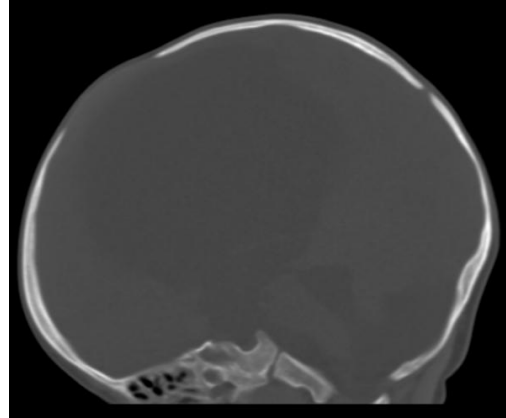
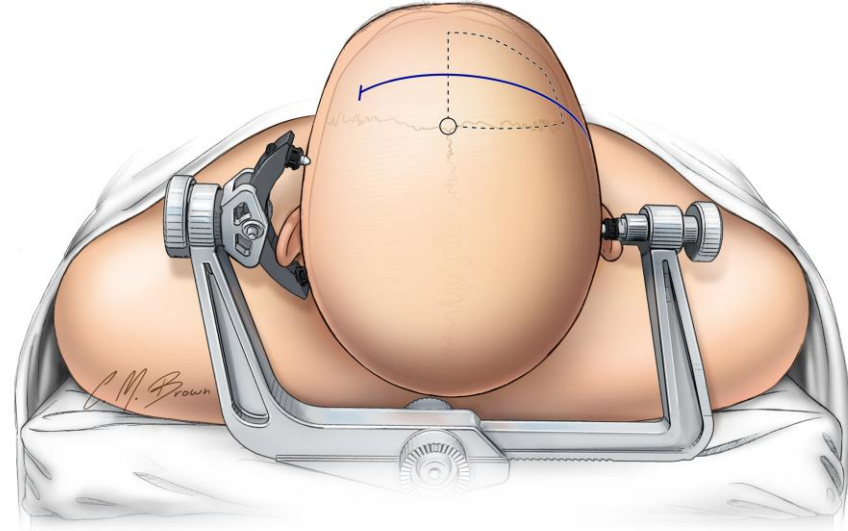
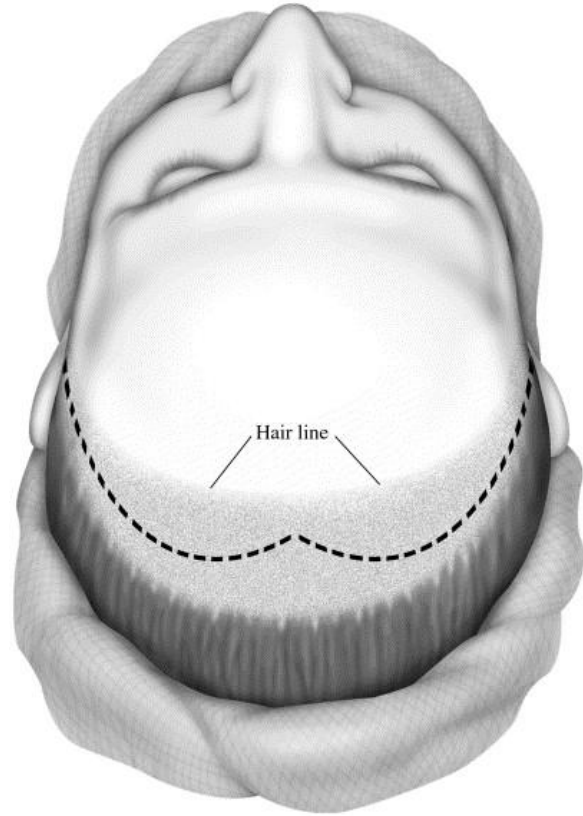


Intraoperative hjelpemidler for maksimal trygg reseksjon

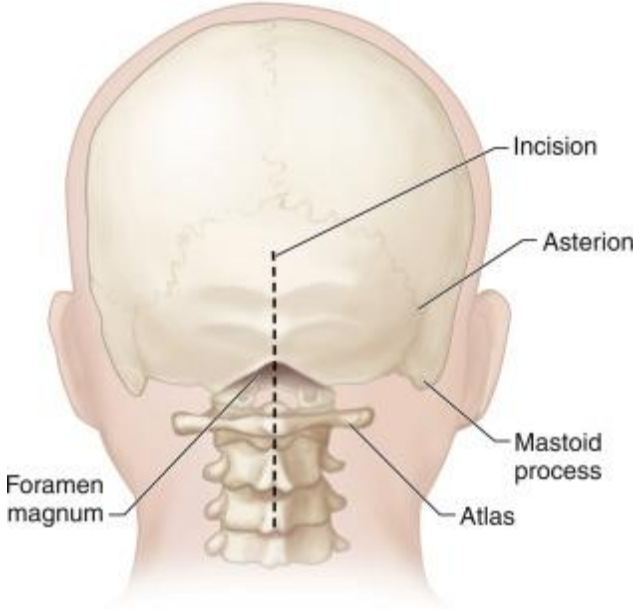
Hodet fikseres som regel med trepunkt-støtte



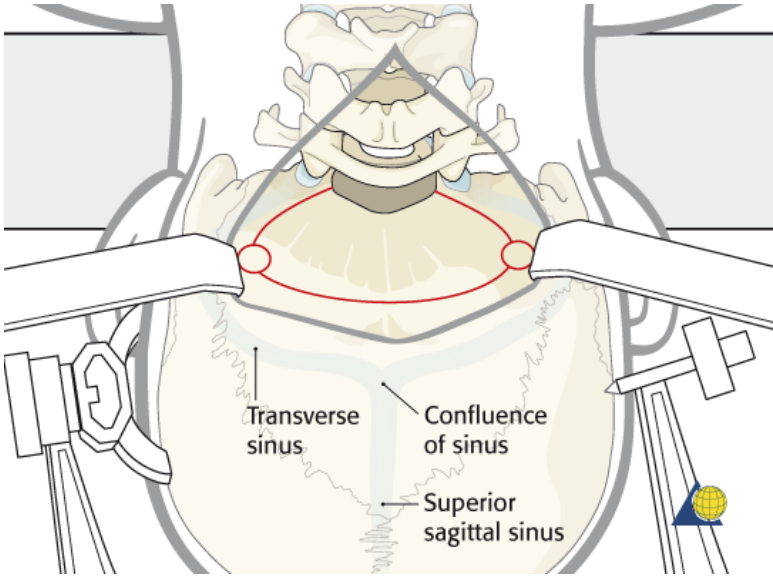
Frontal tilgang

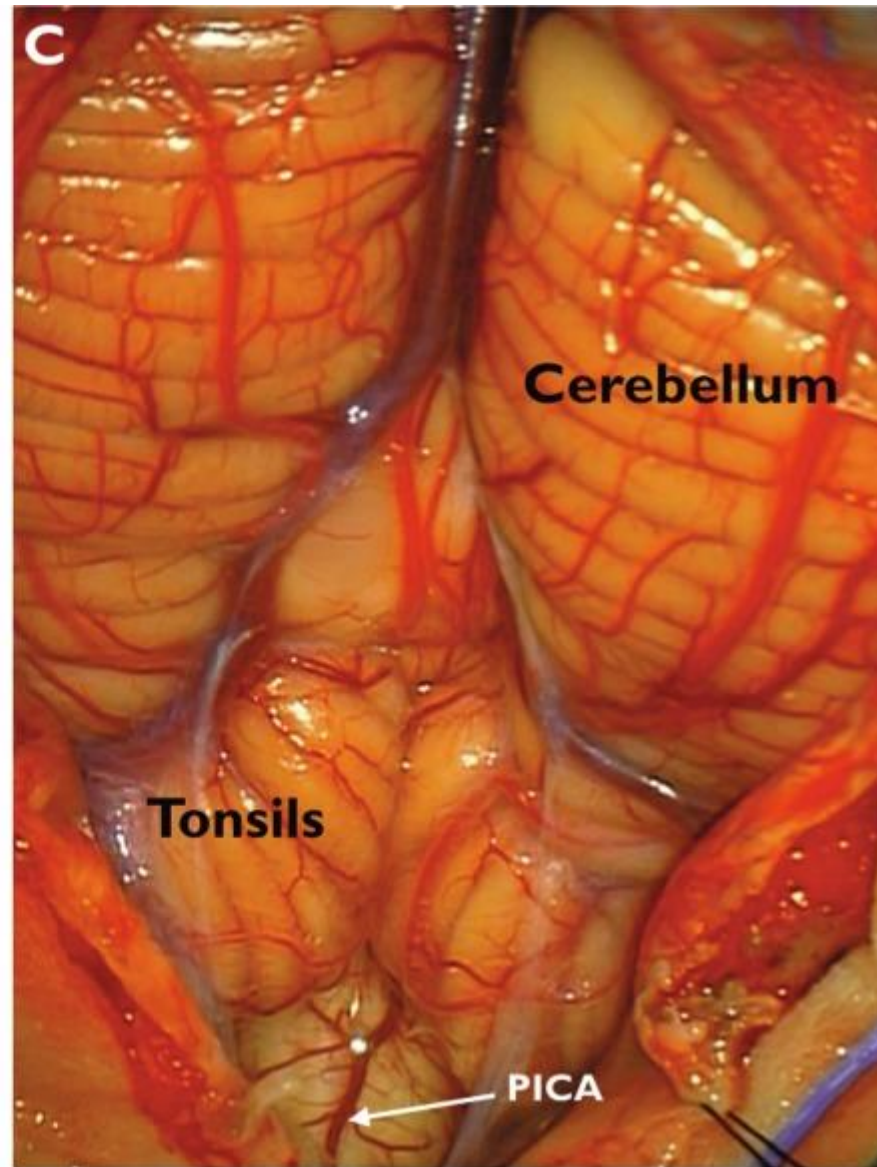
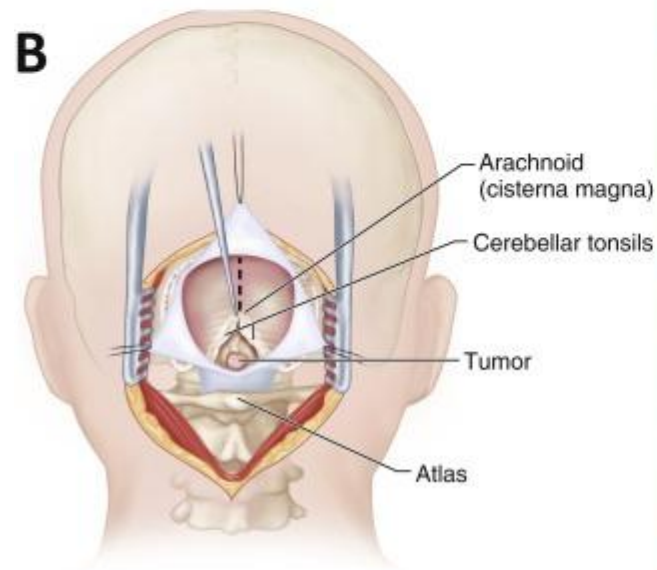
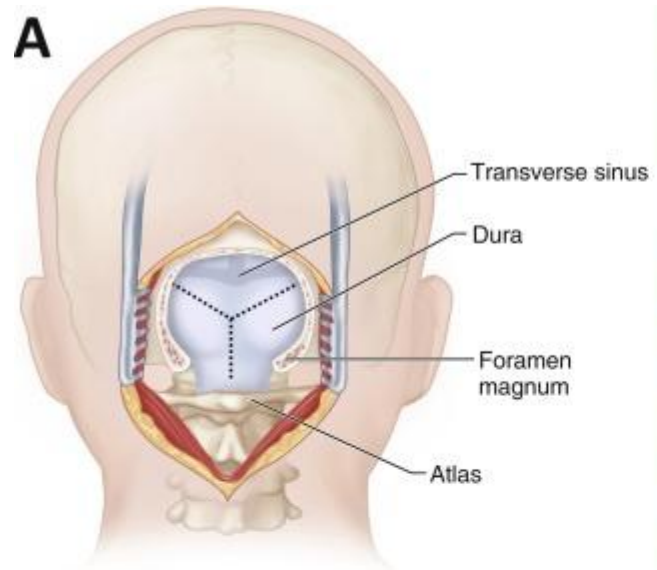


