



GRUPPO OTOL

154° Edition

Monday 27th May 2024

	LECTURES	SPEAKER/MAIN TUTOR
08:00 – 09:00	Surgical Approach of to the Lateral Skull Base	Dr. Gianluca Piras
09:00 – 09:30	Videotape: Skull Base Surgical Anatomy	
09:30 – 09:45	COFFEE BREAK	
09:45 – 13:30	LIVE SURGERY: Gruppo Otologico Cases Presentation	Dr. V. Di Rubbo Dr. C. Kihlgren Dr. G. Fancello
13:30 – 14:00	LUNCH BREAK	
14:00 – 14:30	From Otoscopy to Surgery Retrotympanic mass	Dr. A. Caruso
14:30 – 15:00	How to have the best drilling experience Bien Air	
15:00 – 19:30	Dissection Laboratory	

Tuesday 28th May 2024

	LECTURES	SPEAKER/MAIN TUTOR
08:00 – 09:00	Temporal Bone Paraganglioma	Dr. M. Sanna
09:00 – 09:15	COFFEE BREAK	
09:15 – 13:30	LIVE SURGERY: Gruppo Otologico Cases Presentation	Dr. V. Di Rubbo Dr. C. Kihlgren Dr. G. Fancello
13:30 – 14:00	LUNCH BREAK	
14:00 – 14:30	Management of Facial Nerve Tumor	Dr. A. Russo
14:30 – 19:30	Dissection Laboratory	

Wednesday 29th May 2024

	LECTURES	SPEAKER/MAIN TUTOR
08:00 – 08:30	Management of Petrous Bone Cholesteatoma	Dr. E. Piccirillo
08:30 – 08:45	VIDEOTAPE	
08:45 – 13:30	COFFEE BREAK	
08:45 – 13:30	LIVE SURGERY: Gruppo Otologico Cases Presentation	Dr. V. Di Rubbo Dr. C. Kihlgren Dr. G. Fancello
13:30 – 14:00	LUNCH BREAK PHOTO	
14:00 – 18:30	Dissection Laboratory	
20:30	Dinner at "La Rocchetta" Restaurant + Prize for the Best Dissection	

Thursday 30th May 2024

	LECTURES	SPEAKER/MAIN TUTOR
08:00 – 08:45	Petrosus Bone Carcinoma	Dr. G. Piras
08:45 – 09:00	COFFEE BREAK	
09:00 – 13:30	LIVE SURGERY: Gruppo Otologico Cases Presentation	Dr. V. Di Rubbo Dr. C. Kihlgren Dr. G. Fancello
13:30 – 14:00	LUNCH BREAK	
14:00 – 14:30	Vestibular Rehabilitation after Vestibular Schwannoma of the VIII C.N.	Dr. A. Giannuzzi
14:30 – 18:30	Dissection Laboratory	



GRUPPO OTOLARINGICO

Friday 31st May 2024

LECTURES		SPEAKER/MAIN TUTOR
09:00 – 09:30	Acoustic Neurinoma Management	Dr. L. Lauda
9:30 – 10:15	Facial Nerve Reanimation in Skull Base Surgery	Dr. L. Lauda
COFFEE BREAK		
10:45 – 13:00	LIVE SURGERY: Gruppo Otorinolaringologico Cases Presentation	Dr. V. Di Rubbo Dr. C. Kihlgren Dr. G. Fancello
13:00 – 14:00	LUNCH BREAK Q&A And Diploma	



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Piacenza, 27 May 2024

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Medici specialisti in
Chirurgia dell'orecchio medio
Otoneurochirurgia
Impianti Cocleari
Impianti al tronco
Chirurgia della base cranica
Prof.Mario Sanna
Dott.Abdelkader Taibah
Dott.ssa Alessandra Russo
Dott.Fernando Mancini
Dott.Enrico Piccirillo
Dott.Antonio Caruso
Dott.Lorenzo Lauda
Dott.ssa Annalisa Giannuzzi
Dott.Gianluca Piras
Dott.ssa Vittoria Di Rubbo

Neurochirurgia
Dott.Abdelkader Taibah

Tecnici di Audiometria
Valerio Sozzi
Gloria Cagliero
Marianna Ciotti

Audioprotesisti
Massimo Bocchi

Amministrazione
Denise Draghi
Elena Doro

Dear Colleague,

I give you my personal welcome to the Gruppo Otologico for the 154° Skull Base Surgery Course

You will be my honoured guest for dinner at Restaurant “LA ROCCHETTA” located in Rivalta Castle on 29 th of May 2024 at 8,30pm

Best regards,

Prof. Mario Sanna



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Irene Fasoli

Dear Colleague

you can find in this special link some articles written by the equipe of the Gruppo Otologico.

<https://www.gruppootologico.it/hands-on-courses-2024>

They can be useful during the Skull Base Surgery Course.

Looking forward to meeting you in Piacenza.

