

SEATTLE
SCIENCE
FOUNDATION **TV**

FIRST ANNUAL

KEYHOLE APPROACHES TO BRAIN TUMORS WEBINAR

Seattle Science Foundation

APRIL 24, 2021



WWW.SSFCME.ORG

ESTEEMED FACULTY

Charles Teo, AM, MBBS, FRACS
Course Chairman

Conjoint Professor of Neurosurgery, UNSW
Consulting Professor of Neurosurgery, Duke Medical College, USA
Visiting Professor of Neurosurgery, NUH, Singapore
Professor Honoris Causa, Hanoi Medical University, Vietnam
Director; Centre for Minimally Invasive Neurosurgery, Sydney
Founder; Charlie Teo Foundation for Brain Cancer Research
Co-Founder; CINGULUM Health Clinic
Co-Founder; Omniscient-Neuro
Sydney, Australia

Paul A. Gardner, M.D.

Peter J. Jannetta Professor
Director, Center for Skull Base Surgery
University of Pittsburgh Medical Center
Pittsburgh, Pennsylvania

Nikolai J. Hopf, M.D., Ph.D.

Director
Endomin, Center for Endoscopic &
Minimally Invasive Neurosurgery
Zurich, Switzerland

Daniel F. Kelly, M.D.

Director, Pacific Neuroscience Institute
Director Pacific Brain Tumor Center
Director, Pacific Pituitary Disorders Center
Professor of Neurosurgery,
Saint John's Cancer Institute
Santa Monica, California

Michael E. Sughure, M.D.

Neurosurgeon
Prince of Wales Hospital
Sydney, Australia

AGENDA

- 9 a.m. Welcome & Introduction to the Keyhole Concept**
Charles Teo, AM, MBBS, FRACS
Objectives:
- Outline the concept of keyhole approaches
 - Discuss the concepts of choosing the size and location of the “entrance” and determining the most ergonomic “corridor”
 - Define the difference in the size of the craniotomy required when the lesion is deep to the surface or superficial
- 9:15 a.m. Keyhole Surgery for Gliomas**
Charles Teo, AM, MBBS, FRACS
Objectives:
- Appreciate the importance of a complete resection of all grades of gliomas
 - Identify the various standard keyhole approaches
 - Outline the concept of operating along the long axis of the glioma and down a “perpendicular” corridor
- 9:45 a.m. Q&A**
- 9:50 a.m. Reducing the Cognitive Footprint of Brain Surgery**
Michael E. Sughrue, M.D.
Objectives:
- Outline and define the anatomy of human brain networks
 - Illustrate the applications of connectomics to brain surgery
- 10:20 a.m. Q&A**
- 10:25 a.m. Keyhole Anterior Skull Base Approaches (Eyebrow Approach)**
Daniel F. Kelly, M.D.
Objectives:
- Outline indications for use of the supraorbital eyebrow approach in treating extra-axial and intra-axial brain tumors
 - Discuss technical nuances of approach to optimize exposure, maximize tumor resection and achieve optimal cosmesis
 - Describe complication avoidance protocols
- 10:55 a.m. Q&A**
- 11 a.m. Endoscopic Endonasal Resection Approaches to the Anterior Cranial Fossa**
Paul A. Gardner, M.D.
Objectives:
- Outline the anatomic and technical limitations of the endoscopic endonasal approach to the anterior fossa
 - Discuss advantages and disadvantages of the endoscopic endonasal approach
 - Recognize the impact of the individual and team learning curve on endoscopic surgery
- 11:30 a.m. Q&A**
- 11:35 a.m. Break (not for CME credit)**
- 12 p.m. Keyhole Approaches to the Skull Base: Mini Pterional Approaches**
Nikolai J. Hopf, M.D., Ph.D.
Objectives:
- Describe the differences between the mini pterional and standard pterional approach in the treatment of intracranial tumors
 - Outline technique and pitfalls of the mini pterional approach to different areas of the skull

base

12:30 p.m. Q&A

12:35 p.m. Keyhole Approaches to the Posterior Fossa

Charles Teo, AM, MBBS, FRACS

Objectives:

- Identify the various standard approaches to the posterior fossa
- Describe the steps by which one minimizes collateral damage performing the retrosigmoid approach
- Appreciate the importance and the technique of endoscopic-assisted surgery

1:05 p.m. Q&A

1:10 p.m. The New Workhorses: Transclival and Transodontoid Approaches

Paul A. Gardner, M.D.

