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58<sup>th</sup> Annual Meeting of the German Society of Neurosurgery 26 - 29 April 2007, Leipzig



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## **Meeting Abstract**

Teflon granuloma as a rare cause of recurrent trigeminal neuralgia after microvascular decompression

Teflon-Granulom als seltene Ursache für Rezidiv-Trigeminusneuralgie nach mikrovaskulärer Dekompressions-Operation

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Deutsche Gesellschaft für Neurochirurgie. 58. Jahrestagung der Deutschen Gesellschaft für Neurochirurgie e.V. (DGNC). Leipzig, 26.-29.04.2007. Düsseldorf: German Medical Science GMS Publishing House; 2007. Doc SO.03.06

The electronic version of this article is the complete one and can be found online at: http://www.egms.de/en/meetings/dgnc2007/07dgnc226.shtml

Published: 11-04-2007

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## Text

Objective: There are several surgical options for trigeminal neuralgia refractory to medical treatment. Our method of choice is microvascular decompression since it usually provides a definite cure. One option is to implant a small piece of teflon felt to separate the offending vessels and the trigeminal nerve. Recurrent trigeminal neuralgia may be due to insufficient decompression, dislocation of the teflon implant or the development of teflon granuloma. Here, we report on our

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experience with "tefloma".

Methods: In a series of 200 patients with trigeminal neuralgia microvascular decompression was performed with teflon felt according to Jannetta's technique. In case of recurrent neuralgia, patients underwent reevaluation and if possible re-operation. In three patients with recurrent facial pain "tefloma" was found to be the cause for recurrence. In each instance, the "tefloma" was removed for histopathological examination.

Results: Mean age at the first procedure was 62.3 years, at the second procedure 66.3 years. Recurrence of pain occurred between 0.5 and 9 years after the first procedure. MRI scans demonstrated local gadolineum enhancement in the cerebellopontine angle in one patient. Intraoperatively dense fibrous tissue was found at the site of the tefloma. The tefloma was removed completely, and new material was used for re-decompression. Histopathological examination revealed birefringent teflon material embedded in a hyalinized collagenous matrix. There was accompanying intense foreign body reaction with multinuclear giant cells and few lymphocytic infiltrates. In one case, partial calcification was noted. Postoperative clinical examination revealed complete remission of facial pain.

Conclusions: Teflon granuloma is a rare cause for recurrent facial pain after microvascular decompression. Early diagnosis may be possible in case of gadolineum enhancement. It remains unclear why teflon granuloma develops and what would be promotive factors, if any. The treatment of choice is surgical reexploration.

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