NS-20. SURGICAL MANAGEMENT OF INTRACAVERNOUS LESIONS IN THE PEDIATRIC PATIENT: A SINGLE CENTER EXPERIENCE
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OBJECTIVE: Lesions in the cavernous sinus that require surgical intervention are rare in the pediatric population. Here we present our surgical experience with intracavernous lesions over the past two years. METHODS: We retrospectively reviewed our cases from 2014-2016 looking at age, operating room time, blood loss, pathology, extent of resection, follow-up time, improvement of symptoms, and any complications. RESULTS: Five patients, 2 of them male, under the age of 18 years, were identified. The average age was 11 years, with the youngest patient being 5 years old. All of them underwent an orbitozygomatic craniotomy with a transcavernous approach to resect their tumor. The average operating room time was 5 hours and 19 minutes. Blood loss on average was 475 ml. There were no complications. Each patient had a different pathology and they were: hemangioendothelioma, meningioma, Burkitt’s lymphoma, ectopic cartilaginous tissue, and benign connective tissue. Post-operative MRIs showed one patient (20%) had a gross total resection of their lesion, another patient (20%) had a near total resection, while the others (60%) had a subtotal resection. Two patients (40%) had improvements of their pre-operative cranial neuropathies, two patients (40%) had no improvement, while one patient (20%) developed new symptoms post-operatively. The average follow-up time was 11 months. CONCLUSION: Lesions in the cavernous sinus are a rare occurrence and can be challenging to the pediatric neurosurgeon due to the anatomy and the age of the patient. Despite this, a skull base approach to these lesions can be performed safely with little morbidity.