

The Possible Role of High Resolution Computed Tomography Imaging (HRCT) in Predicting the Visibility and Position of the Round Window in Cochlear Implantation Surgery

Thesis

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List of Abbreviations

Abb.	Full term
BAEP	Brain Stem Auditory Evoked Potential
	Cochlear Aquiduct
	Combined Approach Technique
CI	
	Cerebro-Spinal Fluid
	Computed Tomography
FC	
<i>FN</i>	
GGSPN	Groove for Greater Superficial Petrosal
	Nerve
<i>GN</i>	Geniculate Ganglion
<i>GSP</i>	Greater Superficial Petrosal nerve
HRCT	High Resolution Computer Tomography
Hz	Hertz
<i>IAC</i>	Internal Auditory Canal
JN	Jacobson's Nerve
<i>KHz</i>	Kilo Hertz
LO	Labyrinthitis Ossificans
<i>LSC</i>	Lateral Semicircular Canal
MCF	Middle Cranial Fossa
mg	Milligram
<i>MPTA</i>	Mastoidectomy Posterior Tympanotomy
	Approach
<i>MRI</i>	Magnetic resonance imaging
OSL	Osseous Spiral Lamina
<i>OW.</i>	Oval Window
<i>PSSC</i>	Posterior Semicircular Canal
PTA	Pure tone Audiometry
<i>RW</i>	Round Window

List of Abbreviations cont...

Abb.	Full term
RWM	Round Window Membrane
	Round Window Niche
SD	Standard Deviation
<i>SNHL</i>	sensorineural hearing loss
<i>SPBT</i>	Superficial Part of Basal Turn
SSC	Superior Semicircular Canal
SSNHL	Sudden sensorineural hearing loss
	Scala Tympani
SV	Scala Vestibuli
<i>TM</i>	TympanoMastoidectomy
VA	Vestibular Aqueduct

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ABSTRACT

Background: High-resolution computed tomography (HRCT) magnifies the role of preoperative imaging for detailed inner and middle ear anatomical information and enhances more efforts for better dependent correlation and measurements of round window (RW). Imaging is essential in the preoperative evaluation of sensorineural hearing loss (SNHL) patients who are candidates for CI. Surgeons need to be alert regarding the anomalies and pathologies that may represent a potential surgical hazard or that may that may require modification of the surgical approach.

Objectives: To study the possibility of preoperative assessment of round window in relation to the facial recess in order to anticipate the type of round window exposure before surgery by using High-resolution computed tomography (HRCT) scan.

Patients and Methods: This study included 50 children, aged 3 to 5 years who underwent unilateral cochlear implant with round window electrode insertion and had pre-operative highresolution temporal bone CT scan were included. All patients had severe to profound bilateral sensorineural hearing loss, which was unaidable with hearing aids.

Results: Our study showed that the α value of the angle between the line connecting the leading edge of the facial nerve to the midpoint of the round window and the median sagittal line measured in the preoperative CT scans was associated with the difficulty of intraoperatively exposing the round window membrane. When the α value was larger than a certain degree, the round window membrane was not easily exposed.

Conclusion: Successful cochlear implantation by posterior tympanotomy approach depends on conclusive identification of the RWN, which may be difficult in patients with limited RWN

visibility. Facial nerve canal in the facial recess may be obscuring the round window.

Keywords: High Resolution Computed Tomography Imaging, Round Window, Cochlear Implantation Surgery