Bakre tilgang



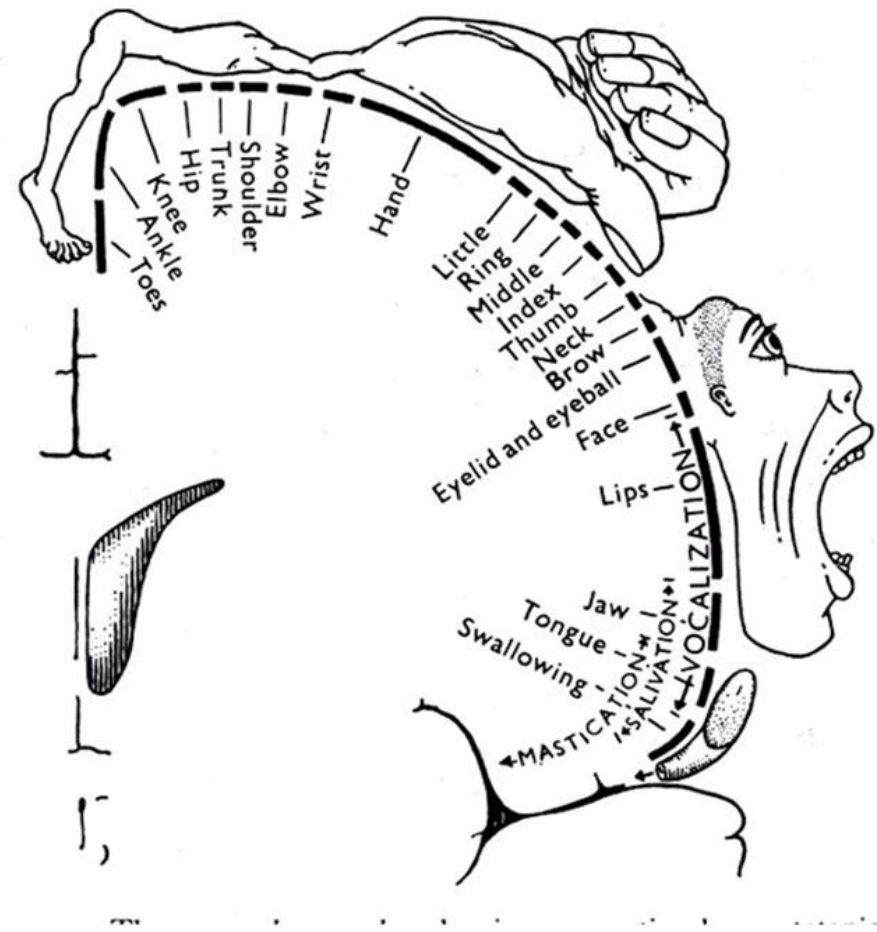
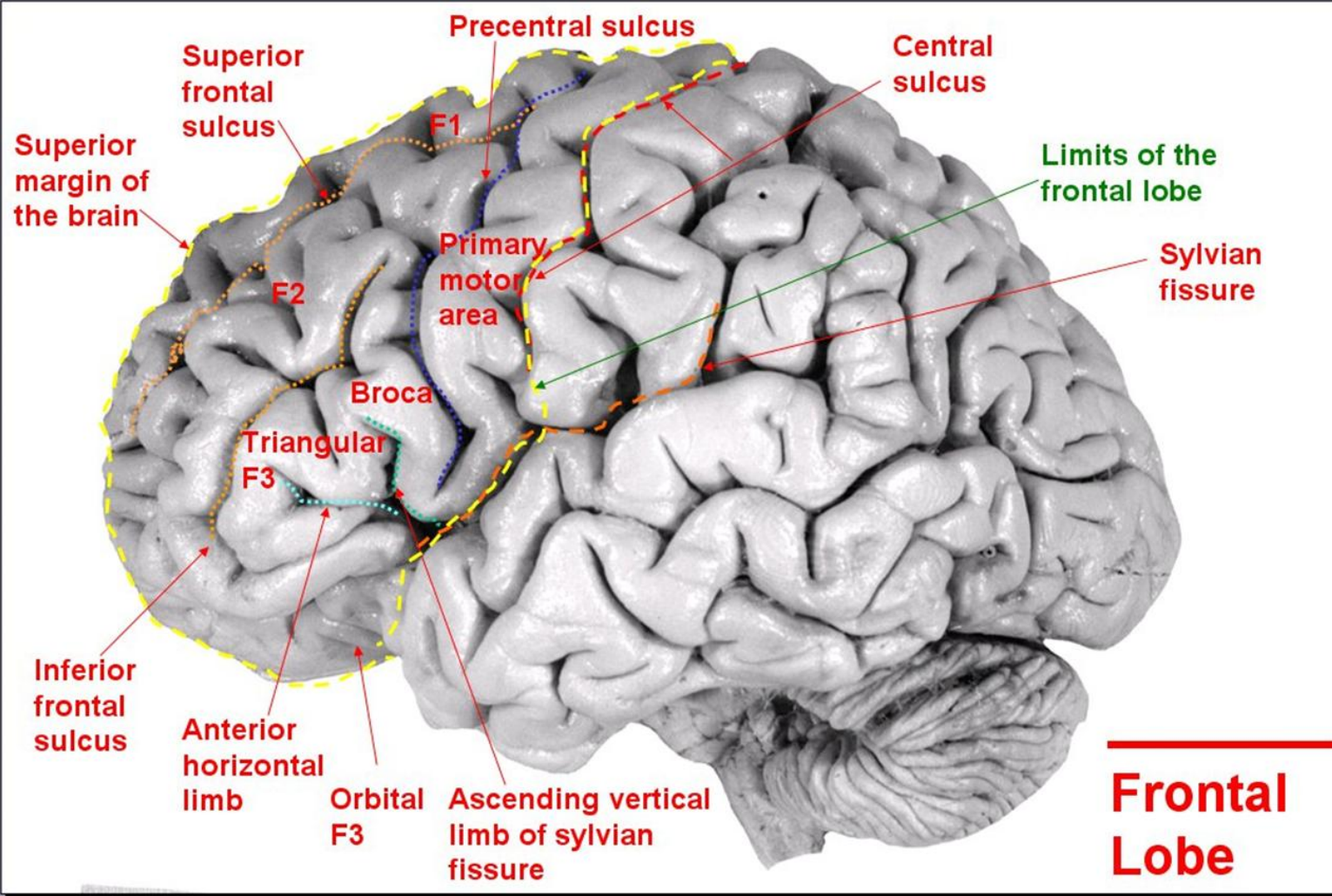
A



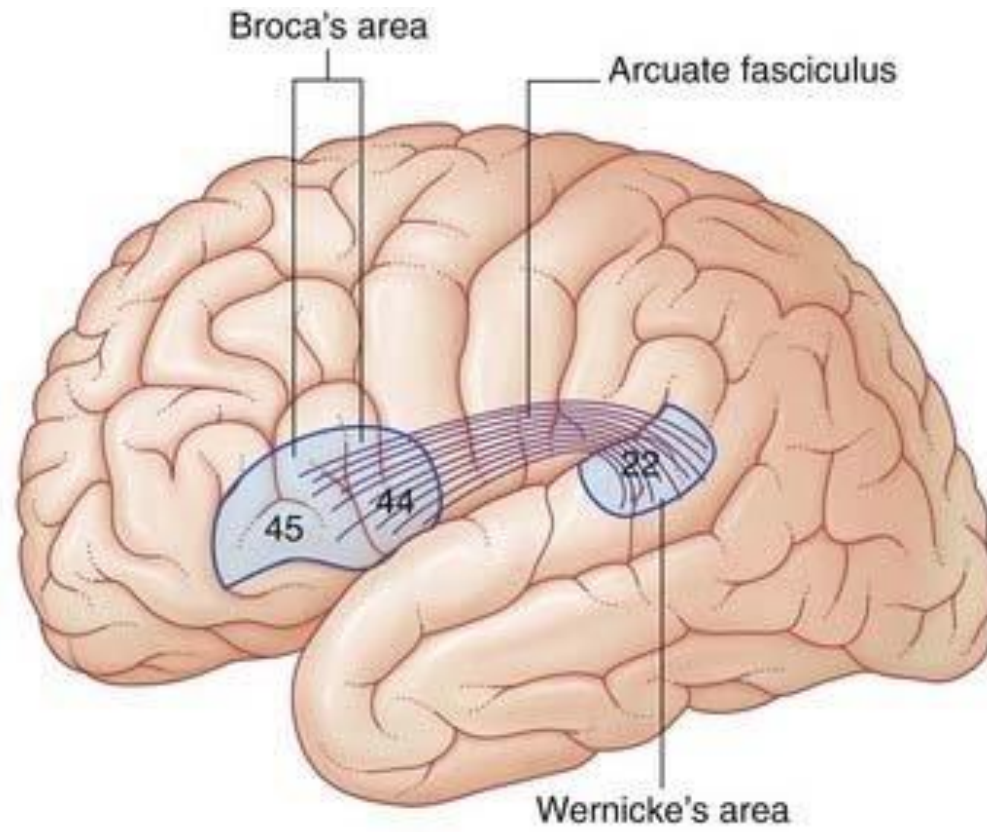


Nevronavigasjon





From W. Penfield and T. Rasmussen. The Cerebral cortex in man. 1950

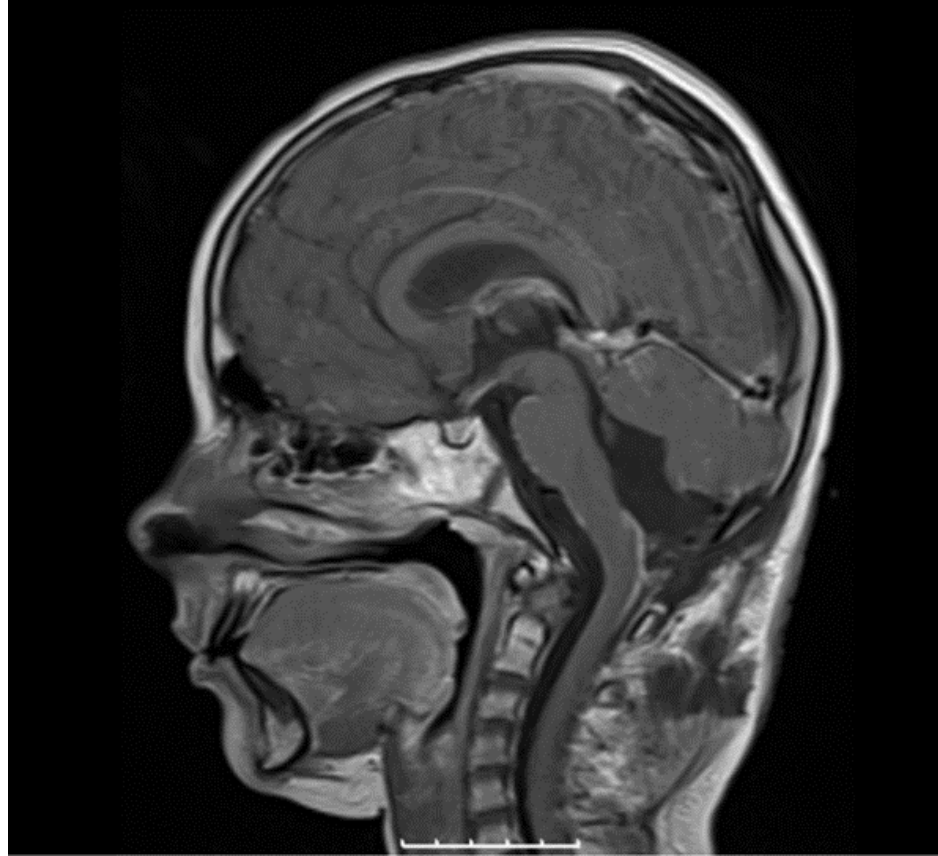
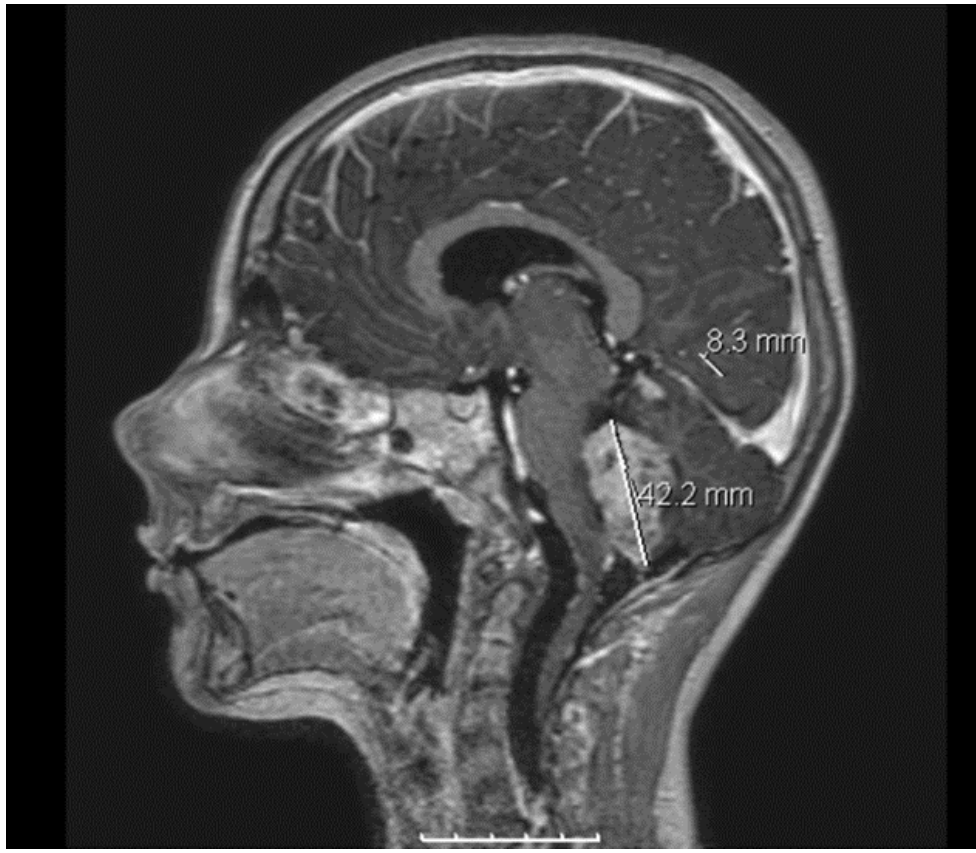


