

the aim of the present study was to note values of quantitative linear and angular craniometrical measurements.

Material and methods: Parameters for posterior cranial fossa, base of skull and foramen magnum were measured in fifty random intact adult dry skulls using vernier calipers and seventy adult normal CT head scans (128 slice).

Results: A comprehensive range of parameters of PCF and FM were obtained from dry skulls and CT scans. The values of FM, supraocciput, posterior fossa height and volume were similar in that of skull and CT scans. Posterior fossa diameters (anteroposterior, transverse) and clivus length were significantly lower in dry skulls ($p < 0.05$).

Conclusion: Majority of the measurements on CT scan analysis were comparable with that of manual measurements taken on dry skulls. Rest of the parameters had lower values. One of the reasons for the difference in results of these parameters in two modalities may be because the skulls and CTs were of different individuals.

Conflicts of interest

The authors have none to declare.

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Variations of fissures and lobes in human lung – A cadaveric study



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Aims and objectives: To study the variations in presence and completeness of fissures and lobes of the lungs in human cadavers. The lungs or pulmones are the principal organs of respiration. Two lungs Rt. & Lt. situated in the thoracic cavity, one on either side of the mediastinum enclosed in the pleural sac. The Right lung is divided into three lobes: superior, middle and inferior by two fissures-(a) Oblique fissure and (b) Horizontal fissure. The left lung is divided into two lobes by an oblique fissure.

Material and methods: The study was conducted in the Department of Anatomy, Assam Medical College, Dibrugarh in 30 formalin fixed specimens collected from the perinatal cadavers received from the department of O&G and also adult cadavers received for dissection of undergraduate MBBS students.

Results: Variation and completeness is not infrequent. Incomplete oblique fissure is more common than incomplete horizontal fissure in right sided lung and incomplete fissures are more common in right sided than left sided lung.

Conclusion: This study will be helpful for the surgeons as well as Physicians. A detailed knowledge of variations of classical and accessory fissures is necessary for proper radiological interpretation and guide to cardiothoracic surgeons before performing lobectomy.

Conflicts of interest

The authors have none to declare.

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Anatomy and dimensions of C1 vertebra relative to lateral mass screw placement



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Aims and objectives: A variety of C1–C2 fusion techniques have been described for stabilizing C1 vertebral fractures including posterior wiring techniques and transarticular screw fixation through C2 pars interarticularis into C1 lateral mass. These techniques have limitations that maybe overcome by isolated C1 lateral mass screws. However, C1 lateral mass dimensions are not well described in literature.

The aim of the study was to suggest ideal entry and exit points, and define safe trajectory for placement of screws through lateral mass of C1 vertebra for maximum stability in C1 fractures. The objectives include defining the dimensions and variability of C1 lateral mass and suggest ideal trajectories for screw placement such as to avoid injury to spinal cord in vertebral canal medially and vertebral artery in foramen transversarium laterally.

Material and methods: A total of 100 lateral masses from 50 C1 vertebrae were examined and variables measured to determine feasibility of placement of lateral mass screws.

Results: Ideal entry point was defined as the midpoint of pedicle at its junction with lateral mass. Direction of angulation of ideal trajectory of screw is 4.8° medially on left side and 3.8° medially on the right. Safe depth of screw penetration is 17 mm.

Conclusion: Safe placement of cortical screws through lateral mass of C1 with maximum bone purchase is ideal for stabilization of C1 fractures.

Conflicts of interest

The authors have none to declare.

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Stylalgia-glossopharyngeal neuralgia: Review of anatomy and outcome of management



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Aims and objectives:

- To review the morphogenesis of Reichert's cartilage with reference to stylalgia.
- To find other possible cause of stylalgia among patients visiting ENT services.
- To assess the effectiveness of management in patients of symptomatic elongated styloid process.

Material and methods: The present study was carried out by the departments of Anatomy and ENT in a teaching Institution, from 2010 till 2014. Thirty patients of stylalgia were evaluated by anatomical and clinico-radiological examination. The presenting symptoms were throat pain, ipsilateral otalgia and facial pain. Diagnosis was established by intraoral palpation of styloid process,