Microvascular decompression (MVD) for neurovascular compression syndromes, such as trigeminal neuralgia and hemifacial spasm, has been traditionally described as an interposing technique using Teflon. Some alternative interposing materials have been proposed. In addition, transposing techniques have been increasingly reported as an alternative with a potentially lower recurrence rate and fewer complications.

To describe our experience with a technique consisting of transposition of the superior cerebellar artery using a fenestrated clip and a tentorial flap in patients with trigeminal neuralgia. METHODS:

We describe a novel transposing technique using a fenestrated clip and a tentorial flap in patients with neurovascular compression. An illustrative case is provided of an 83-year-old female patient who complained of a 4-year history of left trigeminal neuralgia caused by compression by the superior cerebellar artery who was treated with this technique. Furthermore, a thorough review of the literature is presented. RESULTS:

The patient underwent the procedure with the proposed technique without complication. Both the surgery and the postoperative course were uneventful. The patient remains asymptomatic 1 year after the procedure.

Gonzalez-Quarante et al. propose a novel technique for the treatment of trigeminal neuralgia, eliminating the need for padding the vessel with a foreign body. This technique can be applied successfully in selected cases of neurovascular compression syndromes [1].

1)
Gonzalez-Quarante LH, Ruiz-Juretschke F, Agarwal V, Garcia-Leal R. Microvascular Decompression for Trigeminal Neuralgia Using a Novel Fenestrated Clip and Tentorial Flap Technique. World Neurosurg. 2017 Oct;106:775-784. doi: 10.1016/j.wneu.2017.07.110. Epub 2017 Jul 25. PubMed PMID: 28754638.