

Konflikty naczyniowo-nerwowe

Neurovascular conflicts

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Summary

Neuro-vascular conflict is a pathophysiologic phenomenon which is implicated in several cranial neuropathies. The most common are trigeminal neuralgia and hemifacial spasm. Spasmodic torticollis, glossopharyngeal neuralgia, disabling positional vertigo may be due to neural compression as well, but other pathologies such as neurogenic hypertension and limited cases of tinnitus, although rare, highly susceptible to the neurovascular conflict, should be taken into consideration. Current diagnostic approach comprises clinical and radiological evaluation. Along with thorough otoneurological examination, MRI scans are essential to diagnose the conflict. This provides information about the presence of neuro-vascular conflict and involved structures. The microvascular decompression (MVD) is a treatment of choice, based on the separation of offending vessel from the nerve. Those procedures are safe, with high rate success according to the literature ranging from 70—90%. Additionally, in early 90. a new minimally invasive approach with use of rigid endoscopes were proposed. Those gave the possibility to reduce morbidity and improve results by providing wider insight into the operating field with smaller intraoperative injury. Authors present 9 patients diagnosed with neuro-vascular conflict in the ENT department in Poznań. Clinical findings comprised 5 cases of hemifacial spasm, 3 with unilateral tinnitus and 1 with trigeminal neuralgia. Due to variety of symptoms, it is proposed that specialized centers should be formed to diagnose and treat cranial nerves neuropathies. Team approach composed of neurologist, neurosurgeon, radiologist and otologist is essential in terms of good treatment results. Authors describe symptomatology, diagnosis and treatment options of neuro-vascular conflicts.