

Exclusive Endoscopic Occipital Transtentorial Approach

Removal of pineal region tumors, which are deeply placed and encircled by intricate neurovascular structures, is challenging to neurosurgeons. The aim of this study was to present our experience with the exclusive endoscopic occipital transtentorial approach (EEOTA) used for removal of pineal region tumors.

METHODS: A retrospective review was performed of patients who underwent surgery using the EEOTA to remove pineal region tumors from May 2016 to August 2018. The details of the EEOTA procedure were confirmed.

RESULTS: Five patients underwent surgery via the EEOTA for treatment of pineal region tumors. In all cases, it was possible to perform the EEOTA less invasively through a keyhole craniotomy approximately 2.0-2.5 cm in size. The EEOTA produced an excellent view and provided natural and automatic orientation. There was essentially no blind spot in this procedure, even for the floor or ipsilateral wall of the third ventricle. Gross total resection was achieved in 4 cases. In the patient with atypical teratoid rhabdoid tumor, we abandoned gross total resection because of a hardened adhesion to the tectum and the great cerebral vein and its tributaries. Two patients presented with transient upper gaze palsy immediately after surgery but experienced complete recovery during the follow-up period.

CONCLUSIONS: The EEOTA is a very promising technique for removal of pineal region tumors and has the potential for extensive and routine application for surgeons familiar with endoscopic surgery ¹⁾.

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Tanikawa M, Yamada H, Sakata T, Hayashi Y, Sasagawa Y, Watanabe T, Nagatani T, Mase M. Exclusive Endoscopic Occipital Transtentorial Approach for Pineal Region Tumors. World Neurosurg. 2019 Nov;131:167-173. doi: 10.1016/j.wneu.2019.08.038. Epub 2019 Aug 14. PubMed PMID: 31421299.

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