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Avoidance of complications of endoscopic transsphenoidal surgery: A single centre review

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Endo-nasal transsphenoidal approach was first established in 1906 and has been further refined in the last 20 years with the use of Eendoscopic methods. The aim of this study is to study the complications of Transsphenoidal Surgery (TSS) as well as management of these complications and aims for future avoidance. This is a retrospective study conducted in Hospital Queen Elizabeth 2 in the state of Sabah, Malaysia from January to December, 2017. Data was collected and analyzed for all patients who underwent endoscopic TSS. All complications were identified and classified into neurosurgical and non-neurosurgical categories. A total of 25 patients were recruited out of which 24 were sellar lesions and 1 suprasellar lesion. Commonest diagnosis for TSS was pituitary macroadenoma with visual symptoms. As for the complication, 12 patients developed panhypopituitarism which was medically treated. 5 patients developed Cerebrospinal Fluid (CSF) leak which was treated with prolonged course of antibiotics and External Ventricular Drainage (EVD) but died secondary to sepsis. Another patient developed delayed postoperative bleeding despite nasal fat grafting and packing which required re-exploration and haemostasis in the operating theatre. In conclusion, TSS provides an easy access to most sellar and parasellar lesions. Adequate anatomical knowledge and skill is required for avoidance of complications. In the presence of complications, a vast knowledge of its management is essential to reduce mortality and morbidity.

Biography

Jonathan Joseph is a Resident Trainee in the Neurosurgery Department of Queen Elizabeth Hospital, Kota Kinabalu, Sabah. He is both a Clinician and an Educator. He has interest in medical education and is currently pursuing his Postgraduate studies in Medical Education with the University of Dundee. His research interest includes surgical oncology and vascular pathologies.

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