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Impact of Endoscopic Gross Total Resection of Colloid Cysts on memory & quality of life

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Background: Colloid cysts of third ventricle has conventionally been managed with microsurgery. Endoscopic surgery is increasingly being adopted with variable results. This study is to evaluate the efficacy of endoscopic surgery among these in relation to memory impairments and quality of life.

Methods: Patients of colloid cysts who underwent endoscopic surgery were studied with respect to demographics, clinicoradiological features and extent of resection in MRI at 3 months. Memory impairments were assessed using PGIMS and quality of life using WHOQOL-BREF, considering patients with microscopic resection or stand-alone VP shunt as controls. Appropriate statistical analyses were performed.

Results: There was a total of 19 patients who underwent endoscopic surgery, with a mean age of 35 years. The mean

maximum diameter of cysts was 19 mm. Gross total resection could be achieved in all. In the mean follow-up of 37 months, none of the patients had recurrence or ventriculomegaly. There was non-significant trend of better memory scores overall following endoscopic surgery, while minor impairment in recent memory was noted in only 1 patient. The mean QOL score was better after endoscopic surgery (297.6), compared to microscopic (282.4) and VP shunt (250.9) controls. The scores were significantly better in social domain of QOL after endoscopic surgery, and non-significant among other domains.

Conclusion: Gross total resection rate of colloid cysts is near 100% after endoscopic surgery. While memory improved overall, quality of life is better than after either microscopic surgery or stand-alone VP shunt.

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