Editor's Speak (Anterior Skull Base)

Anterior skull base surgery has evolved over the past few years, more so in the last decade. Endoscopic anterior skull base surgery has, in fact, been the focus of a majority of surgical workshops in otorhino-laryngology worldwide. The fact that it involves two specialities of surgeons makes it even more competitive, yet simultaneously more in demand!

Nothing can replace a sound knowledge of anatomy for a surgeon. Combined workshops for otorhinolaryngologists and neurosurgeons with cadaveric dissection have been a big step to bridge together the gap between these two faculties and, at the same time, allowed for the development of a compatibility quotient. Besides, the 'two surgeons - four hands' technique has automatically 'forced' the two to work together! Once the compatibility stage has been crossed, working together has allowed for the development of innovative techniques; also, the two faculties have begun to delve into the realms of the other, and the only thing keeping them together is their mutual respect and understanding of anatomy.

With the advent of navigation systems and other modern technology, the error quotient has reduced, and the recall and archiving techniques have improved. But with these comes, the added responsibility of decreasing the complications associated with these complex procedures. It is prudent to always remember that these are machines after all, and errors can arise from calibration to artefacts and even breakdown during surgery! Hence, a back Up plan in the form of sound knowledge, regularly updating oneself to the evidence-based published advances in the field and practice, and more practice can prevent disasters.

This issue has endeavored to compile some aspects of this vast subject and make for stimulating reading.



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