50. Stereotaxic Intraventricular Drainage for the Treatment of Large Cystic Craniopharyngioma and Cyst of Cavum Septi Pellucidi

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Since Scarff has reported a method for treatment of cystic craniopharyngioma by intraventricular drainage, various methods by drainage have been developed. We had an opportunity to attempt the intraventricular drainage by means of stereotaxic method in 3 cases of large cystic craniopharyngioma.

The first case was a girl with a trouble of blood transfusion because of unusual agglutinin in her blood. The second case was a young man suffered from the recurrence after twice operations by standard frontal approach. Difficulties of radical operation in both cases led us to attempt this stereotaxic method. One to 2 years' follow-up in both cases showed further improvement of neurological symptoms. Hence this method was applied to another case of craniopharyngioma and 2 cases with cyst of cavum septi pellucidi.

Operative procedure is as follows. A burr hole is made to insert a cannula into the cyst through the lateral ventricle under X-ray control. The cystic fluid is washed out by saline solution and then replaced with the air to identify the size and location of the cyst. Electrolytic lesion is made in the tissue between the cyst and the ventricle to make a permanent shunt. It is important that the shunt is to be large and short for the prevention of obstruction. Preoperative angiogram is necessary not to damage large vessels during surgery. The cystic fluid drained into the ventricular system does not noticeable side-effects.