

Upper cervical schwannoma

C1 cervical schwannoma.

Upper cervical spinal schwannomas are rare lesions and together with meningiomas constitute around 5% of spinal tumors. The approach to these lesions is difficult because of the close proximity of the medulla and cervical spinal cord, lower cranial nerves, and the vertebral artery. Schwannomas in the upper cervical area typically arise from the dorsal roots and are located posterior to the dentate ligament. Nevertheless, a far lateral approach is often required for these lesions because of their lateral extent through the neural foramen and the proximity of both the V3 and V4 segments of the vertebral artery. With these lesions, an extensive condylectomy is rarely required. We present a case of a 40-yr-old woman who presented with an 8-mo history of deteriorating mobility and feeling of heaviness in the lower limbs with a further acute deterioration 1 wk before admission. She had a dissociated sensory loss and myelopathy in keeping with a partial hemicord syndrome. Imaging revealed a right-sided C2 intradural lesion extending through the C2 foramen in keeping with a C2 schwannoma. The patient was counseled on the treatment options, and informed consent for surgery was obtained. We describe a right-sided far lateral approach with minimal condylectomy for gross total resection of this lesion. We demonstrate the relationship of the tumor with the C2 nerve root, the spinal accessory nerve, and the cervical cord. We supplement the discussion with a 3D surgical video

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Budohoski KP, Barone DG, Kirollos RW, Santarius T, Trivedi RA. Far Lateral Approaches: Far Lateral Approach With Minimal Condylectomy for C2 Schwannoma: 3-Dimensional Operative Video. Oper Neurosurg (Hagerstown). 2022 Jan 1;22(1):e49. doi: 10.1227/ONS.0000000000000032. PMID: 34982919.

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