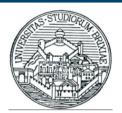
Joint European diploma of endoscopic skull base surgery









- Starting November 2013 (End of registration October 30th)
 - Course language: English

- Course directors:

Paolo Castelnuovo, Philippe Herman, Piero Nicolai

- Faculty: D Bresson, P Castelnuovo, C Debry, M Fontanella, S Froelich, B George, P Herman, R Kania, D Locatelli, P Nicolai, G Tomei

- Three hands-on sessions in Paris:

2 days hands-on on frozen specimen / 1 day lectures 2013 December 9-11, 2014 February 10-12, 2014 May 5-7

- A fellowship in two different departments

Endoscopic transnasal skull base surgery, Indications, Techniques, Limits,

For each approach, indications will be discussed, as well as alternatives, either surgical or non surgical. Each procedure will be taught in detail in order to be performed by the student during dissection. Hints and Pitfalls will be pointed out.

100 hours of lectures and training program

Three seminars = 72 hrs: Dissection with lectures: two days (16 hrs) Lectures: one day (8 hrs) A fellowship of two days in two different departments (32 hrs)









Registration form

FIRST SEMINAR - BASICS

- Paranasal sinus and skull base anatomy. Vascular anatomy: ICA, vertebral artery, IMA.
- Physiology of CSF and intracranial pressure Physiopathology of meningoceles and encephaloceles. Lumbar drainage.
- Imaging for skull base disease cranial nerves
- Interventional radiology
- Radiotherapy and skull base. Gammaknife. Proton beam therapy.
- Pituitary tumours biology
- Meningiomas
- Chondrosarcomas
- Chordomas
- Tumours of the sinonasal tract
- Navigation
- Anesthesia
- Postoperative care
- Technical prerequisite for surgery under endoscopic guidance. Equipment instruments
- Classification of endoscopic approaches to the ventral skull base

SECOND SESSION

- Orbit and optic nerve
 - Anatomy of the orbit
 - The role of the ophthalmologist
 - Endoscopic orbital and trans-orbital surgery. Orbit and optic nerve decompression.
- Cribriform plate Transcribriform approach
 - Approach to and through the frontal sinus. Management of frontal sinus.
- Transcribriform approach: Technique Indications (meningioma, ethmoid adeno carcinoma, olfactory neuroblastoma) Pitfalls Complications.
- Sellar and parasellar
 - Treatment strategies for pituitary tumours: Surgical indications. Endoscopic technique for lesions limited to the sella
 - Surgery for tumors with cavernous invasion: endoscopic cavernous sinus surgery
- - Transplanar approach.
 - Management of suprasellar pituitary adenomas
 - Management of planum meningiomas
 - Management of craniopharyngiomas
- Clivus and transclival surgery
- Endoscopic transnasal approach to the posterior fossa

THIRD SESSION

- Lateral corridors
 - Medial maxillectomy Trans maxillary approach to the infratemporal fossa Transpterygoid approach
 - Medial approach to Meckel's cave, to the petro-clival junction and petrous apex
 - Approach to the nasopharynx and parapharyngeal space
- Craniocervical junction
 - Decompression of the craniocervical junction
- Adjunctive procedures
 - Complications in endoscopic skull base surgery. Management.
 - Vascular complications.
 - Techniques of dural plasty Advanced reconstructive techniques with local, regional and free flaps
- Endocrine complications
- Strategy case discussion
- Management of chordomas
- Management of chondrosarcomas - Management of meningiomas
- Management of pituitary adenomas
- Management of JNA
- Management of bony lesions
- Management of sinonasal tumours

Cycle FMC 2013 www.orl-lariboisiere.com

Registration fees: Resident 2000 € / MD 3000€ Information and Preregistration: philippe.herman099@gmail.com

⊒Je souhaite m'inscrire :	Joint European d	inloma of endos	scopic skull	base surgery
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Please fill this form and send it by mail: philippe.herman099@gmail.com, fax: +33149958063 or p	ost
it to Prof P. Herman, Service ORL, Hopital Lariboisière, 2 rue Ambroise Paré, 75010 PARIS, FRAN	CE
Nom:	

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