



Retrosigmoid Craniotomy for Cerebellopontine Epidermoid Cyst

Julius Höhne¹ Alexander Brawanski¹ Karl-Michael Schebesch¹

¹Department of Neurosurgery, University Medical Center Regensburg, Regensburg, Germany

Address for correspondence Julius Höhne, MD, Department of Neurosurgery, University Medical Center Regensburg, Franz-Josef-Strauss-Allee 11, Regensburg 93053, Germany (e-mail: julius.hoehne@ukr.de).

J Neurol Surg B 2019;80(suppl S3):S329.

Abstract

Epidermoid cysts are benign lesions. The goal of this surgery is complete removal while preserving cranial nerves. Here, we illustrate the case of a 31-year-old male who presented with persistent headache following a short period of impaired consciousness. Imaging revealed a mass at the cerebellopontine angle (CPA) which at surgery proved to be an epidermoid cyst. In this video, we present the key steps of surgery. The postoperative course was uneventful and the patient was symptom-free at the 3 months of follow-up.

The link to the video can be found at: <https://youtu.be/0xwpkKwQoLI>.

Keywords

- ▶ epidermoid cyst
- ▶ cerebellopontine angle
- ▶ retrosigmoidal craniotomy
- ▶ cranial nerves

Conflict of Interest

None.



www.thieme.com/skullbasevideos

www.thieme.com/jnlsbvideos

received
June 25, 2018
accepted after revision
November 11, 2018
published online
February 28, 2019

DOI <https://doi.org/10.1055/s-0039-1677844>.
ISSN 2193-6331.

© 2019 Georg Thieme Verlag KG
Stuttgart · New York

License terms

