

Resection of a Retrochiasmatic Craniopharyngioma by Combined Modified Orbital Craniotomy and Transnasal Endoscopic Techniques

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Abstract

A 20-year-old patient presented with hydrocephalus but intact vision and hormone function. The MRI showed a large seller, suprasellar and third ventricular mass. We chose a combined approach utilizing the transylvian, lamina terminals route, with a possible interhemispheric approach. But, we also utilized a transnasal endoscopic approach for the tumor that remained below the diaphragma sellae. The patient did well, with complete tumor resection via a staged approach, but did require hormone replacement.

Keywords

- ▶ retrochiasmatic
- ▶ craniopharyngioma
- ▶ suprasellar
- ▶ endoscopic combined

The link to the video can be found at: <https://youtu.be/yzpfOxzI4cQ>.

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Conflict of Interest

None.



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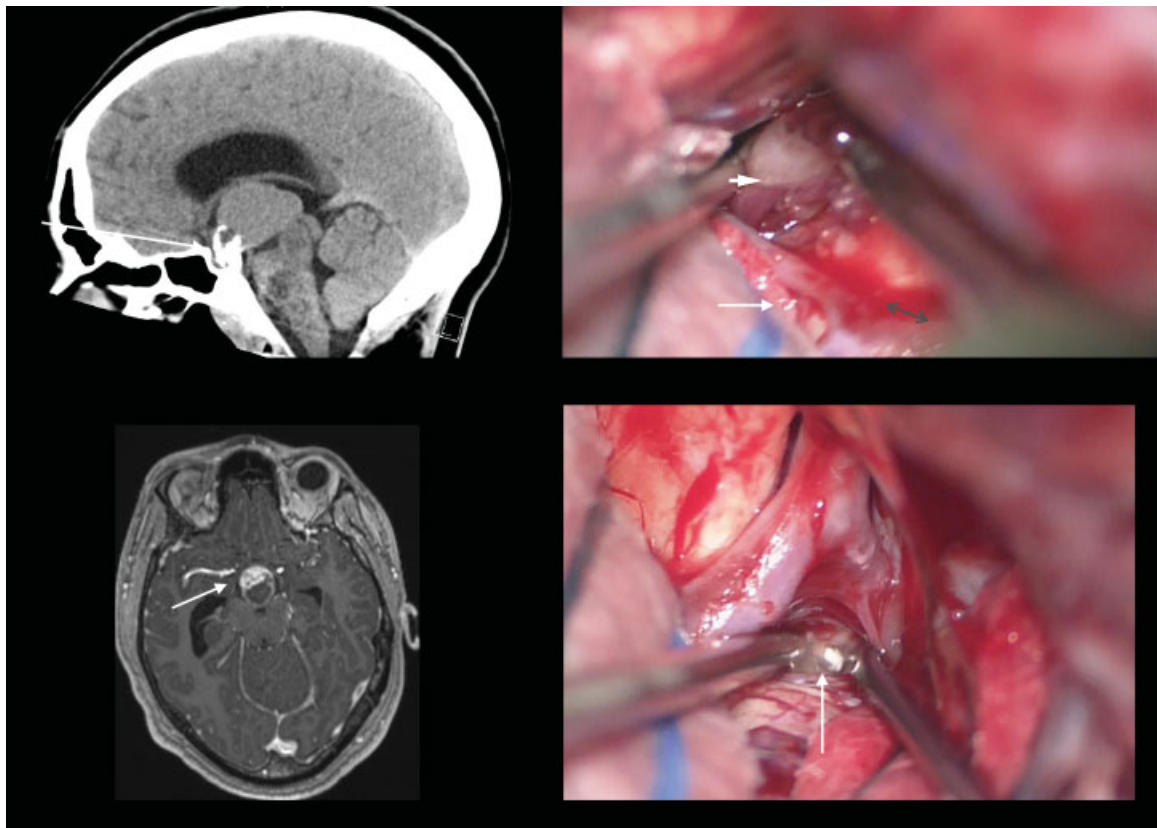


Fig. 1 (A) Through a right transylvian approach, the tumor is removed from the lamina terminalis (arrowhead). The right A1 (white arrow) and chiasma (black arrow) are seen. The CT scan shows the approximate trajectory to access the third ventricular component. (B) The suprasellar component is seen in the MRI (arrow) and removed between the ICA and PCOM (arrow). CT, computed tomography; ICA, internal carotid artery; MRI, magnetic resonance imaging; PCOM, posterior communicating artery.