Left-sided retrosigmoid craniotomy for the resection of a vestibular schwannoma

Peter S. Amenta, M.D. and Jacques J. Morcos, M.D., FRCS (Eng), FRCS (Ed)

University of Miami, Neurosurgery, Miami, Florida

The cerebellopontine angle is the site for a wide-range of neoplastic and vascular pathologies. The retrosigmoid craniotomy remains the primary means by which to gain surgical access to this anatomically complex region. We present our standard technique for the completion of a retrosigmoid craniotomy and the resection of a left-sided vestibular schwannoma. Anatomy pertinent to the approach, including, the transverse and sigmoid sinuses, cranial nerves, and internal auditory canal (IAC) is displayed. Special emphasis is placed on patient positioning, adequate bone removal, and tumor resection. The drilling of the IAC and tumor dissection from the VII-VIII complex is also highlighted. Hearing preservation was achieved.

The video can be found here: http://youtu.be/FFZju5vcBi0.

Key Words • vestibular schwannoma • acoustic neuroma • retrosigmoid approach • hearing preservation • facial nerve • video