EPILEPSY SURGERY IN TUBEROUS SCLEROSIS







DIAGNOSIS

- Cerebral tumor
- Traumatic subdural/epidural hematoma/
- Aneurysms/arteriovenous malformation (AVM)
- Fracture
- Epilepsy surgery in tuberous sclerosis





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(**E**)

TECHNICAL DETAILS

PATIENT

Age Adult ₆ years Children **Remarks** 1st operation ■ Re-operated ■ 2nd ■ 3rd ■ 4th Others

CRANIOTOMY

Craniotomy location

- Bifrontal
- Frontal
- Frontoparietal
- FrontoparietaltemporalSuboccipital
- Frontotemporal
- Occipital
- Orbitozygomatic

Side

- Left
- Right

Approx. craniotomy size

Length x width: $\frac{5}{}$ x $\frac{7}{}$ cm

- Yes
 No
- Perforator (Size: 11mm 13mm 14mm)

Parietal

Pterional

Retromastoid

Supraorbital

Temporal



- High speed ball drill (Size: mm)



CRANIOTOMY CLOSURE

Craniotomy closure devices in this case:

- Oranial LOOP™. How many?
- Cranial LOOP L™. How many?
- Cranial LOOP XL™. How many?

Other materials used:

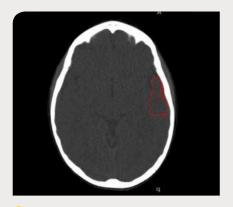
- Dura sealant
- Dural tag
- Others (Please specify)











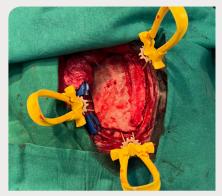
1 Preoperative cranial CT



OR environment



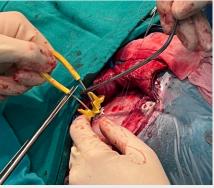
Craniotomy before fixation showing bone flap



4 Insertion of the cranial loops at the bone edges, between the dura and the bone.



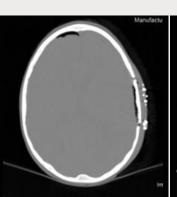
5 Breaking of the Cranial LOOP cable ties



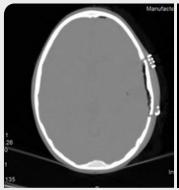
6 Bone flap fixed with Cranial LOOP



CT shows good anatomical position of the bone flap.



bone flap.



Axial CT image shows the



7 Post operative CT Scan

