

Hypoglossal canal meningiomas (HCMs) are extremely rare, and a consensus has yet to be reached regarding the most appropriate treatment approach for these types of tumors. Surgical procedures to the hypoglossal canal are often complex and lengthy, and are often associated with high rates of morbidity. Several approaches have been used to remove such lesions. Most of these approaches have been adapted from methods used for jugular foramen surgery. Our goal is to present an approach that improves visualization of the hypoglossal canal, thus reducing this pathology's risk of morbidity. In this report, we describe one case of HCM in which the tumor was safely and effectively removed by the midline subtonsillar approach, which allows for a direct primary intradural visualization of the hypoglossal canal. There was no postoperative complication in the patient. The length of follow-up was 73 months, and there has been no recurrence of the tumor <sup>1)</sup>.

<sup>1)</sup>

Dobrowolski S, Lepski G, Tatagiba M. Meningioma arising in the hypoglossal canal: the midline suboccipital subtonsillar approach. J Surg Case Rep. 2016 Jul 22;2016(7). pii: rjw039. doi: 10.1093/jscr/rjw039. PubMed PMID: 27451423; PubMed Central PMCID: PMC4957406.

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