

# Trigone meningioma surgery

## Approaches

Many approaches to the trigone have been described and the challenge is to choose the best to provide wide tumor exposure and early access to the vascular pedicle to allow complete tumor resection causing less additional lesion.

Surgical approaches for trigone [meningioma](#) is challenging, because excessive cortical dissection or brain retraction carries a risk of post-operative visual field deficit, speech disturbance, or epilepsy. Occlusion of posterior and anterior choroidal blood supplies is also important to achieve tumor hemostasis. Thus, there is still a degree of controversy regarding the optimal surgical approach for this tumour. Several surgical approaches have been described for trigone meningiomas, each with their proponents.

There is always a need for some kind of cortical incision and white fiber dissection to reach the tumor. Surgical resection is difficult without complications or new neurological morbidities. There is a high incidence (42%) of morbidity.

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