

Giant spinal schwannoma

Giant [spinal schwannomas](#) are defined as [intradural extramedullary spinal tumors](#) that span >2 [vertebral body](#) lengths. Although uncommon, these lesions can cause significant mass effect on the [spinal cord](#) and subsequent neurologic compromise.

Treatment

[Gross total resection](#) is the goal of operative intervention, however, is extremely challenging in cases where the tumor occupies a ventral, midline position within the lower cervical [thecal sac](#).

Various approaches have been described for treating these tumors [1\)](#) [2\)](#) [3\)](#) [4\)](#) [5\)](#) [6\)](#) [7\)](#) [8\)](#) [9\)](#) [10\)](#).

Case reports

Hussain et al. describe an adult male with insidious progression of upper extremity [radicular pain](#) and paresthesias, found to have a ventral, solid/cystic C5-C7 giant schwannoma. They demonstrate the step-by-step surgical technique for an anterior approach 2-level [cervical corpectomy](#), microsurgical resection of an intradural giant schwannoma, watertight dural closure, and lastly 360-degrees instrumented stabilization of the cervicothoracic spine. In addition we incorporate the utilization of a portable intraoperative computed tomography for stereotactic localization and 3-dimensional navigation-guided screw implantation. Finally, we discuss various preoperative, perioperative, and postoperative considerations that can have profound impact on successful outcomes [11\)](#).

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