



SANAMI

Sydney Acoustic Neuroma and Meningioma Institute

Anterior Skull Base Tumours

Advanced endoscopic nasal tumours have allowed excellent exposure and access to the anterior skull base.

The previous problem with this approach was closure of the defect after resection. Persistent CSF leak was a major problem. With development of new biomaterials as well as vascularized pedicle flaps we are now able to endoscopically reseal and reconstruct the anterior skull base. This can be done purely endoscopically and occasionally needs to be combined with a craniotomy. The specific tumour or disease process will determine best approach.

The commonest lesions to be addressed with these new techniques include Inverting Papilloma, aesthesioneuroblastoma, meningioma, benign intracranial cysts, pituitary lesions with suprasellar extension, meningocele and encephalocele.