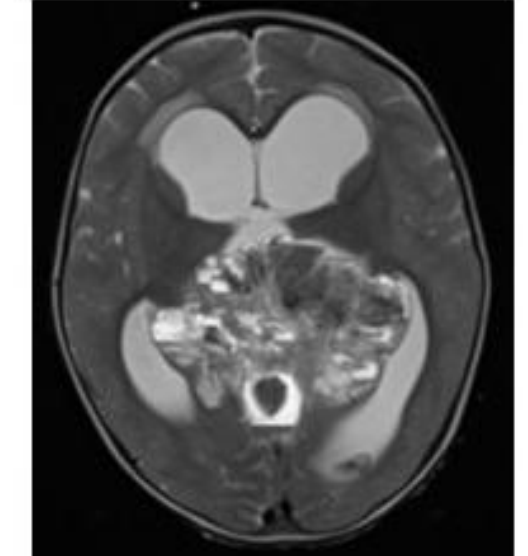
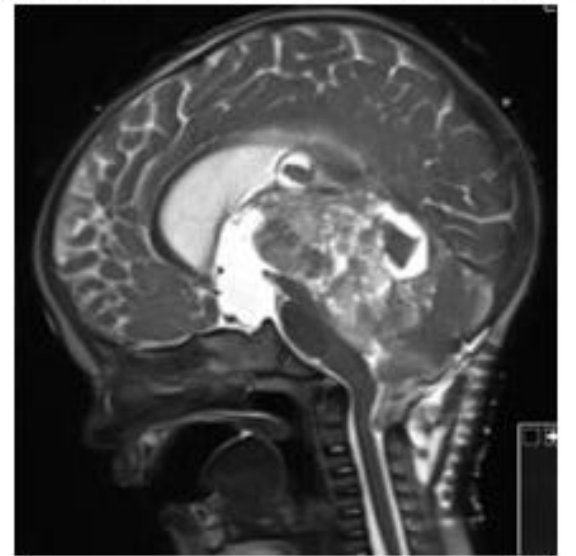
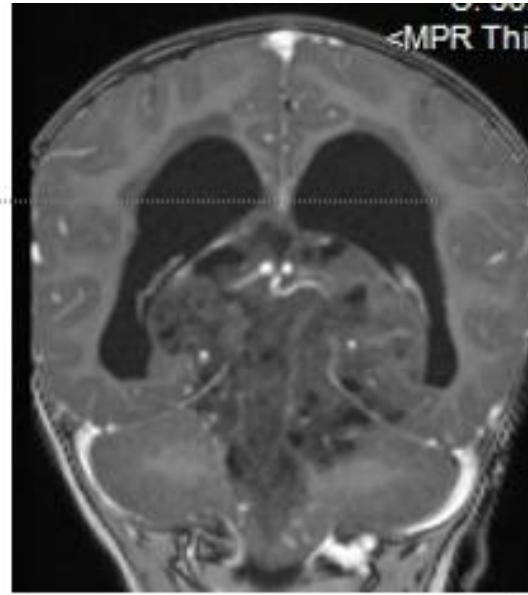
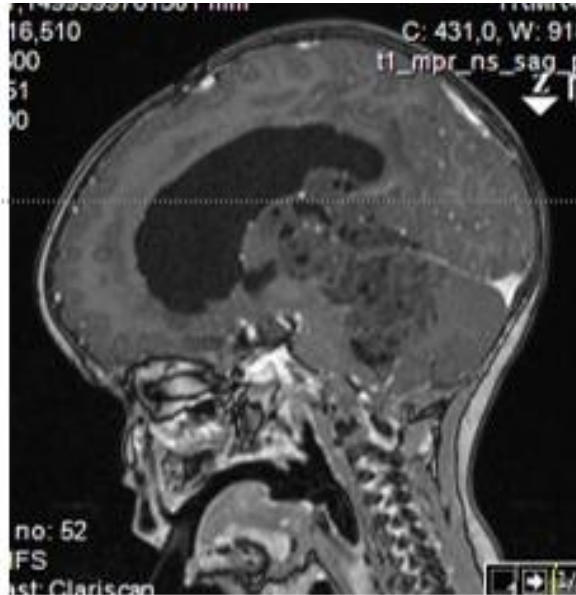
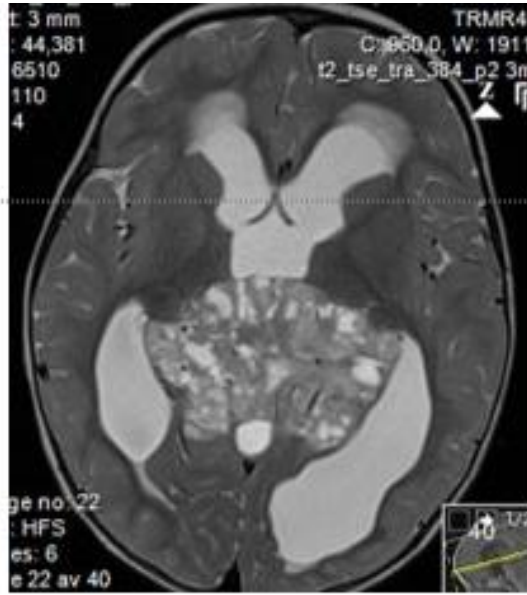




