

Craniotomy & Resection of Cavernous Angioma

The options for treatment of a Cavernous Angioma (Cavernoma) include:

- Operative intervention and resection of the cavernoma.
- No treatment.

OPERATION

Craniotomy & resection of cavernoma

The neurosurgical treatment of a cavernoma involves the patient being put to sleep with a general anaesthetic. A curved incision and a bone window is created (craniotomy). A microscope is used to carefully identify the cavernoma which is removed. Any associated blood clot is removed if safe and the bone is replaced with rivets and the patient awoken.

Risks of this procedure:

The risks of this operation include the following. A detailed discussion with your surgeon is recommended prior to surgery.

- Infection – superficial wound infection or deeper infections including meningitis, osteomyelitis.
- Bleeding – which may be superficial or deep causing intracerebral haematoma and stroke-like symptoms such as weakness, numbness and speech disturbance.
- Epilepsy which may require medication.
- Temporary or permanent neurological damage in the form of weakness, numbness, paralysis or speech disturbance (which is a stroke-like symptoms).
- Loss of smell or cerebrospinal fluid leak through the nose if a frontal approach is required.
- Coma and death.

Disclaimer:

This brochure provides a general overview of the surgery and does not represent individual medical advice. Changes to your medication or lifestyle, and specific questions concerning surgery must be discussed with your Doctor.

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