Celebrating 35 Years of the AJNR: July 1981 edition

AJNR Am J Neuroradiol 2016, 37 (7) 1382
doi: https://doi.org/10.3174/ajnr.P0022
http://www.ajnr.org/content/37/7/1382.citation

This information is current as of December 23, 2023.
Selective Arteriography of Glomus Tympanicum and Jugulare Tumors: Techniques, Normal and Pathologic Arterial Anatomy

Glomus tympanicum and jugulare tumors arise within the middle ear and jugular fossae, respectively, but often extend into the infratemporal fossa of the skull base and can affect cranial nerves I, II, III, IV, V, and V1. Successful surgical excision is based on the knowledge that the tumors are fed by the posterior auricular artery and the transverse and superior thyroid arteries, which give rise to a network of small vessels that supply the tumors. The posterior auricular artery is often the main feeding artery, and its identification is crucial for surgical planning. The transverse and superior thyroid arteries also provide important collateral blood flow, which can make surgical excision more challenging.

The surgical approach to these tumors involves a combination of external and endoscopic approaches. An external approach allows for access to the tumor through a temporal bone tympanotomy. An endoscopic approach involves the use of an endoscope to visualize the tumor and facilitate more precise surgical exposure. Both approaches require detailed understanding of the arterial supply to the tumor to ensure complete excision.

Myelography of Sacral Agenesis

Myelography has been obtained infrequently in children with sacral agenesis. In the past, myelograms depicted in association with sacral agenesis were thought to be uninterpretable in surgical therapy. Recent experience and a careful review of the literature have demonstrated that the examination is interpretable. Four cases of sacral agenesis are reported with description of the myelographic findings of each case. Radiologic correlation was obtained in three of the four cases. The myelographic findings are typical of sacral agenesis. The examination is most helpful in the child with a myelomeningocele or a neural tube defect in the region of the sacrum, as it helps to define the level of the sacral agenesis and to identify any associated anomalies.