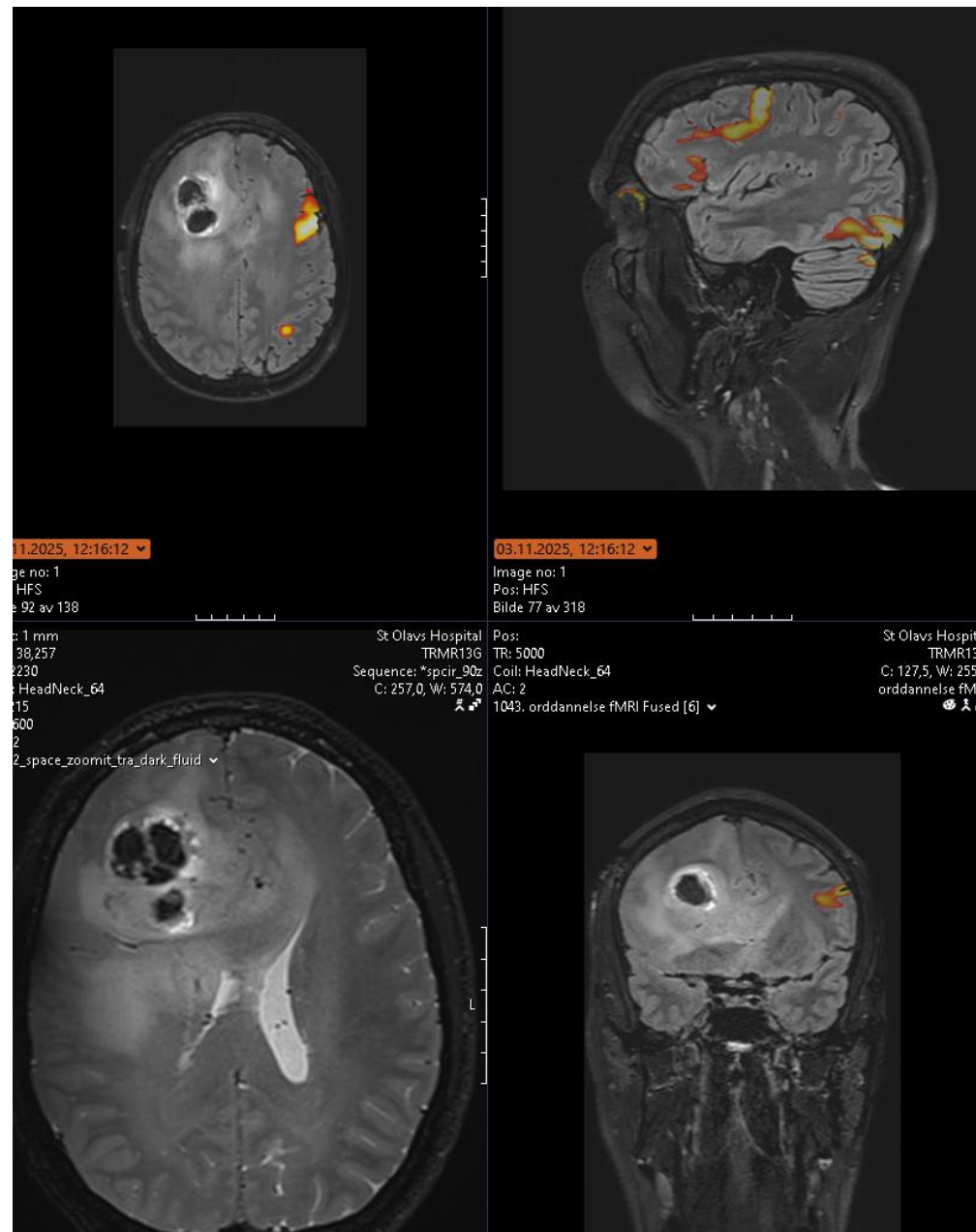
Non-contractual photo

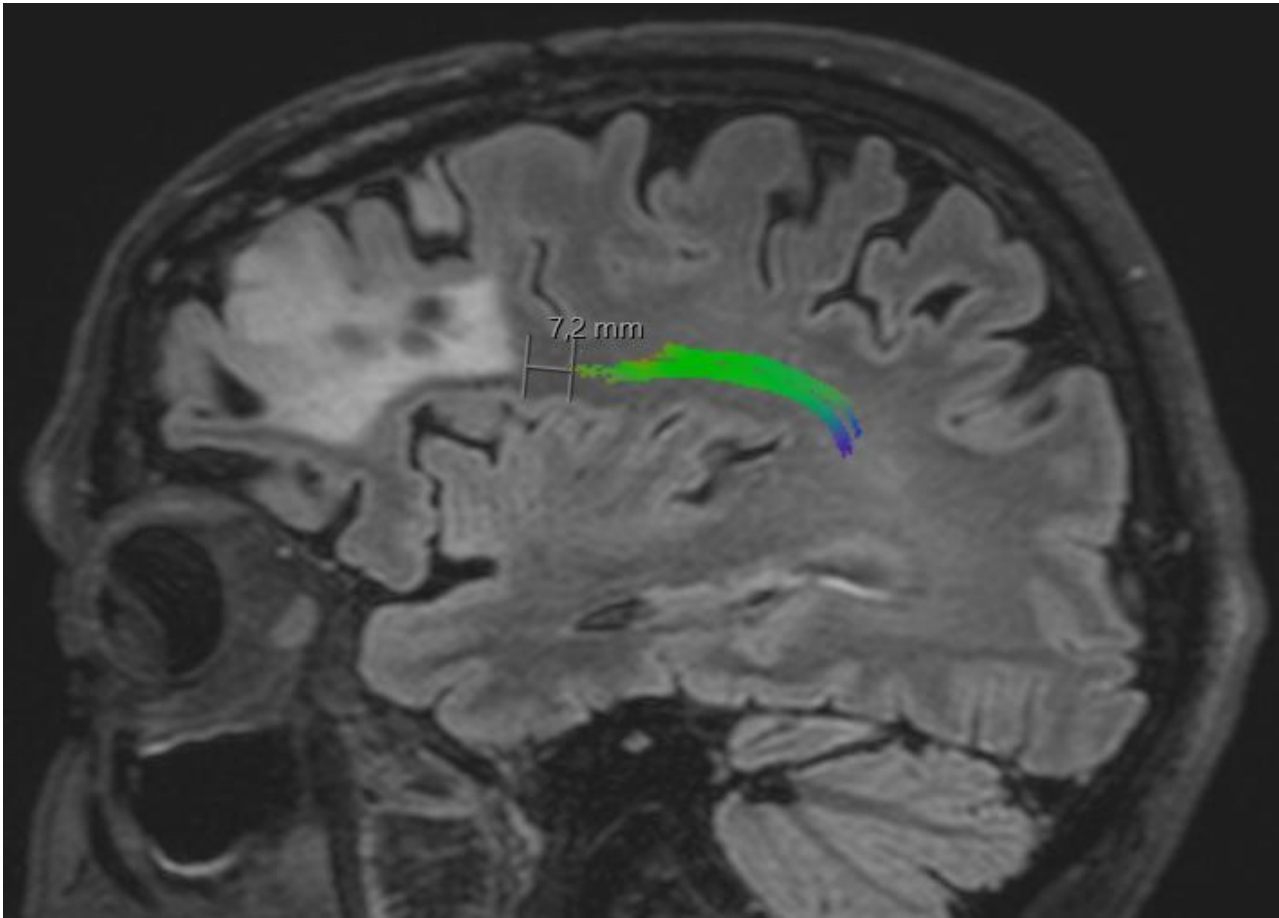


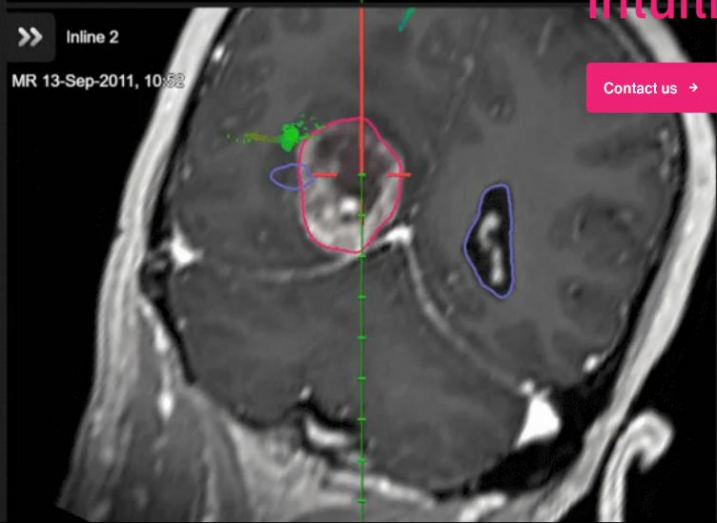
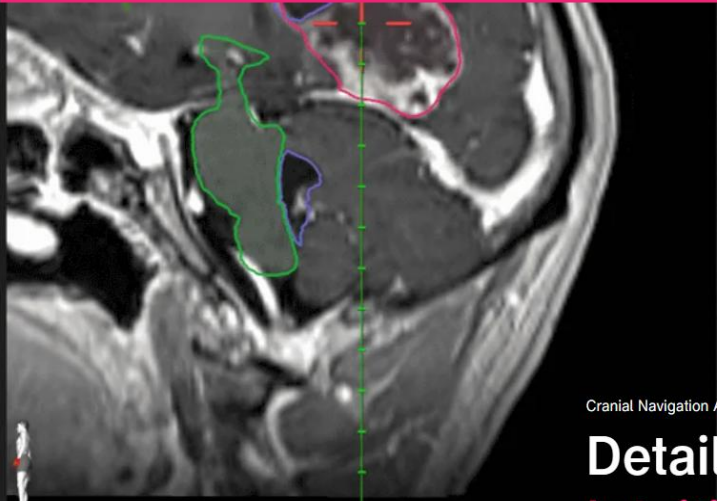




Funksjonell MR



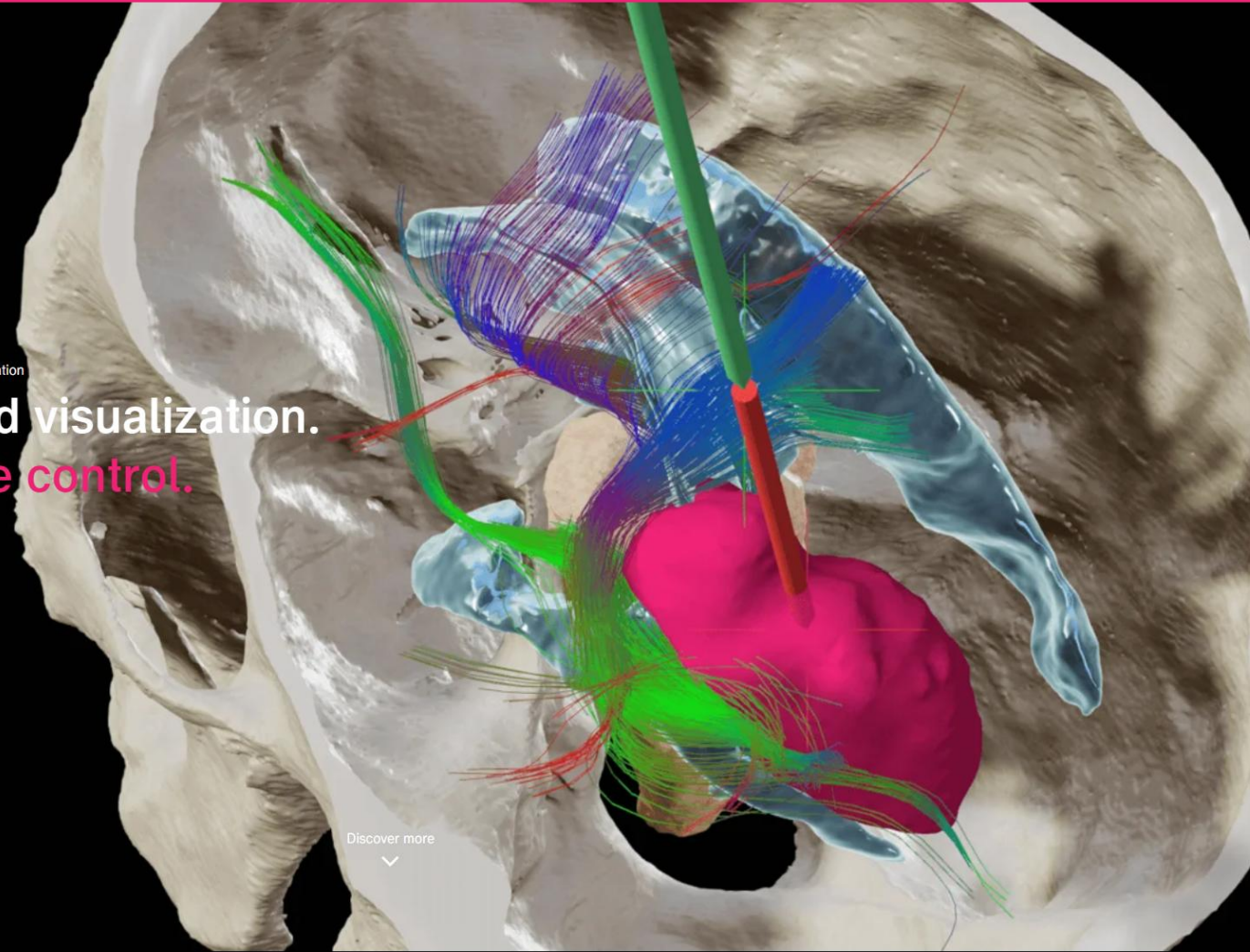




Cranial Navigation Application

Detailed visualization.
Intuitive control.

Contact us →



Discover more
↓

Cranial Navigation

- Camera (with red X icon)
- Screenshot
- Acquire
- Freeze (toggle)
- View (dropdown)
- Offset (dropdown)

- Envelope icon
- Location pin icon
- Refresh icon
- Person icon
- Close icon (X)

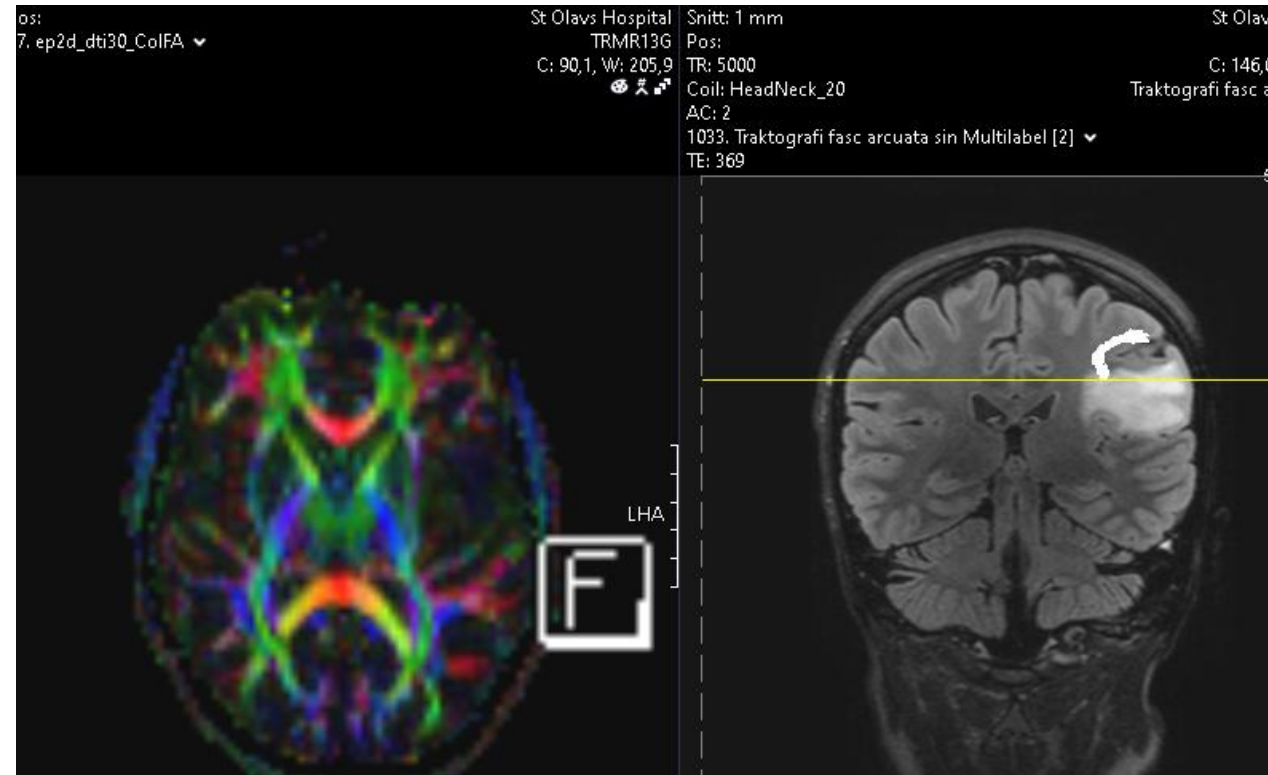
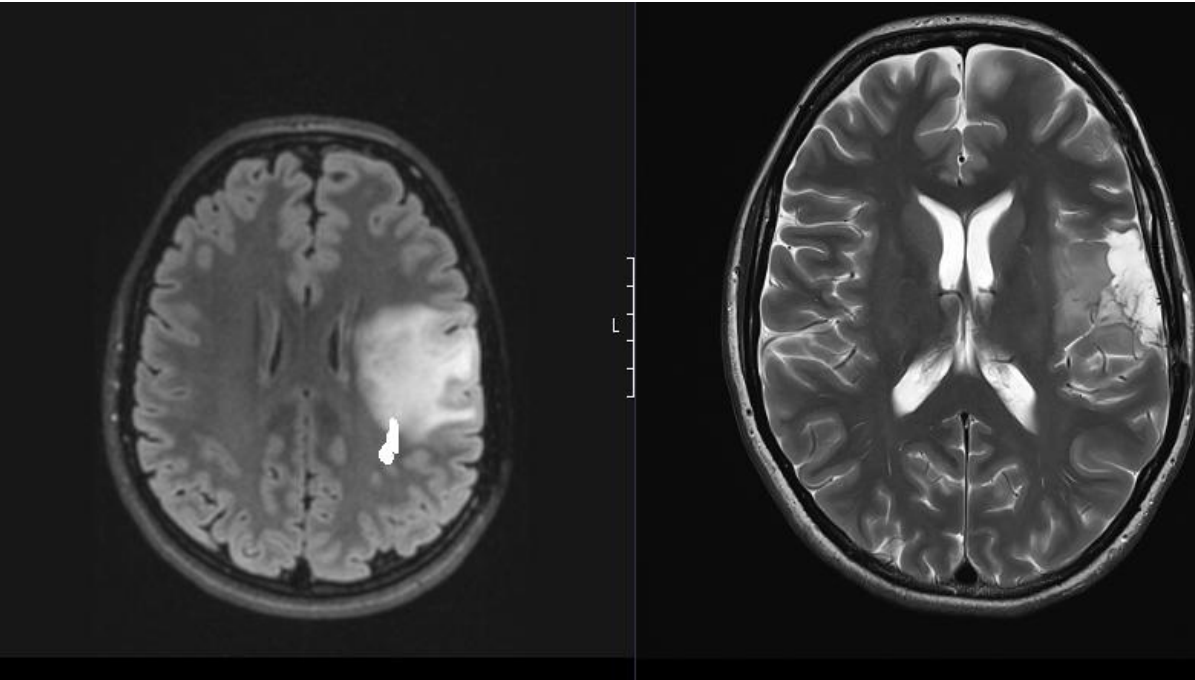
Nevrofysiologi



