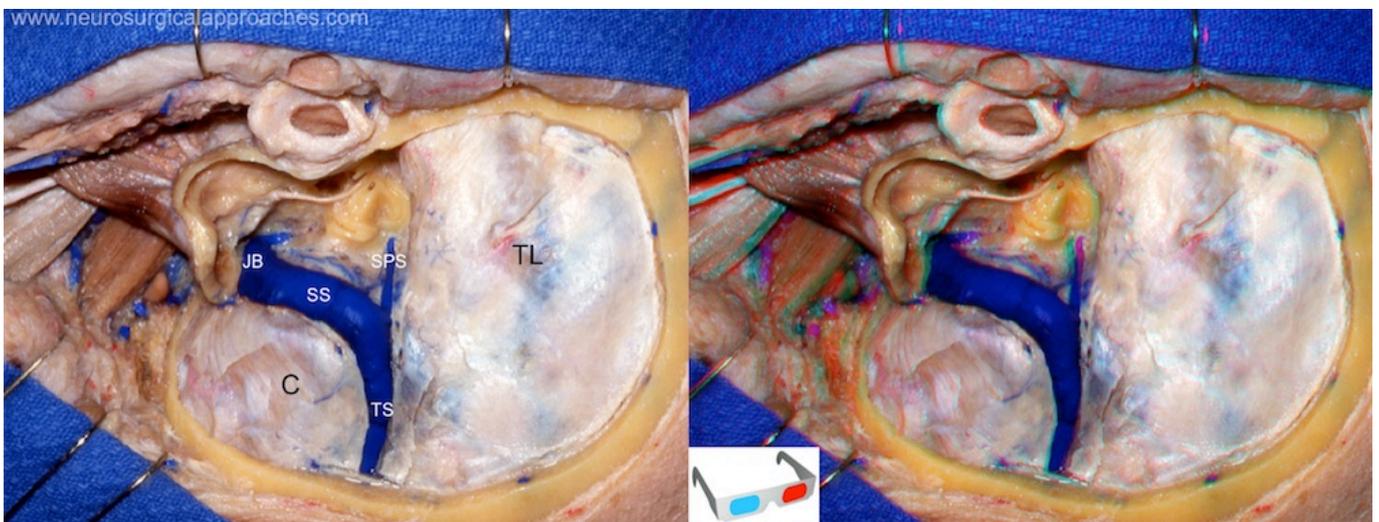


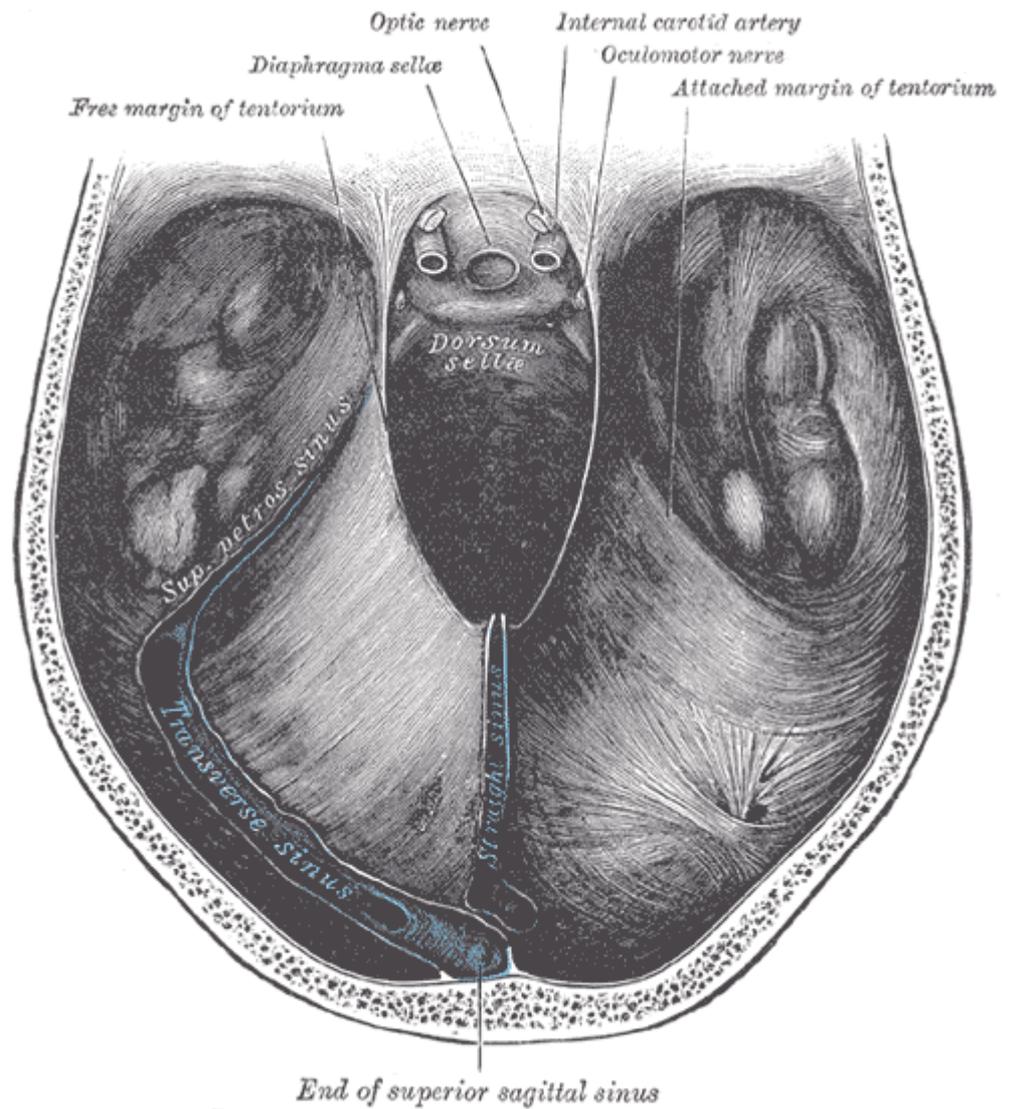
# Superior petrosal sinus

- Outcome of Detachable Balloon Embolization in Traumatic Carotid Cavernous Fistula
- Endovascular treatment of pulsatile tinnitus due to superior petrosal sinus stenosis and superior semicircular canal dehiscence
- Immunohistochemical Detection of PIEZO Ion Channels in the Human Carotid Sinus and Carotid Body
- Use of the LEONIS Mova Steerable Catheter in the Treatment of Cavernous Sinus Dural Arteriovenous Fistula with Occluded Inferior Petrosal Sinus
- A standalone minimally invasive presigmoid retrolabyrinthine suprameatal approach: A cadaveric morphometric study
- Tentorial Dural Arteriovenous Fistulas: A Retrospective Cohort Study
- Non-Sinus Type Dural Arteriovenous Fistula: Others
- Eighteen-year journey in endovascular management of cavernous sinus DAVFs: advances, outcomes, and lessons learned



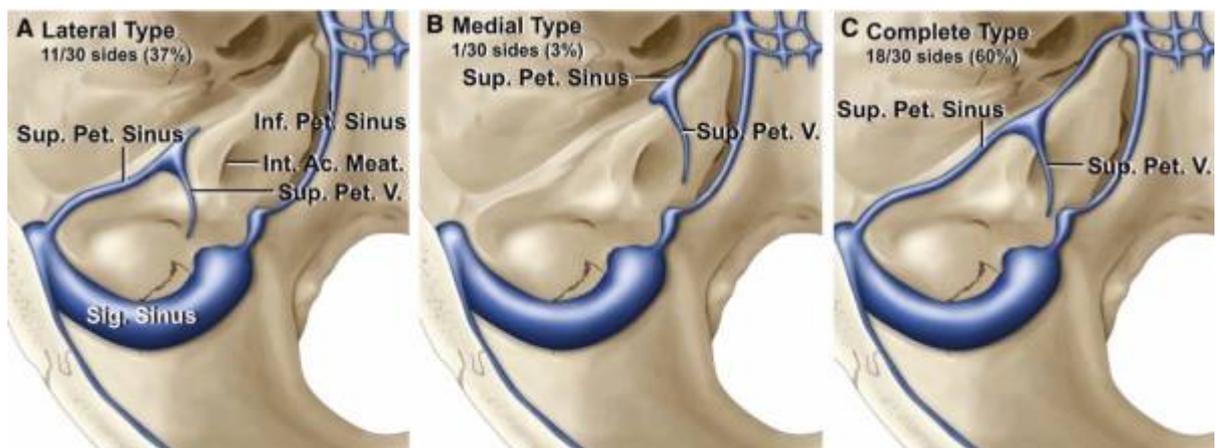
In the combined supra and infratentorial presigmoid approach a temporooccipital craniotomy is performed and the transverse sinus, the superior petrosal sinus and the sigmoid sinus are exposed. C: cerebellum; JB: jugular bulb; SPS: superior petrosal sinus; SS: sigmoid sinus; TL: temporal lobe; TS: transverse sinus.

The superior petrosal sinus receives blood from the cavernous sinus and passes backward and laterally to drain into the transverse sinus.



The sinus runs in the attached margin of the tentorium cerebelli, in a groove in the petrous part of the temporal bone formed by the sinus itself - the superior petrosal sulcus.

The sinus receives some cerebellar and inferior cerebral veins, and veins from the tympanic cavity.



The suprameatal extension of the retrosigmoid approach will permit removal of some tumors that are located mainly in the posterior fossa but that extend into the middle fossa in the region of Meckel's

**cave**. The exposure can be increased by opening the superior petrosal sinus as it crosses in the upper margin of the porus of Meckel's cave and by opening the tentorium lateral to Meckel's cave <sup>1)</sup>.

<sup>1)</sup>

Seoane E, Rhoton AL Jr. Suprameatal extension of the retrosigmoid approach: microsurgical anatomy. *Neurosurgery*. 1999 Mar;44(3):553-60. PubMed PMID: 10069592.

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Last update: **2024/06/07 03:00**

