

FP01

Sagittal synostosis using endoscopic suturectomy without postoperative helmet in non syndromic synostosis

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Introduction and Objectives: Suturectomy as a treatment for craniosynostosis was largely replaced in the late twentieth century by more extensive cranial remodeling procedures.

Recent technical innovations, using the endoscope combined with postoperative orthotic reshaping, have led to a resurgence of the interest in suturectomy as a safer, less invasive method.

Some studies present questions about the necessity of this helmet.

We present our serie of sagittal synostosis using endoscopic suturectomy without systematic helmet.

Material and Methods: A retrospective chart review was performed for all cases of sagittal synostosis treated with endoscopic sagittal suture strip craniectomy and helmet therapy between 2008 and 2012. Data collected included age at operation, preoperative and postoperative head circumference percentile and cranial index, and presence of frontal boosing at 12 months.

Results: Twenty-six patients with isolated sagittal synostosis were treated using endoscopic suturectomy. Mean age at time of procedure was 3,5 months. Only in 5 cases present frontal boost at 6 months control, and only 3 of used of helmet. None of them present frontal boosing at 12 months. Cranial index was 69,5 and 75,7 pre and postoperative at 1 year control. No reoperations were needed.

Conclusions: This small serie demostrates that we could get good cosmetic result without helmet teraphy.

This date could be consideredated to reduce cost in this therapy.