



Video Abstract

Optic nerve sheath meningioma endoscopic endonasal surgical management

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ABSTRACT

Background: Meningiomas of the optic sheath have been traditionally treated with radiotherapy, among other reasons, because of the poor results in terms of visual preservation of the open surgical approaches.

Case Description: Two cases of optic nerve meningioma were operated through an endoscopic endonasal expanded approach due to rapidly progressing visual deterioration and doubtful diagnosis. In the first case an exclusively bone decompression was performed. In the second one a partial resection of the intradural portion and complete opening of the dural sheath was undertaken. In both cases visual acuity remained stable without further treatment for the 2 years follow up.

Conclusions: Endoscopic endonasal decompression of the optic nerve by removal of the optic canal and opening of the optic sheath is safe. This approach is feasible for optic sheath meningioma. This treatment might be considered as an option in patients with rapidly deteriorating visual acuity.

Keywords: Optic Sheath Meningioma, Endoscopic Endonasal Expanded Approach, Optic Nerve Decompression

[Video 1]-Available on:

www.surgicalneurologyint.com

Annotations^[1-7]

- 1) 0:05 – Case 1
- 2) 0:31 – Preoperative MRI
- 3) 1:26 – Sphenoidotomy
- 4) 1:40 – Drilling of the optic canal
- 5) 2:04 – Roof of the optic canal is removed
- 6) 2:26 – Neronavigation confirms that the bony decompression is completed
- 7) 2:33 – Postsurgical images of Case 1
- 8) 2:54 – Case 2
- 9) 3:25 – Preoperative MRI
- 10) 3:58 – Drilling of the optic canal

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- 11) 4:30 – Roof of the optic canal
- 12) 5:03 – Floor of the canal/Optic Strut
- 13) 5:25 – Dura opening
- 14) 5:28 – Olfactory nerve
- 15) 5:50 – Optic sheath opening
- 16) 6:14 – Tumor removal
- 17) 6:43 – Optic nerve
- 18) 7:21 – Ophthalmic Artery
- 19) 7:50 – Final view
- 20) 7:56 – Tisseal®
- 21) 8:00 – Duragen®
- 22) 8:25 – Nasoseptal flap
- 23) 8:36 – Surgicel®
- 24) 8:39 – Tisseal® and final appearance
- 25) 8:50 – Postsurgical images of Case 2
- 26) 9:21 – Conclusion

Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent.

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Conflicts of interest

There are no conflicts of interest.

REFERENCES

1. Abhinav K, Acosta Y, Wang WH, et al. Endoscopic Endonasal Approach to the Optic Canal: Anatomic Considerations and Surgical Relevance. *Neurosurgery*. 2015;11 Suppl 3:431-445; discussion 445-436.
2. Berhouma M, Jacquesson T, Abouaf L, Vighetto A, Jouanneau E. Endoscopic endonasal optic nerve and orbital apex decompression for nontraumatic optic neuropathy: surgical nuances and review of the literature. *Neurosurg Focus*. 2014;37(4):E19.
3. Hunt PJ, DeMonte F, Tang RA, Su SY, Raza SM. Surgical Resection of an Optic Nerve Sheath Meningioma: Relevance of Endoscopic Endonasal Approaches to the Optic Canal. *J Neurol Surg Rep*. 2017;78(2):e81-e85.
4. Mariniello G, Bonavolonta G, Tranfa F, Maiuri F. Management of the optic canal invasion and visual outcome in spheno-orbital meningiomas. *Clin Neurol Neurosurg*. 2013;115(9):1615-1620.
5. Rassi MS, Prasad S, Can A, Pravdenkova S, Almefty R, Almefty O. Prognostic factors in the surgical treatment of intracanalicular primary optic nerve sheath meningiomas. *J Neurosurg*. 2018:1-8.
6. Roser F, Nakamura M, Martini-Thomas R, Samii M, Tatagiba M. The role of surgery in meningiomas involving the optic nerve sheath. *Clin Neurol Neurosurg*. 2006;108(5):470-476.
7. Schick U, Dott U, Hassler W. Surgical management of meningiomas involving the optic nerve sheath. *J Neurosurg*. 2004;101(6):951-959.

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