

PP72**Neuroendoscopic treatment of intracranial lesions in children**Marjan Korsic*Department of Neurosurgery, University Medical Centre Ljubljana, Slovenia*

Introduction: Neuroendoscopy is becoming the method of choice for different intracranial lesions. It reduces the brain retraction and allows a panoramic view of the ventricular or cystic cavity. We present neuroendoscopic treatment of three different intracranial lesions in children.

Patients and Methods: Two patients were treated due to arachnoid cysts and the one due to large solid tumor in the third ventricle. In the youngest patient, the cyst in the cisterna ambiens was detected at the 29th week of gestation causing non-communicating hydrocephalus. Therefore, preterm planned elective caesarean section was performed at the 35th week of gestation and resection of the cyst 2 days after the birth. In the second case, resection of the large temporal arachnoid cyst was made at 7-year old boy. In the third case, 6-year old boy was operated with pure endoscopic method due to large solid tumor of the pineal region which growth into the third ventricle.

Results: In the first and second cases, control MRI showed marked shrinkage of the cyst cavity and great expansion of the brain parenchyma. The children have been without any signs or symptoms of raised intracranial pressure and no ventriculoperitoneal shunt was needed for the whole follow-up period. The neurological development was normal and no neurological deficits were present. In the third case, histopathological examination revealed a teratoma and control MRI showed the complete removal of the tumor.

Conclusion: Specific intracranial pathology in children can be permanently treated with neuroendoscopic approach. To achieve the best surgical result, proper selection of patients based on their age, pathology and imaging is crucial. Neuroendoscopic removal of intracranial lesions has emerged as a viable option with minimal complication and good outcome.