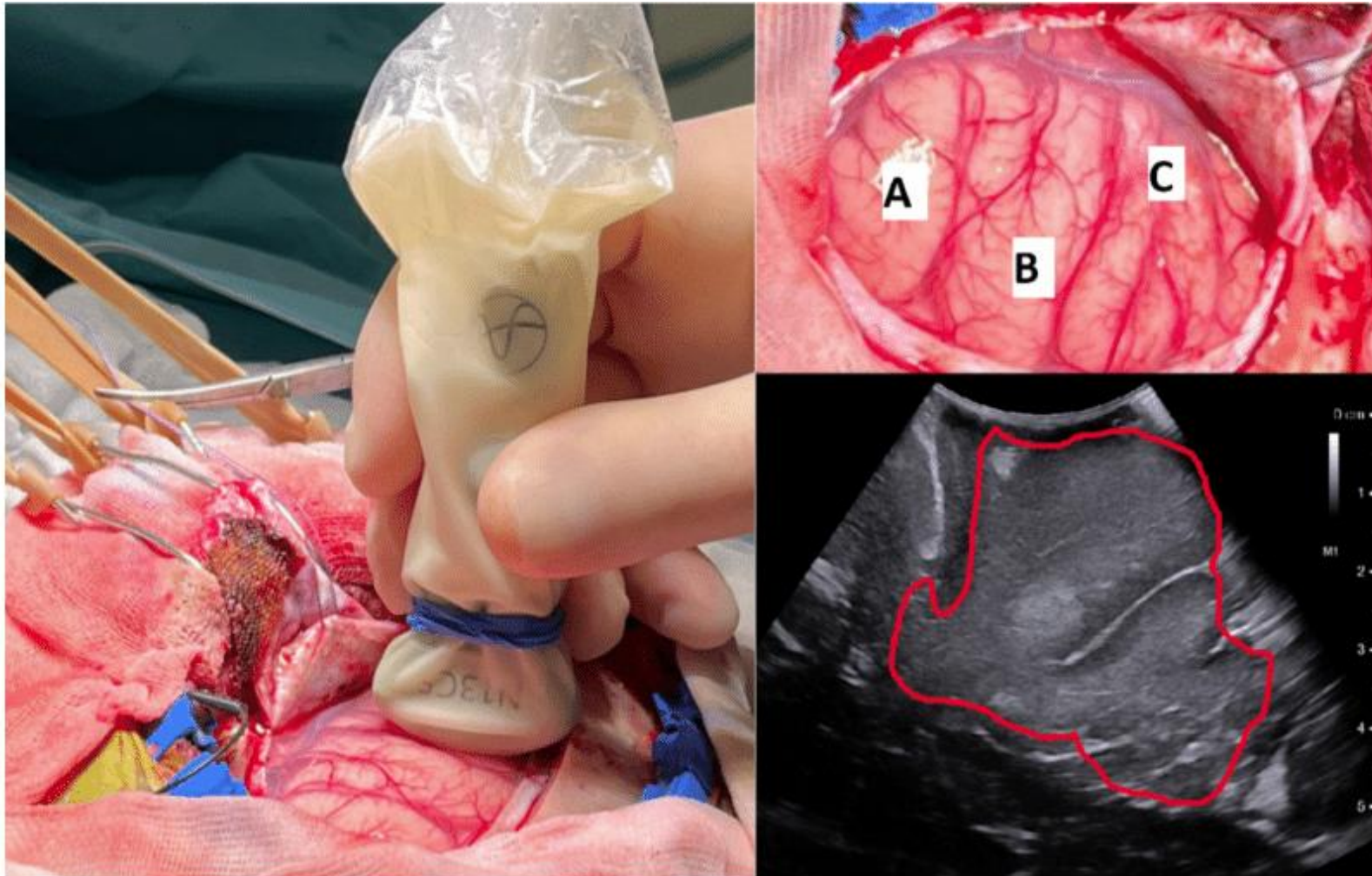
Nevrofysiologi



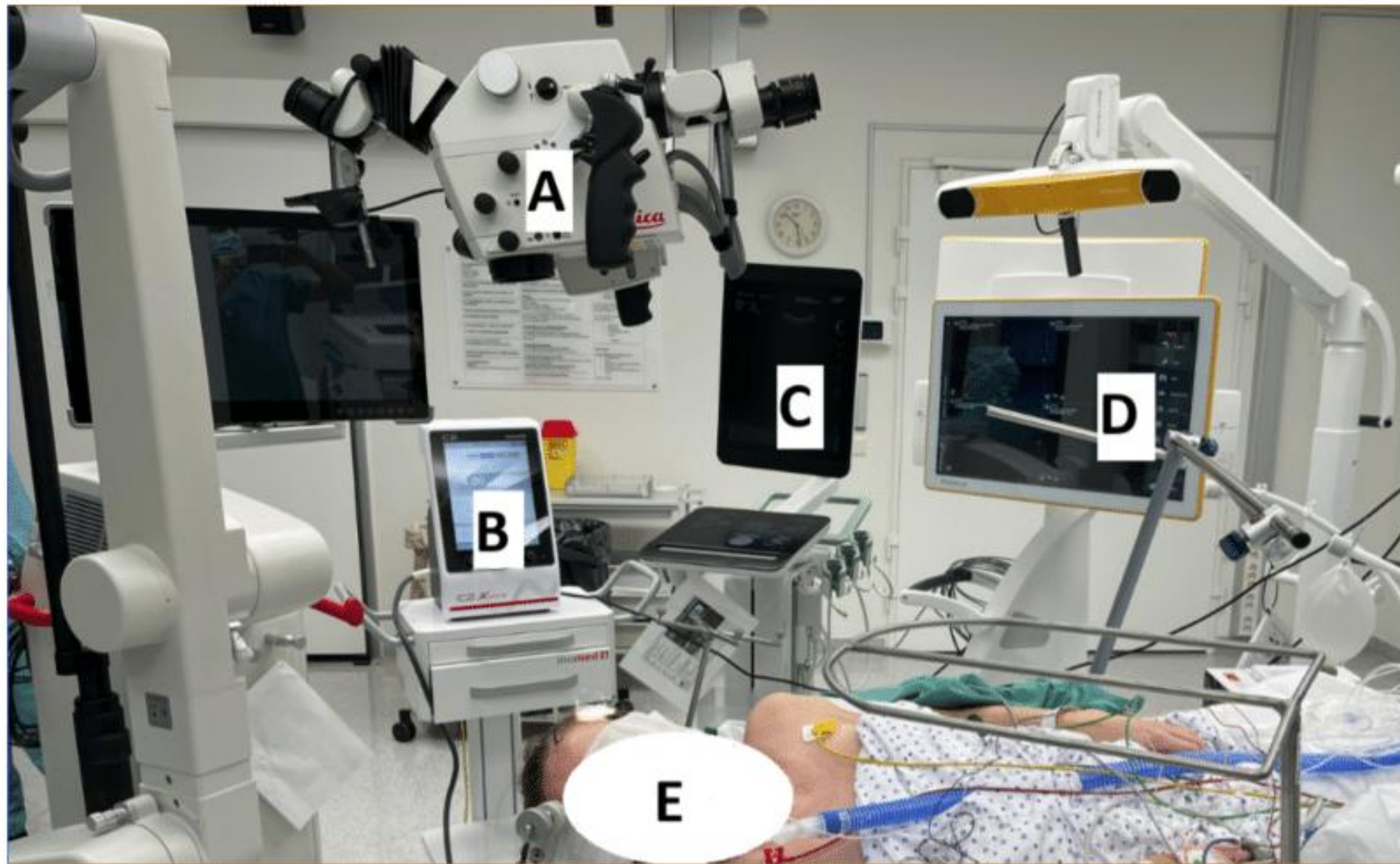
Nevrofysiologi og våkenkirurgi



UL



Figur 2: Kraniotomi med funksjonell og strukturell kartlegging. Sensorisk korteks (A), motorkorteks (B) og anatomisk Broca (C). Ultralydbildet viser omriss av svulsten, vist i rødt. Hvit substans som vanligvis er fettholdig og lav-ekkoen og derfor mørkere enn hjernebarken på ultralydbilder. Ved lavgradige gliomer er svulsten som sitter i hvitsubstansen høyekkoen.



Figur 3: Oppsett i forberedelse av en våkenoperasjon. Hjelpemidler som operasjonsmikroskop (A), nevrostimulator for kortikal og subkortikal stimulering og monitorering (B), ultralydscanner for intraoperativ 2D og 3D ultralyd (C), nevronavigasjon (D) er klare. Pasienten sover med larynxmaske (E).

