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Supplemental material

Extended endoscopic transorbital approach with superior-lateral orbital rim osteotomy: cadaveric feasibility study and clinical implications (SevEN-007)

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Supplemental Table 1. Vertical, horizontal attack range and surgical freedom of ETOA, ETOA c LOR and ETOA c SLOR

Target point: ACP	ETOA	ETOA c LOR	ETOA c SLOR
Vertical angle (°)	22.5 ± 2.37	23.3± 1.34	36.1 ± 3.32
vs ETOA c SLOR (<i>p</i> value)	< 0.01	< 0.01	
Horizontal angle (°)	15.2 ± 0.52	31.8 ± 5.49	43.8 ± 7.49
vs ETOA c SLOR (<i>p</i> value)	< 0.01	< 0.01	
Surgical freedom (mm³)	1793.8 ± 42.7	4191.3 ± 57.2	6025.1 ± 220.1
vs ETOA c SLOR (<i>p</i> value)	< 0.01	< 0.01	

ACP = anterior clinoid process; ETOA = endoscopic transorbital approach; ETOA c LOR = ETOA with lateral orbital rim osteotomy; ETOA c SLOR = ETOA with superior-lateral orbital rim osteotomy.

Supplemental Table 2. Access level of ETOA, ETOA c LOR and ETOA c SLOR

	ETOA	ETOA c LOR	ETOA c SLOR
Frontal lobe	moderate	moderate	comfortable
Superior Orbital	hard	hard	comfortable
Lateral Orbital	comfortable	comfortable	comfortable
Medial Orbital	hard	hard	moderate
Inferior Orbital	hard	hard	hard
Olfactory Groove	hard	hard	moderate
planum sphenoidale	hard	hard	comfortable
Suprasella	moderate	moderate	comfortable
Parasella	moderate	moderate	comfortable
Sphenoid ridge	comfortable	comfortable	comfortable
Cavernous	comfortable	comfortable	comfortable
Temporal lobe	comfortable	comfortable	comfortable

ETOA = endoscopic transorbital approach; ETOA c LOR = ETOA with lateral orbital rim osteotomy; ETOA c SLOR = ETOA with superior-lateral orbital rim osteotomy.