

# Sphenoid Sinus Lateral Recess

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The anatomical features of the lateral pocket structure (type of [pneumatization](#), size and volume) did not affect the choice of access to the defect and the frequency of recurrence. When comparing the approaches, it was noted that the trans-pterygoid access, providing direct visualization of defects, minimizes the risk of recurrence in the postoperative period. An objective anatomical indicator for choosing an access to the defects of the lateral pocket can be the distance from the defect to the VR line: at a distance of more than 0.7 cm, it is advisable to perform a trans-pterygoid approach; at a distance of less than 0.7 cm, it is possible to achieve direct visualization of the defect and perform high-quality plastic surgery with a transsphenoidal access <sup>1)</sup>.

<sup>1)</sup>

Shelesko EV, Chernikova NA, Kravchuk AD, Strunina YV, Okhlopkov VA, Zinkevich DN, Batalov AI, Solozhentseva KD. Endoskopicheskaya endonazal'naya plastika defektov osnovaniya cherepa v oblasti lateral'nogo karmana klinovidnoi pazukhi: otsenka komp'yuternykh tomogramm dlya planirovaniya operatsii [Endoscopic endonasal reconstruction of skull base defects in the lateral recess of the sphenoid sinus: evaluation of computed tomograms for planning operations]. Vestn Otorinolaringol. 2021;86(6):74-81. Russian. doi: 10.17116/otorino20218606174. PMID: 34964334.

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