Reseksjon

Mikroinstrumenter og sug

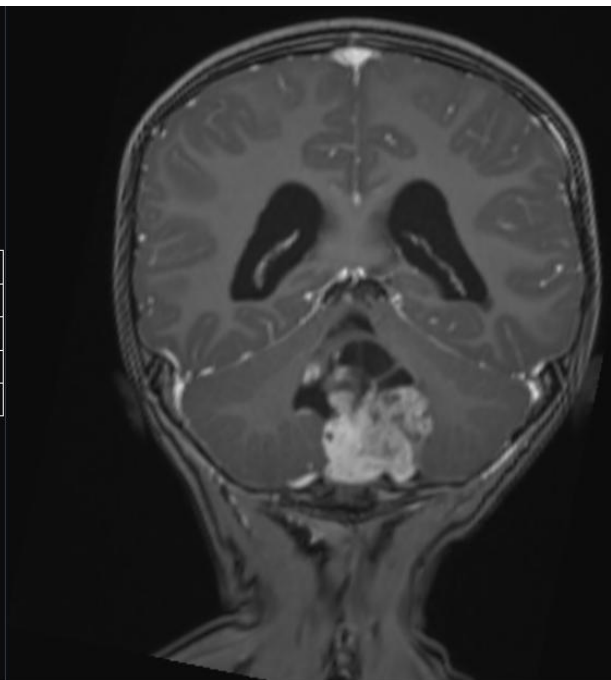
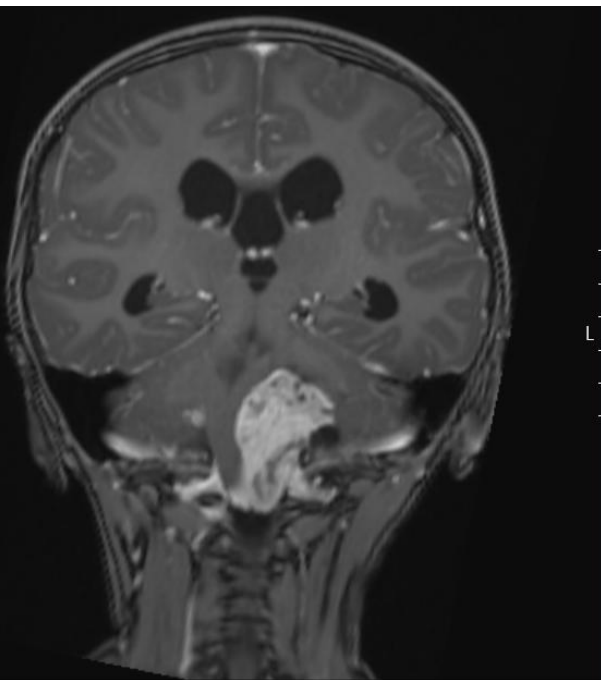
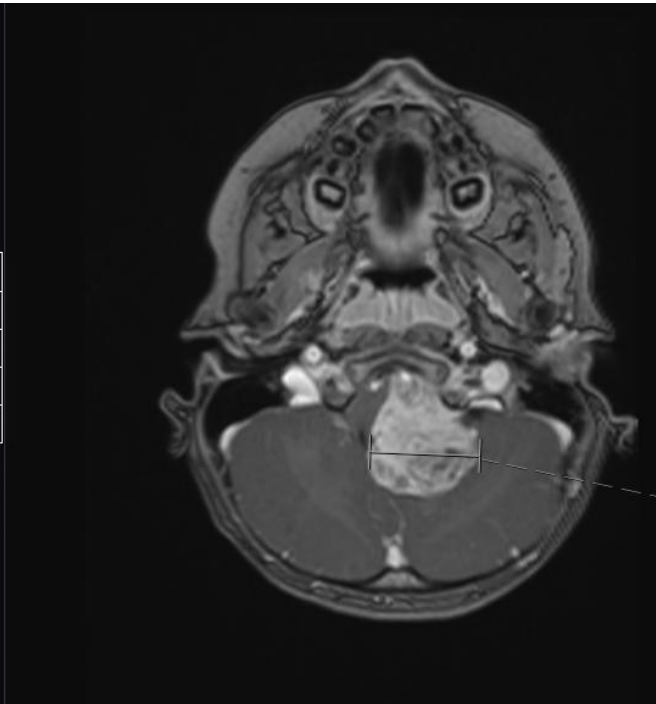
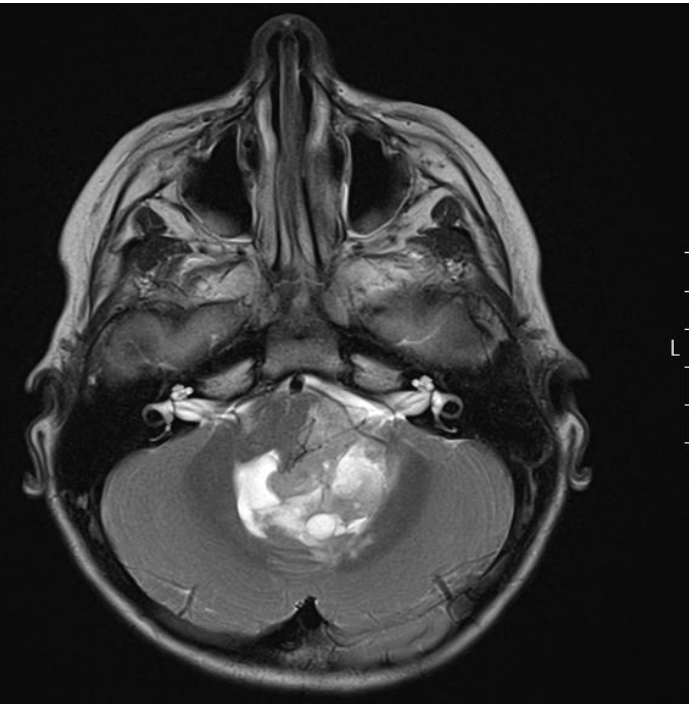
Ultralyd-aspirator



Hvilken tumor er det?

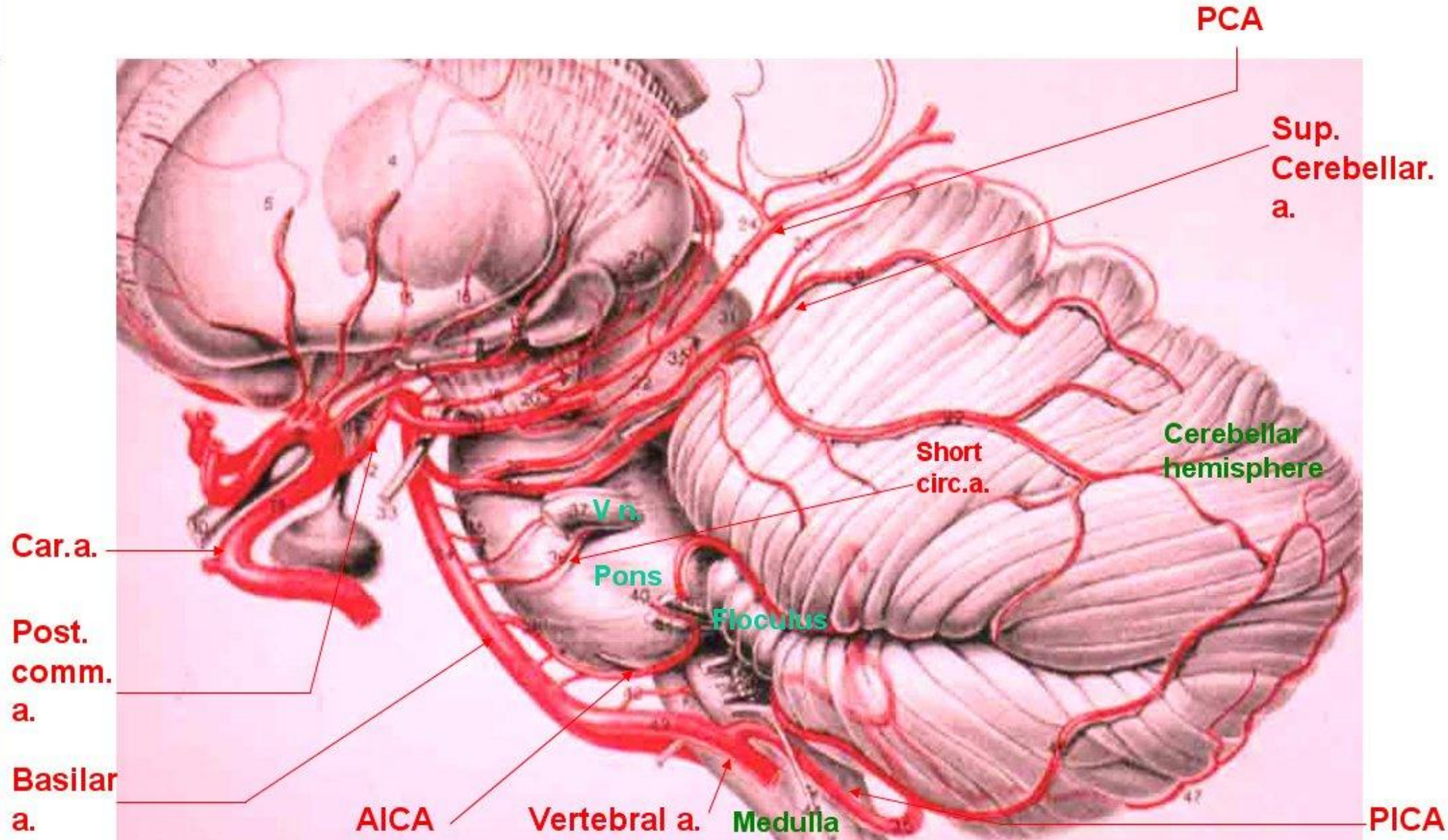
Biopsi, frysesnitt, nanopore

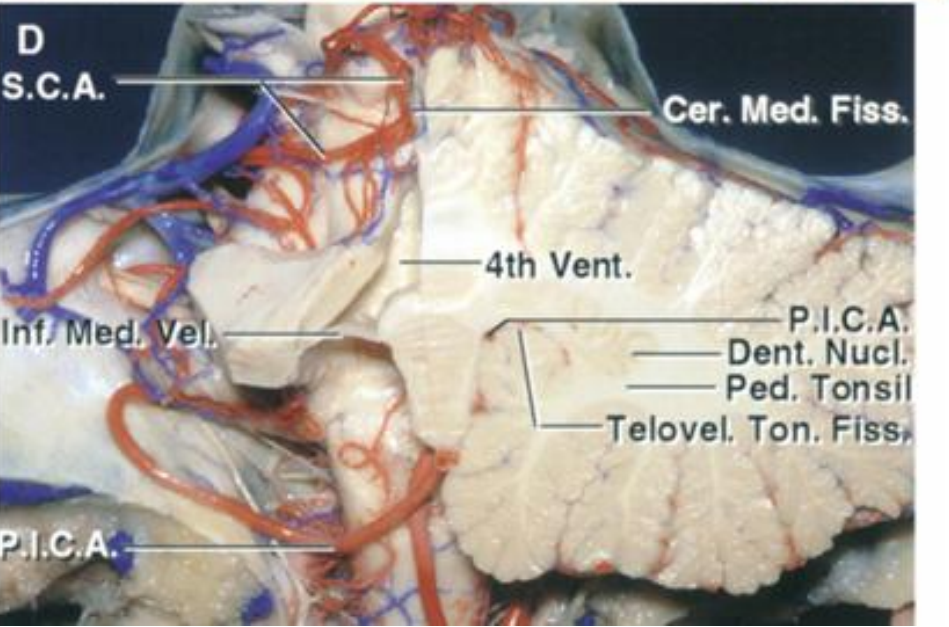
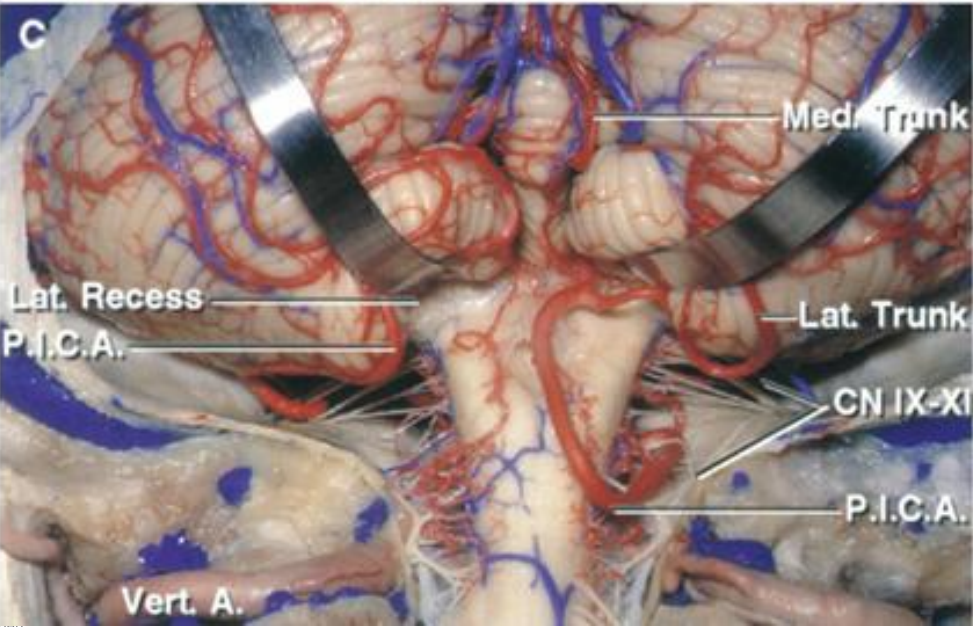
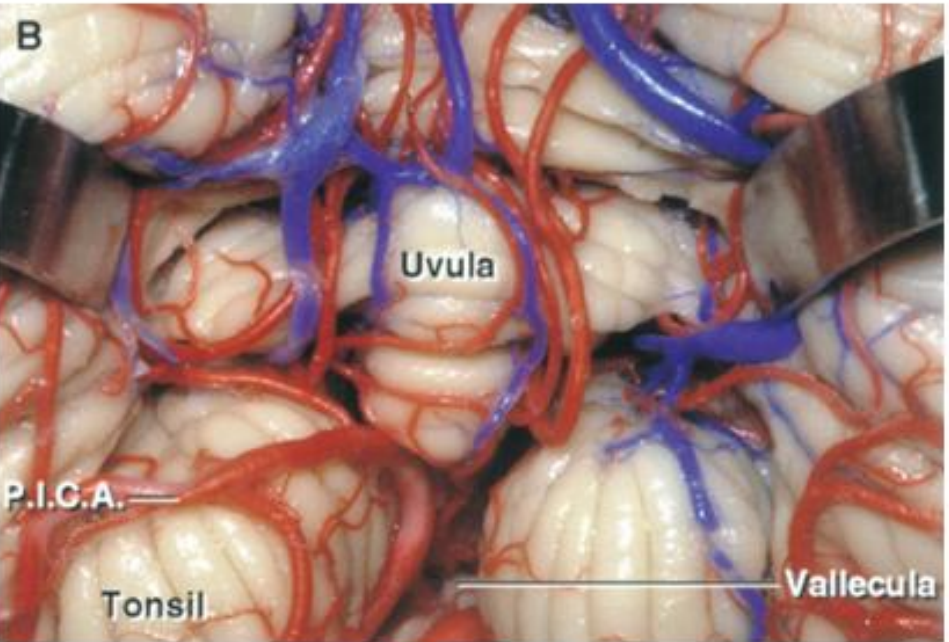
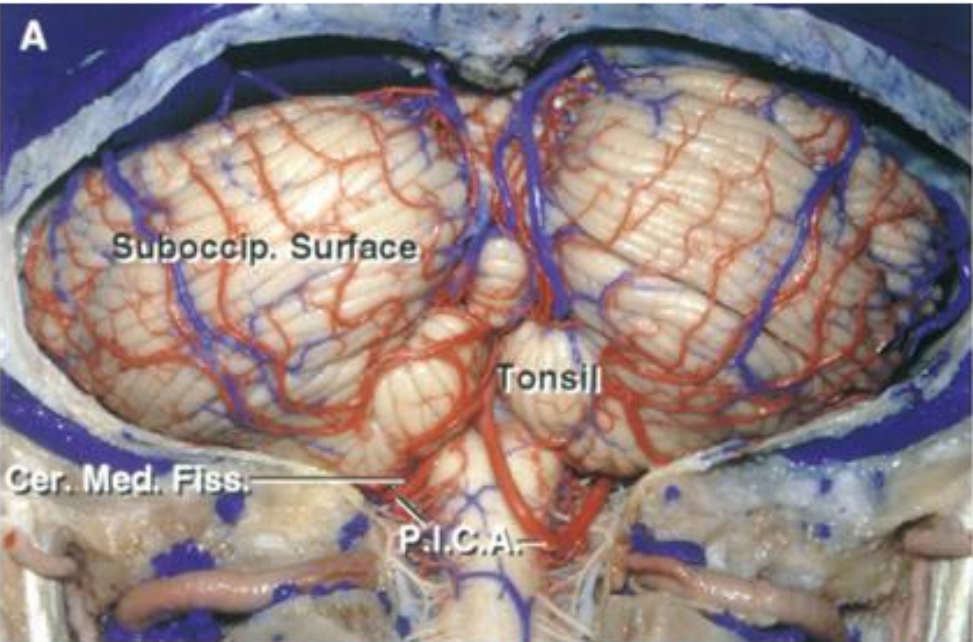
Ependymom

