

❖ Name & Designation	: Dr. Tulika Gupta, Assistant Professor.
❖ Address	: Dept. of Anatomy, PGIMER, Chandigarh-160012. Cant, University of Delhi, New Delhi-110010.
❖ Name of the International Conference/ Seminar/Symposium/ Workshop	: 15 th European Congress of Neurosurgery-EAN 2014.
❖ Title of the abstract accepted	: 1. Atlas anatomy as relevant to optimal placement of trans-pedicular fixation. 2. Localization as a reference point.
❖ Date & Venue	: 12-17 th October, 2014. Prague, Czech Republic.
❖ Money sanctioned	: ₹ 82,977/-
❖ Money reimbursed	: ₹ 75,911/-

Participation Report

i) **Organization of the meeting:**

This meeting was attended by neuroscientists, both clinical and basic researchers from all over the world including USA, Japan and all the European countries. More than 40 national societies were represented at the conference. Each day there were breakfast sessions, plenary sessions and parallel sessions dealing with various aspects of neurosciences. On the first day of the conference there were sessions and workshops devoted to 3-D surgical neuro-anatomy and endoscopic endonasal skull base surgery.

ii) **Academic highlights:**

The next 5 days were devoted to defining the limits of neurosurgery and neurosciences in relation to brain tumours, skull base lesions, vascular malformations, cranio-vertebral junction anomalies and various neurodegenerative spinal conditions. Each day, there was a session devoted to EANS anatomy. There were detailed discussions on basic and translational research as well as on complication avoidance in neurosurgery. Surgery on anatomically eloquent areas was also presented. There were also interactive multidisciplinary sessions on newer techniques in gliomas. The importance of utilizing latest developments in technology such as neuronavigation, intra-operative MR imaging, neuro-robotics, Diffusion tensor imaging etc. for improving the post-operative quality of life was stressed. There were also debates on the still ongoing controversy of clipping versus coiling for intracranial aneurysms. There were sessions on guidelines for penetrating traumatic brain injuries as well as on improving the use of Glasgow coma scale and score. A session was devoted to humanitarian neurosurgery.

Participant's contribution to the training/workshop:

I had two presentations (e-posters). One was a detailed cadaveric anatomical study of the atlas vertebra anatomy in an attempt to define a surgical safe zone for screw placement in the

pedicles of the first vertebra for diseases of the cranio-vertebral junction requiring stabilization procedures. The entry point in the atlas pedicle which allowed a safe screw trajectory without damaging the vertebral artery and the optimal screw length in Indian patients was defined. The second paper dealt with the importance and relevance of the zygomatico-facial foramen as a landmark for identifying inferior orbital fissure during orbito-zygomatic craniotomy. Both the papers dealt with translating anatomical knowledge to surgical field.