

I am a Consultant Neurosurgeon specializing in Minimally Invasive and endoscopic Neurosurgery. I completed a MSc in Surgical Technology at Imperial College and a two year advanced fellowship in endoscopic skull base surgery in Pittsburgh, US.

My main areas of research are:

- 1- Minimally Invasive and robotic assisted Neurosurgery
- 2- Augmented Reality in Neurosurgery
- 3- Repetitive Trans-cranial Magnetic Stimulation (rTMS)

### **1- Minimally invasive and robotic assisted neurosurgery:**

I specialise in endoscopic endonasal skull base surgery where extensive tumours of the base of the skull can be completely removed through the nose using endoscopic instruments. The technique has been developed and embraced by a number of neurosurgeons and ENT surgeons in the last 5-10 years. Please see a list of my publications below.

The procedures require at least two surgeons working side by side.

I have developed a technique whereby my assistant has now been replaced by a robotic pneumatic arm (Storz Point Setter) holding the endoscope allowing for a complex operation to be performed by a single surgeon. The benefits are:

- reduction of number of surgeons in theatre
- absence of tremor and drifting when the scope is held by the robotic arm
- reduction in operating time

### **2- Augmented Reality in Neurosurgery:**

I am working on a project using the Microsoft HoloLens augmented reality (AR) headset to aid in Stereotactic Neurosurgical procedures including:

- percutaneous trigeminal ganglion glycerol injection
- stereotactic brain tumour biopsy
- insertion of external ventricular drain for hydrocephalus

The ultimate goal of using AR in stereotactic neurosurgical procedures is to optimize the theatre space by reducing and ultimately eliminating the presence of bulky machines and monitors. All the information required by the surgeon (scans, image guidance, patients' vital signs, etc.) is now directly superimposed into his/her AR headset.

### **3- Repetitive Trans-cranial Magnetic Stimulation (rTMS)..**

Repetitive Transcranial Magnetic Stimulation or rTMS is a novel treatment for neurological and psychiatric problems that is non invasive and offers an alternative to taking medications, electro-convulsive therapy (ECT) and surgical intervention.

rTMS employs short pulses of electromagnetic waves that travel through the skull to stimulate or suppress specific areas of the brain that are thought to play a role in conditions like depression, chronic neuropathic pain and migraine. There is also increasing evidence that rTMS might be beneficial in rehabilitation following a stroke.

In the majority of these neurological conditions the treatment with rTMS is still experimental but the evidence-base is growing fast.

1. [Intraoperative computed tomography guidance to confirm decompression following endoscopic endonasal approach for cervicomedullary compression.](#)  
Gande A, Tormenti MJ, Koutourousiou M, Paluzzi A, Fernandez-Miranda JC, Snyderman CH, Gardner PA.  
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PMID: 24436887 [PubMed] **Free PMC Article**  
[Similar articles](#)
2. [Combined endoscopic endonasal transorbital approach with transconjunctival-medial orbitotomy for excisional biopsy of the optic nerve: technical note.](#)  
Koutourousiou M, Gardner PA, Stefko ST, Paluzzi A, Fernandez-Miranda JC, Snyderman CH, Maroon JC.  
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PMID: 23946927 [PubMed] **Free PMC Article**  
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3. [Endoscopic endonasal approach for pituitary adenomas: a series of 555 patients.](#)  
Paluzzi A, Fernandez-Miranda JC, Tonya Stefko S, Challinor S, Snyderman CH, Gardner PA.  
Pituitary. 2014 Aug;17(4):307-19. doi: 10.1007/s11102-013-0502-4.  
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[Similar articles](#)
4. [Extended dissection of the septal flap pedicle for ipsilateral endoscopic transpterygoid approaches.](#)  
Pinheiro-Neto CD, Paluzzi A, Fernandez-Miranda JC, Scopel TF, Wang EW, Gardner PA, Snyderman CH.

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5. [Endoscopic endonasal surgery for giant pituitary adenomas: advantages and limitations.](#)

Koutourousiou M, Gardner PA, Fernandez-Miranda JC, Paluzzi A, Wang EW, Snyderman CH.

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PMID: 23289816 [PubMed - indexed for MEDLINE]

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6. [Endoscopic endonasal approach for growth hormone secreting pituitary adenomas: outcomes in 53 patients using 2010 consensus criteria for remission.](#)

Shin SS, Tormenti MJ, Paluzzi A, Rothfus WE, Chang YF, Zainah H, Fernandez-Miranda JC, Snyderman CH, Challinor SM, Gardner PA.

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7. [The expanding role of endoscopic skull base surgery.](#)

Paluzzi A, Gardner P, Fernandez-Miranda JC, Snyderman C.

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8. [Endoscopic endonasal infrasellar approach to the sellar and suprasellar regions: technical note.](#)

Paluzzi A, Fernandez-Miranda JC, Pinheiro-Neto C, Alcocer-Barradas V, Lopez-Alvarez B, Gardner P, Snyderman C.

Skull Base. 2011 Sep;21(5):335-42. doi: 10.1055/s-0031-1280682.

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9. [Petrous apex cholesterol granulomas: endonasal versus infracochlear approach.](#)

Scopel TF, Fernandez-Miranda JC, Pinheiro-Neto CD, Peris-Celda M, Paluzzi A, Gardner PA, Hirsch BE, Snyderman CH.

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10. [Endoscopic endonasal repair of spontaneous CSF fistulae.](#)

Tormenti MJ, Paluzzi A, Pinheiro-Nieto C, Fernandez-Miranda JC, Snyderman CH, Gardner PA.

J Neurosurg. 2012 Jan;32 Suppl:E6.

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11. [Endoscopic endonasal approach to cholesterol granulomas of the petrous apex: a series of 17 patients: clinical article.](#)

Paluzzi A, Gardner P, Fernandez-Miranda JC, Pinheiro-Neto CD, Scopel TF, Koutourousiou M, Snyderman CH.

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12. [Endoscopic endonasal repair of spontaneous CSF fistulae.](#)

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13. [Endoscopic anatomy of the palatovaginal canal \(palatosphenoidal canal\): a landmark for dissection of the vidian nerve during endonasal transpterygoid approaches.](#)

Pinheiro-Neto CD, Fernandez-Miranda JC, Rivera-Serrano CM, Paluzzi A, Snyderman CH, Gardner PA, Sennes LU.

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