bone fractures identified using facial bone computed tomography. Plastic surgeons performed surgery under general anesthesia for the patient's nasal bone fractures. On the seventh day after admission, the patient's brain computed tomography showed an abscess in the frontal lobe. Antibiotic treatment was started, but the lesion deteriorated. Anterior skull base reconstruction was then performed using a pericranial flap with gelfoam compression. No complications, including leakage of cerebrospinal fluid, cerebral hemorrhage, necrosis of the pericranial flap, or frontal lobe herniation, were observed 1 year following surgery. In our case, the authors performed a simple and effective treatment with reconstruction using pericranial flap and gelfoam compression without complications. This technique is useful for reconstructing defects in the base of the frontal bone resulting from various causes, as well as for fracture of the anterior skull base following trauma ¹⁾.

Unclassified articles

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