

Transsphenoidal Removal of Pituitary Tumor and Skull-Based Tumor

University Neurosurgery Information Sheet

General Indications for the Procedure:

The indication for the procedure is a symptomatic tumor at the base of the patient's skull.

Description of the Procedure:

The procedure involves general anesthesia and endoscopic or open approach to the base of the skull through the nasal and sinus passages, which may be done in conjunction with an ear, nose and throat skull-based surgeon. The skull base is exposed, by the skull base surgeon, by opening the natural passages in the sinuses. The tumor is then exposed, biopsied, and removed to the extent possible and visible and safe as determined by the surgeon. Surgical tools are guided by endoscopes.

Risks of Procedure:

The potential risks of this procedure include the general risks of any surgical procedure such as infection, bleeding and anesthesia. Another important specific risk to the transsphenoidal route is the risk of cerebrospinal fluid leak and the risks associated with cerebrospinal fluid leak such as headache and an infection such as meningitis. This may lead to the need for a small drain being placed in the low back or reoperation to patch the leak. Other risks of operating at the skull base include visual loss, double vision, droopy eyelid, hormone disturbance and need for temporary or permanent hormone replacement. Other risks include problems with smelling, function, stroke, bleeding, paralysis, sensory loss, tumor recurrence, need for further treatment, coma and death.

Procedure Alternatives, if any:

The alternative to having this procedure would be observation of the natural history of the patient's disease and follow up MRI scans, medical therapy if available for the patient's condition or an open transcranial approach to the problem.

Probable Consequences of Refusing the Procedure:

Progressive neurological decline and injury related to the patient's tumor condition.

Person(s) Performing the Procedure:

The surgical team for this procedure is large. This involves, but is not limited to, the attending surgeons, resident surgeons, surgical nurses, physician assistants, surgical technologists and anesthesiologists. Everyone involved will be performing important tasks related to the surgery in accordance with the hospital policies, and based on their skill set and under the supervision of the responsible practitioners.