

# Planum sphenoidale meningioma classification

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see [Anterior skull base meningioma classification](#)

A universally accepted classification system predicting surgical risk and outcome for [planum sphenoidale meningioma](#) is still lacking.

Mortazavi et al. proposed a new classification system that can allow the comparison of different series and approaches and indicate cases that are more suitable for an endoscopic transsphenoidal approach <sup>1)</sup>.

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The Sekhar-Mortazavi classification showed a trend towards better visual outcomes in Class I tumors. The classification system is easy to apply and could therefore prove useful to compare results between studies reported in literature, especially when comparisons are made between transcranial and endonasal surgery <sup>2)</sup>.

<sup>1)</sup>

Mortazavi MM, Brito da Silva H, Ferreira M Jr, Barber JK, Pridgeon JS, Sekhar LN. Planum Sphenoidale and Tuberculum Sellae Meningiomas: Operative Nuances of a Modern Surgical Technique with Outcome and Proposal of a New Classification System. *World Neurosurg.* 2016 Feb;86:270-86. doi: 10.1016/j.wneu.2015.09.043. Epub 2015 Sep 25. PubMed PMID: 26409085.

<sup>2)</sup>

Giammattei L, Messerer M, Belouaer A, Daniel RT. Surgical outcome of tuberculum sellae and planum sphenoidale meningiomas based on Sekhar-Mortazavi Tumor Classification. *J Neurosurg Sci.* 2021 Apr;65(2):190-199. doi: 10.23736/S0390-5616.18.04167-X. Epub 2018 Jan 4. PMID: 29308630.

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