Best regards

Prof. Mario Sanna



154°SKULL BASE SURGERY COURSE

27/31 May, 2024

DISSECTION WITH FRESH TEMPORAL BONES AND HALF HEAD

The following procedures will be practiced in the lateral skull base dissections course:

Monday, first day (with a temporal bone)(1)

1 Translabyrinthine approach

- Mastoidectomy with identification of sigmoid sinus and jugular bulb
- Identification of the MCF and PCF dura
- Identification of the third portion of the facial nerve and the digastric ridge
- Identification of the incus and malleus
- Identification of the 3 semicircular canals
- Opening of the canals and identification of the vestibule
- Identification of the IAC and of the ampullary nerve, the superior and inferior vestibular nerve

2 Translabyrinthine approach with transapical extension

- Drilling of the bone of the apical compartment superior and inferior of the IAC until the apical bone (petrous apex is removed. The bone between the MCF dura and the roof of the IAC, and the bone between the floor of the IAC and the dome of the jugular bulb)

3 Transotic approach (with the same bone)

- Removal of the EAC, the Tympanic Membrane and the ossicles, identification of the II portion of the facial nerve
- Drilling of the cochlea with identification of the three turns
- Drilling the bone anteriorly to the cochlea in order to dissect the vertical portion of the internal carotid artery and to identify the relationships between the ICA, the Eustachian tube and the jugular bulb. The FN must be left in place.

Tuesday, second day (with a new temporal bone) (2)

1) Modified transcochlear approach

- Mastoidectomy with identification of the sigmoid sinus, jugular bulb
- Identification of the dura of the MCF, the PCF (pre and post sigmoid)
- Identification of the incus and malleus head
- Identification of the third portion of the facial nerve and to the digastric ridge
- Identification of the 3 semicircular canals
- Removal of the EAC with the TM, malleus and incus
- Labyrinthectomy with identification of the 2nd portion of the facial nerve
- Identification of the IAC
- Identification of the round and oval window
- Skeletonization of the jugular bulb
- Drilling of the cochlea with identification of the turns
- Drilling of the petrous apex
- Decompression and posterior rerouting of the facial nerve.
(from the ICA to the stylomastoid foramen digastric ridge)
- Decompression of the vertical portion of the ICA. Identify the relationships between the ICA and the jugular bulb and the Eustachian tube

Wednesday, third day (with half head)

1 Middle cranial fossa approach

- Preaurical incision and identification of the zygomatic process
- Craniotomy (4X4)
- MCF dura dissection and identification of the subarcuate eminence and the greater superficial petrosal nerve
- Identification and drilling of the tegmen timpani in order to identify the incus, the head of the malleus
- Identification of the blue line of the s.s.c. identification of the cochlea.
- Identification of the Eustachian tube
- Identification of the middle meningeal artery
- Identification of IAC, Bill's Bar, opening of the canal

2 Middle cranial fossa with transapical extension (same side)

- Enlarge anteriorly the craniotomy with removal of the zygomatic arch
- Incision of the temporal muscle
- Identification of the middle meningeal artery and the foramen spinosum
- Identification of the third branch of the trigeminal nerve and the foramen ovalis
- Identification of the 2nd branch of the V cranial nerve and the foramen rotundum

3 Infratemporal fossa approach type B

- Transtemporal stage, mastoidectomy (subtotal petrosectomy)
- Same steps as in the first part of the transotic approach leaving intact the cochlea and the semicircular canals
- Identification of the Round, oval windows and Eustachian Tube.

- Identification of the cochleariform process, muscle of the malleus and the Ica anterior to the cochlea
- Drilling of the anterior wall of the external auditory canal
- Identification of the glenoid fossa
- Craniotomy (large) of the middle cranial fossa and dissection of the zygomatic process
- Dissection of the dura of the middle cranial fossa
- Drilling of the vertical portion of the I.C.A.
- Identification of the genu of the ICA
- Relationships between the Eustachian tube and the orizontal portion of the ICA
- Identification of the MMA (middle meningeal artery and the foramen spinoso)
- Identification of the III^o branch of the trigeminal nerve and the foramen ovalis

Thursday, fourth day (with the same half head)

Infratemporal fossa approach type A

a) Transtemporal stage

Mastoidectomy (subtotal petrosectomy)

- Same steps of the first part of the transotic approach leaving intact the semicircular canals and the cochlea.
- Identification of the oval window, round window, stapes, Eustachian tube
- Identification of the 2nd and 3rd portion of the facial nerve the facial nerve and the extra temporal facial nerve (in the parotid)
- Identification of the sigmoid sinus down to the jugular bulb

b) Transcervical Stage

- Identification of the posterior belly, of the digastric muscle
- Identification of the S.C.M. muscle
- Identification of the XI C.N., jugular vein, ICA (common, internal and external)
- Identification of the X and XII cranial nerve
- Decompression of the facial nerve from the geniculate ganglion to the stylo mastoid foramen- Identification of the facial nerve in the parotid
- Anterior Rerouting of the facial nerve
- Dissection of the ICA from the skull base to the Eustachian tube
- Decompression and drilling of the condyloid process
- Opening of the jugular bulb and identification of the inferior petrosal sinus and the lower cranial nerves

Friday, fifth day (same half head)

Suboccipital approach (combined with retrolabyrinthine approach)

- Identification of PSC and the Endolymphatic Sac
- Large craniotomy posterior to the sigmoid sinus
- Opening of the dura and identification of the VII-VIII nerves in the CPA
- Identification of the lower cranial nerves in the lateral cistern.
- Identification of the AICA/PICA vestibular artery, basilar and vertebral artery
- Identification of the VI c.n. / V c.n.
- Drilling of the posterior wall of the IAC with identification of the VII and VIII c.n. In the fundus of the IAC