Objectives:

- Define the role of lumbar drainage in posterior fossa endoscopic endonasal surgery
- List the novel complications that can occur following endoscopic endonasal surgery to the posterior fossa
- Define the anatomic limitation of the endoscopic endonasal approach to the posterior fossa

1:40 p.m. Q&A

1:45 p.m. Final Discussion and Course Wrap Up

Charles Teo, AM, MBBS, FRACS

Objectives:

- Summarize key concepts of keyhole approaches
- Discuss concepts learned and ask any unanswered questions

2 p.m. Adjourn

Acknowledgements

The Planning Committee gratefully acknowledges support from the following:

Educational Grant

Karl Storz
Peter Lazic

Course Planning Committee

Charles Teo, AM, MBBS, FRACS

Prince of Wales Hospital
Neurosurgery, Sydney

Cristian Gragnaniello, M.D., Ph.D.

Swedish Neuroscience Institute
Seattle, Washington

Linda Sahlin

Seattle Science Foundation
Seattle, Washington

Ashley Martin

Seattle Science Foundation
Seattle, Washington

Faculty Disclosure Summary

The following planners and presenters (or their spouses/domestic partners) have/had a financial relationship with a commercial interest: (*S = Speaker; P = Planner*)

Paul A. Gardner, M.D. (S): Royalties: Peter Lazic Instruments; Ownership Interest: SPIWay Instruments

Daniel F. Kelly, M.D. (S): Consultant: Mizuho

Mike Sughrue, M.D. (S): Founder & CMO: Omniscient Neurotechnology

Charles Teo, AM, MBBS, FRACS (S, P): Consultant: Aesculap

The following planners and presenters (or their spouses/domestic partners) have/had no financial relationship with a commercial interest (*S = Speaker; P = Planner*)

Cristian Gragnaniello, M.D., Ph.D. (P); Nikolai J. Hopf, M.D., Ph.D. (S); Linda Sahlin (P);

Ashley Martin (P)

All planners and presenters attested that their content suggestions and/or presentation(s) will provide a balanced view of therapeutic options and will be entirely free of promotional bias. All presentations have been reviewed by a planner with no conflicts of interest to ensure that the content is evidence-based and unbiased.

Identifying and Resolving Conflicts of Interest

Purpose: The information provided addresses several requirements of the ACCME to help **ensure purpose** in CME activities. Everyone in a position to control the content of a CME activity must disclose all relevant financial relationships with commercial interests to the CME provider. This information must be disclosed to participants prior to the beginning of the activity. Also, CME providers must resolve current conflicts of interest prior to the educational activity.

Definitions: “Financial relationships” are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria for promotional speakers’ bureau, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. ACCME considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner.

The ACCME defines a “**commercial interest**” as any entity producing, marketing, re-selling or distributing health care goods or services consumed by, or used on, patients. Among the exemptions to this definition are government organizations, non-health care related companies and non-profit organizations that do not advocate for commercial interests.

Circumstances create a “**conflict of interest**” when an individual has an opportunity to affect CME content about products or services of a commercial interest with which he/she has a financial relationship.

ACCME focuses on financial relationships with commercial interests in the 12-month period preceding the time that the individual is being asked to assume a role controlling content of the CME activity. ACCME has not set a minimal dollar amount for relationships to be significant. Inherent in any amount is the incentive to maintain or increase the value of the relationship.

The ACCME defines “**relevant financial relationships**” as financial relationships in any amount occurring within the past 12 months that create a conflict of interest.

CME Activity Planning Committee Members: If a conflict of interest exists, the Planning Committee member must withdraw from the Planning Committee unless the conflict can be resolved. Resolution may be made by one of the following methods: (1) Peer review of CME content will be conducted at another oversight level to assure no commercial bias exists; (2) Change in focus of course so the activity does not include information related to products or services about which the planning committee member has a conflict; (3) Severing relationship(s) between the member and any related commercial interest; (4) Others to be determined by SSF CME Committee.

CME Activity Presenter: When a conflict of interest exists, the Planning Committee must address the conflict by one of the following methods: (1) Review content to be presented by speaker in advance to assure content balance; (2) Change topic so the presentation is not related to products or services where a conflict exists; (3) Select a different presenter without any related commercial interest; (4) Include presentations by other faculty to provide an overall balance to the content of the course; (5) Limit or specify the sources for recommendations that the presenter can use. Each speaker is required to give a balanced, evidence-based presentation based on published research. No conclusions or recommendations without external validation may be made by a speaker with a conflict of interest.

Course Evaluation

Please take a moment to complete our online evaluation, which will be emailed to you. Your feedback helps to ensure the effectiveness of this CME activity, as well as improve future educational activities. All responses are considered anonymous. <https://www.surveymonkey.com/r/keyhole2021>.

If you do not receive the survey via email, please call (206) 732-6500 or email cme@seattlesciencefoundation.org.

Accreditation

Seattle Science Foundation is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

AMA PRA Category 1 Credits™

Seattle Science Foundation designates this live activity for a maximum of 4.5 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.