



SKULL BASE SURGERY 157° COURSE

Monday 18th November 2024

| LECTURES | SPEAKER / MAIN TUTOR |
|---------------|---|
| 08:00 – 08:30 | Surgical Anatomy of the Cerebellopontine Angle Dr. J. Magnan |
| 08:30 – 09:00 | Surgical Approach of to the Lateral Skull Base Dr. G. Piras |
| 09:00 – 09:30 | Videotape: Skull Base Surgical Anatomy |
| 09:30 – 09:45 | COFFEE BREAK |
| 09:45 – 13:30 | LIVE SURGERY: Gruppo Otológico Cases Presentation |
| 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 |

Wednesday 20th November 2024

| LECTURES | SPEAKER / MAIN TUTOR |
|---------------|--|
| 08:00 – 08:30 | Management of Petrous Bone Cholesteatoma Dr. E. Piccirillo |
| 08:30 – 08:45 | COFFEE BREAK |
| 08:45 – 13:30 | LIVE SURGERY: Gruppo Otológico Cases Presentation Dr. V. Di Rubbo Dr. C. Kihlgren Dr. G. Fancello |
| 13:30 – 14:00 | LUNCH BREAK PHOTO |
| 14:00 – 14:30 | Acoustic Neurinoma Management Dr. A. Taibah |
| 14:30 – 19:30 | Dissection Laboratory |

Tuesday 19th November 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 Otológico Cases Presentation Dr. V. Di Rubbo Dr. C. Kihlgren Dr. G. Fancello |
| | LUNCH BREAK |
| 14:00 – 14:30 | Management of Facial Nerve Tumor Dr. A. Russo |
| 14:30 – 19:30 | Dissection Laboratory |

Thursday 21st November 2024

| LECTURES | SPEAKER / MAIN TUTOR |
|---------------|--|
| 08:00 – 08:45 | Petrous Bone Carcinoma Dr. G. Piras |
| 08:45 – 09:00 | COFFEE BREAK |
| 09:00 – 13:30 | LIVE SURGERY: Gruppo Otológico Cases Presentation Dr. V. Di Rubbo Dr. C. Kihlgren Dr. G. Fancello |
| 13:30 – 14:00 | LUNCH BREAK |
| 14:00 – 14:30 | Refinements in TLA Dr. A.L. Giannuzzi |
| 14:30 – 18:30 | Dissection Laboratory |



GRUPPO OTOLOGICO

20:30

Dinner at "La Rocchetta" Restaurant + Prize
for the Best Dissection



Friday 22nd November 2024

| | LECTURES | SPEAKER/ MAIN TUTOR |
|---------------|--|---|
| 09:00 - 09:30 | Facial Nerve Reanimation in Skull Base Surgery | Dr. L. Lauda |
| 09:30 - 10:00 | COFFEE BREAK | |
| 10:00 - 13:00 | LIVE SURGERY: Gruppo Otologico Cases Presentation | Dr. V. Di Rubbo Dr. C. Kihlgren Dr. G. Fancello |
| 13:00 - 14:00 | LUNCH BREAK Q&A And Diploma | |



casa di cura
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**GRUPPO
OTOLOGICO**

Piacenza, 21 October 2024

**Unità Operativa di
Otorinolaringoiatria
"Gruppo Otológico"**

c/o Casa di Cura Piacenza
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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 Otológico for the 157° Skull Base
Surgery Course*

*You will be my honoured guest for dinner at Restaurant "LA ROCCHETTA"
located in Rivalta Castle on 21st of November 2024 at 8,30pm*

Best regards,

Prof. Mario Sanna



FONDAZIONE
ONLUS
**MARIO
SANNA**



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Denise Draghi
Elena Doro
Irene Fasoli

Dear Colleague

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

<https://gruppootologico.com/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



FONDAZIONE
ONLUS
**MARIO
SANNA**



157°SKULL BASE SURGERY COURSE

18-22 November, 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.

Thursday, 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

- Preauricular 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 horizontal portion of the ICA
- Identification of the MMA (middle meningeal artery and the foramen spinosum)
- 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 cn. In the fundus of the IAC