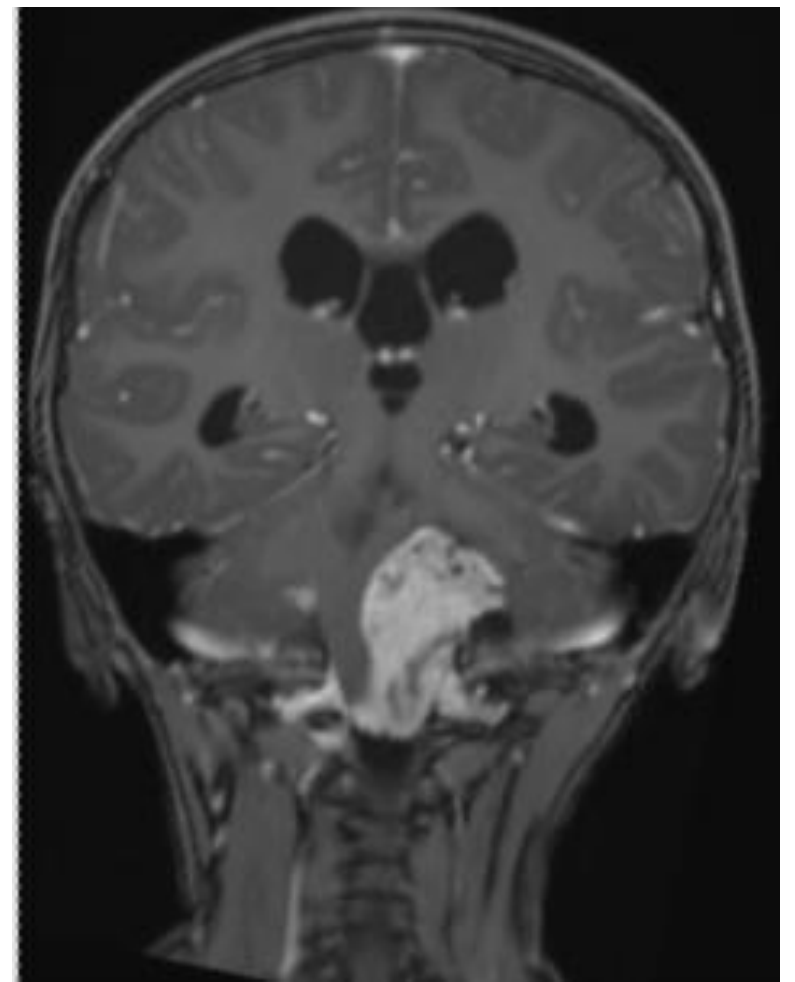
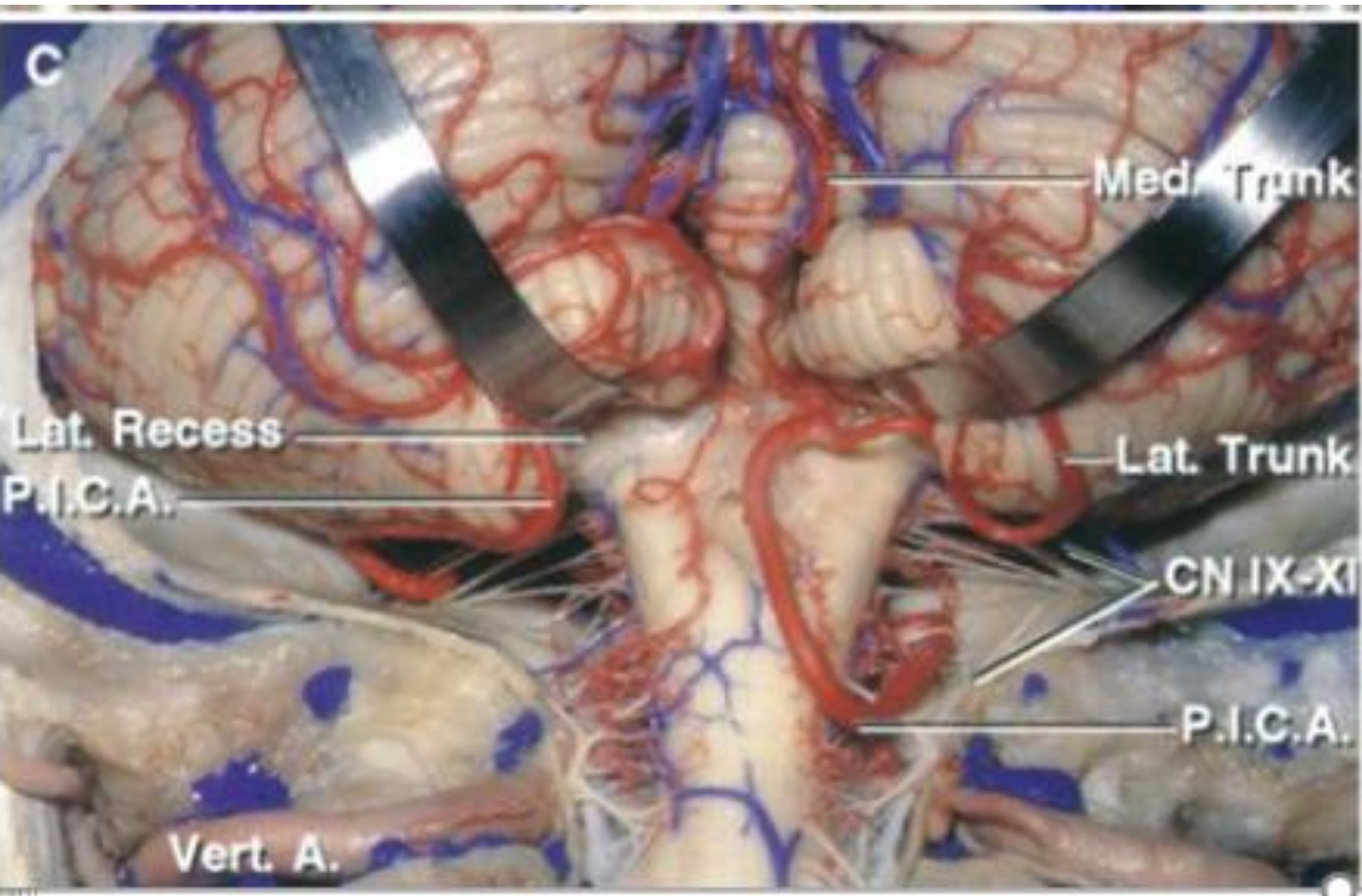


Arteries of brain stem and cerebellum

From by R.Nieuwenhuys, J.Voogd, C.van Huijzen . The central nervous system . Springer 3rd ed. 1998

