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**Prone positioning for posterior fossa tumors resection: New experience in Iraq**

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**B**rain tumors are the second most common malignancy in children. About one third occurred in toddlers under the age of 3 and about two thirds are located in the posterior fossa. Lesions in the posterior cranial fossa are difficult problem to the neurosurgeon and the anesthetist. Surgical damage to vital medullary centers and air embolism are the main dangers. The neurosurgical default work and training in Iraq is directed toward the sitting position to resect posterior fossa tumor using the classical Sugita skull fixation system. In this paper we will clarify the use of prone position instead of sitting position to treat such cases. A prospective study done on five cases of pediatric posterior fossa tumors operated at Al Hussein Teaching Hospital of Nasiriyah using the prone position with the aid of Mayfield skull fixation system instead of Sugita. One case diagnosed as medulloblastoma, one case diagnosed as dermoid cyst and three case diagnosed as cerebellar astrocytoma with minimum operative and post-operative complications.

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