Fronto-orbital osteotomy in the surgical management of recurrent Adenoid cystic carcinoma involving Anterior skull base.

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1. AIM & METHODS

A multi-specialty approach is often required to provide optimal therapy in surgical management of tumours of the anterior and middle skull base.

In recurrent tumors, wide access and thorough understanding of the regional anatomy is significantly important to prevent further relapse.

Our group planned to review the English literature and discuss various approaches for the management of recurrent adenoid cystic carcinoma (ACC) of lacrimal gland.

A case of recurrent ACC of lacrimal gland involving the anterior skull base is discussed regarding the approach used and the importance of multidisciplinary team in the management of such cases.

2. RESULTS

Various approaches like fronto-orbital, fronto-orbito-nasal, fronto-orbito-zygomatic and its extensions are found to be used in accessing the tumors depending on the location, size and invasion to surrounding structures.

A 38-year old female reported as a recurrent case of ACC lacrimal gland. MRI showed the invasion of anterior skull base by the tumor with attachment to the dura (Fig 1a).

This patient was operated by the multi disciplinary team of maxillofacial, neuro and ophthalmic surgeons, using fronto-orbital osteotomy approach (Fig 1b).

3. RESULTS (Complications)

Complete tumor was removed and the osteotomised bone piece was replaced to cover the skull defect and fixed by using titanium microplates (Fig 2a,b).

Patient recovered well with good esthetic outcome. No complication was encountered and was recurrence free till the last follow up at 2 years (Fig 3).

Approaches like fronto-orbital and fronto-orbito-zygomatic osteotomies are needed for accessing large and recurrent tumors (Adenoid cystic carcinoma) of lacrimal gland, to decrease the chances of relapse and complete excision of tumor.

Involvement of multidisciplinary team is very important to achieve the optimal outcome.

Conflict of Interest: No

REFERENCES


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