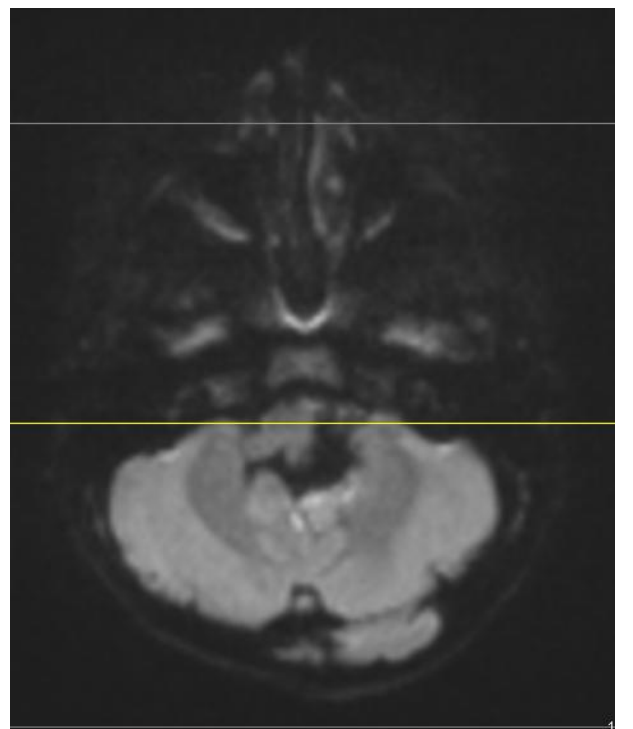
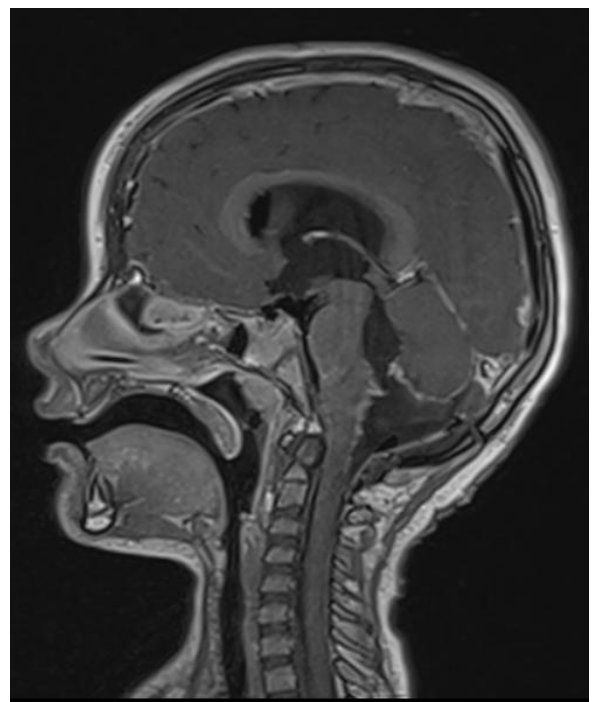
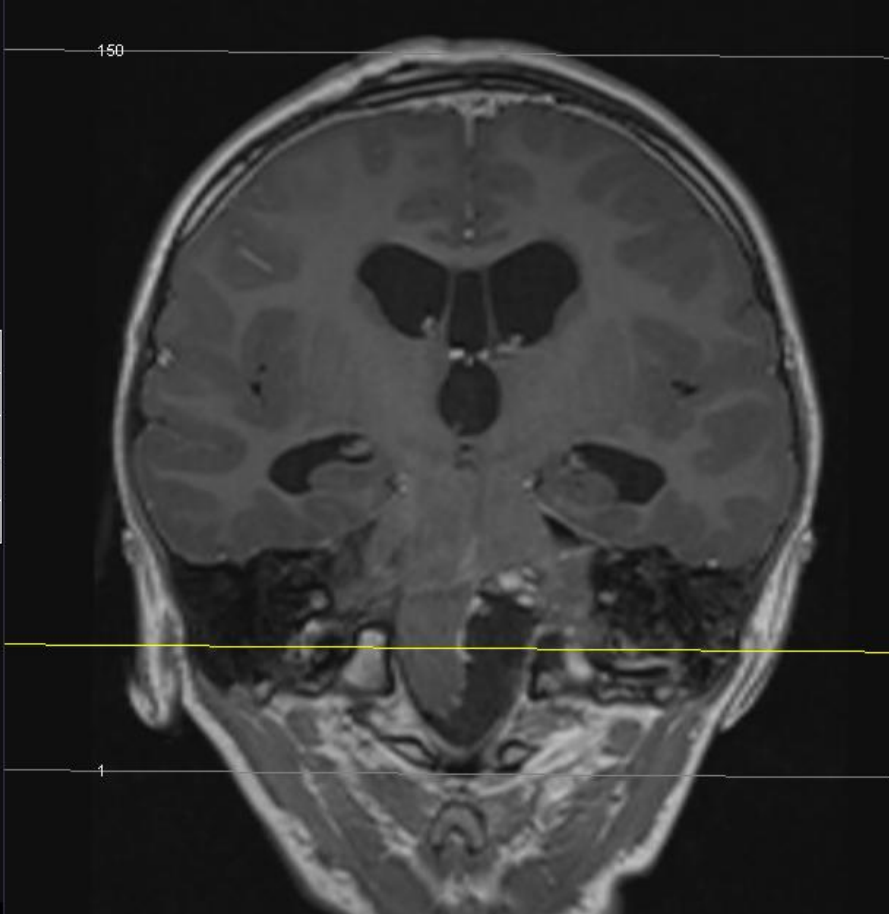
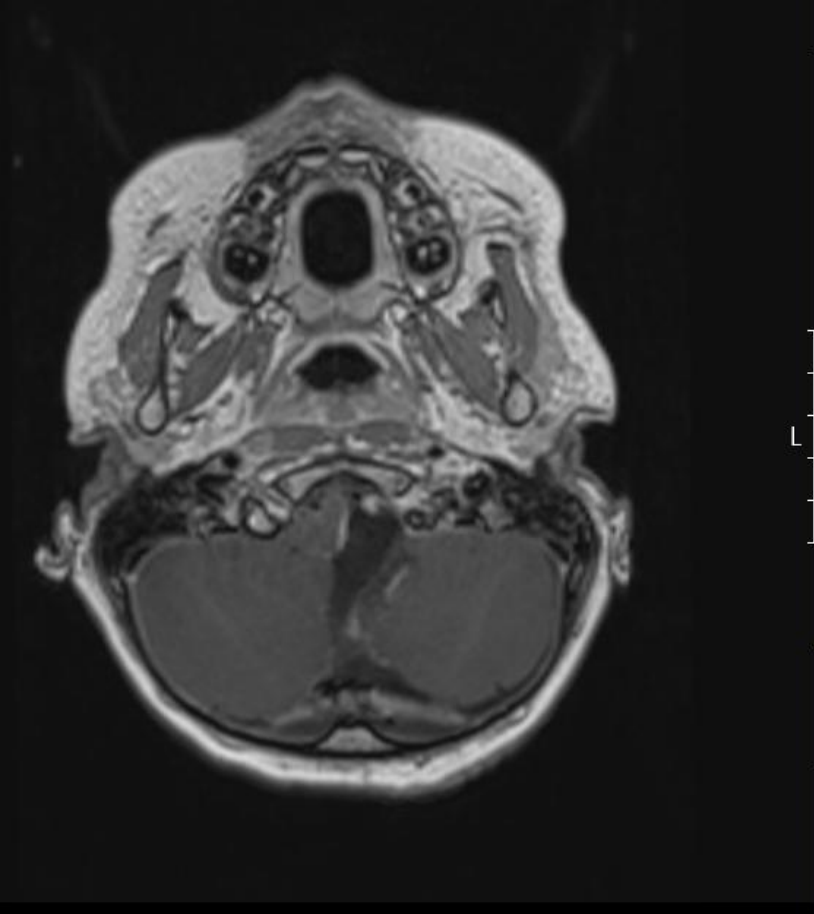






Intraoperative MRI (iMRI)







ADVERTISEMENT

Ad



MyHeritage

Finn helter i familier

Søk etter navn, dato og mer på nett. Start nå!

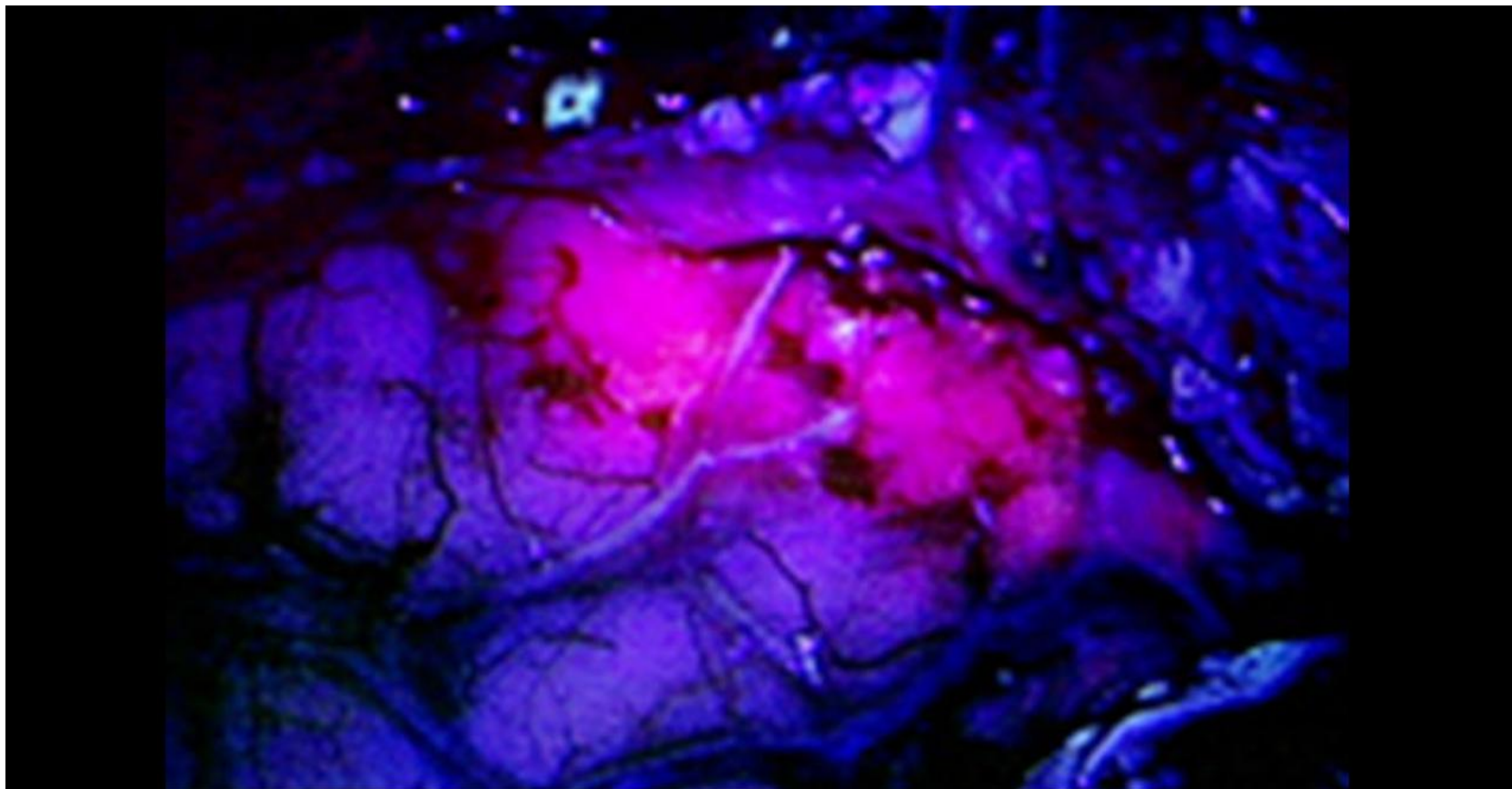
ÅPNE

Pink drink is helping surgeons spot aggressive brain cancers... by making tumours 'glow in the dark'

- The drink, called Gliolan or '5-ALA', uses a dye that reacts with a compound in the cancer which glows a pinkish colour when an ultraviolet light is shone on it
- Brand new innovation is now being used by neurosurgeons across the UK
- Technique doubles the chances doctors will find and remove all the cancer

By [ETHAN ENNALS](#), HEALTH EDITOR

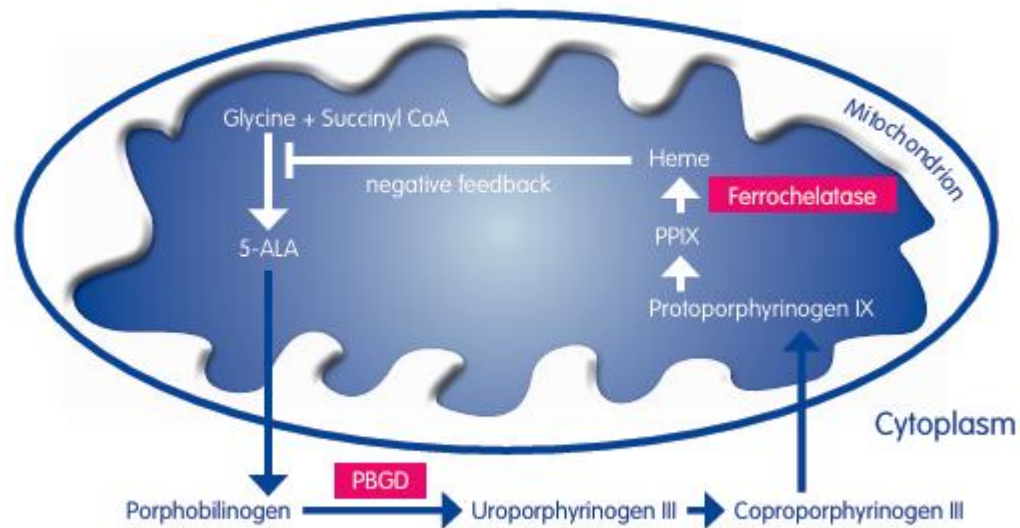
PUBLISHED: 22:05 GMT, 15 August 2020 | UPDATED: 11:54 GMT, 16 August 2020



The drink, called Gliolan or '5-ALA', uses a dye that reacts with a compound in the cancer which glows a pinkish colour when an ultraviolet light is shone on it, helping surgeons tell diseased tissue from healthy areas

Gliolan

Fig. 2: Heme biosynthesis pathway. Accumulation of PpIX following external 5-ALA administration



5-ALA = 5-aminolevulinic acid

PBGD = porphobilinogen deaminase

PpIX = protoporphyrin IX



Fluorescein