COLLOID CYSTS OF THE THIRD VENTRICLE – SURGICAL EXPERIENCE OF A SINGLE CENTER

C.D. Paunescu[1,2], M. Gorgan[1,2], V. Ciubotaru[1], L. Tataranu[1,2]
[1]*Clinic of Neurosurgery, Emergency Clinical Hospital Bagdasar-Arseni, Romania*
[2]*University of Medicine and Pharmacy, "Carol Davila", Romania*
cdpaunescu@yahoo.com

OBJECTIVE: It isn't determined which is the best surgical option for third ventricle colloid cysts. Endoscopic approach is less invasive. Transcallosal interhemispheric and transcortical approaches are typically reserved for patients with large cysts. For selected cases ventriculoperitoneal shunt is an option.

MATERIALS AND METHODS: Sixty one patients with colloid cysts of the third ventricle operated at Bagdasar Arseni Emergency Hospital, Bucharest, between 2000 and 2014 were retrospectively analyzed for the surgical outcome and complications. CT or IRM scan of the brain was done before and after surgery.

RESULTS: An analysis was performed for resection rates, morbidity and mortality based on treatment strategy. Twenty five patients were included in the endoscopic group, 4 in the shunt group and 32 in the microsurgical one. Total resection was achieved in 64% of endoscopic group compared to 93.75% of the microsurgical group (p 0.001), but with higher morbidity in the second group (12% compared to 18.75%). The median hospital stay was 8 days for microsurgical group, 6 days for shunt group and 5 days for endoscopic one. There were no deaths related to the surgery.

CONCLUSION: Lower morbidity rate but lower rate of complete resection was observed in the endoscopic group compared to microsurgical one.