Supracerebellar transtentorial removal of a large tentorial tumor

Thomas Robert, MD¹, Alexander G. Weil, MD, FRCSC,^{1,2} Sami Obaid, MD,¹
Hosam Al-Jehani, MBBS, MSc, FRCSC,^{1,3} and Michel W. Bojanowski, MD, FRCSC¹

¹Division of Neurosurgery, Department of Surgery, Notre Dame Hospital, Montreal, QC, Canada;

²Division of Pediatric Neurosurgery, Department of Surgery, Sainte-Justine Hospital, Montreal, QC, Canada; and

³Department of Neurosurgery, King Fahad University Hospital, Dammam University, Saudi Arabia

Large tumors located on the upper surface of the tentorium, extending to the posterior edge of the tentorial incisura and affecting the posterior temporo-mesial region, are challenging to reach without damaging the surrounding brain. Typically, these lesions are approached through a subtemporal or a transcortical transtemporal corridor. To avoid temporal lobe transgression or retraction, and venous drainage compromise, we use a supracerebellar transtentorial (SCTT) approach which gives a direct exposure to the posterior temporo-medial region and the posterior incisural space. In this video, we demonstrate the surgical technique of the SCTT approach.

The video can be found here: <https://youtu.be/g3ilMO8vo4g>.

KEYWORDS supracerebellar transtentorial; tentorial tumor; posterior incisural space; solitary fibrous tumor; video

SUBMITTED August 30, 2015. **ACCEPTED** October 14, 2015.

INCLUDE WHEN CITING Published online January 1, 2016; DOI: <http://thejns.org/doi/abs/10.3171/2016.1.FocusVid.15445>.

CORRESPONDENCE Michel W. Bojanowski, MD, FRCSC, Division of Neurosurgery, Department of Surgery, Notre Dame Hospital, Montreal, QC, Canada. email: michel.bojanowski.chum@ssss.gouv.qc.ca.