

Endoscopic Endonasal Odontoidectomy

Supported by preliminary anatomical and clinical studies exploring the feasibility and usefulness of approaching many ventral pathologies of the [craniocervical junction](#) (CCJ) using the [endoscopic endonasal approach](#), four European centers joined forces to accumulate and share their growing surgical experience of this advanced technique. By describing the steps that led to the development and continuous refinement of this approach to the CCJ, a article delves deeply into an analysis of the cases operated on since 2010 at these four institutions, and discusses in detail the operative nuances that so far have allowed achievement of successful outcomes with excellent perioperative patient comfort and satisfactory long-term quality of life ¹⁾.

The gold-standard surgical approach to the [odontoid process](#) is via a [transoral approach](#). This [approach](#) necessitates opening of the oropharynx and is associated with risks of [infection](#), and swallowing and breathing complications. The [endoscopic endonasal approach](#) has the potential to reduce these [complications](#) as the oral cavity is avoided.

Transoral microscopic [odontoidectomy](#) followed by posterior fixation has been accepted as a standard procedure to treat nonreducible [basilar invagination](#) during the half past century. In recent years, the development of endoscopic techniques has raised challenges regarding the traditional treatment algorithm. The endoscopic transnasal odontoidectomy is a feasible and effective method in the treatment of irreducible ventral cervicomedullary junction compression, which has several advantages over the transoral approach. The endoscopic odontoidectomy includes transnasal, transoral, and transcervical approaches. The 3 different approaches for endoscopic odontoidectomy present complementary advantages and limitations. The necessity of posterior fixation after odontoidectomy should be considered in every single case on the basis of the peculiar anatomic and clinical conditions ²⁾.

Neuroanatomy and Technique

see <http://www.3dneuroanatomy.com/endoscopic-endonasal-odontoidectomy/>

Case series

[Endoscopic Endonasal Odontoidectomy Case Series.](#)

Case reports

[Endoscopic Endonasal Odontoidectomy case reports.](#)

Videos

<html><iframe width="560" height="315" src="https://www.youtube.com/embed/7kiWrmNjFK8" frameborder="0" allowfullscreen></iframe></html>

References

1)

Chibbaro S, Ganau M, Cebula H, Nannavecchia B, Todeschi J, Romano A, Debry C, Proust F, Olivi A, Gaillard S, Visocchi M. The Endonasal Endoscopic Approach to Pathologies of the Anterior Craniocervical Junction: Analytical Review of Cases Treated at Four European Neurosurgical Centres. Acta Neurochir Suppl. 2019;125:187-195. doi: 10.1007/978-3-319-62515-7_28. PubMed PMID: 30610322.

2)

Yu Y, Hu F, Zhang X, Sun C. Endoscopic Transnasal Odontoidectomy. Sports Med Arthrosc. 2016 Mar;24(1):2-6. doi: 10.1097/JSA.0000000000000081. PubMed PMID: 26752771.

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Last update: **2024/06/07 02:51**

