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Commentary

This is a well-written article about a single case of giant cell reparative granuloma. This disease process is relatively rare, and its history is variable. The authors have done an excellent job of reviewing the natural history of the disease and of discussing patient management.

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Commentary

The authors present an unusual case of recurrent giant cell reparative granuloma (GCRG) of the skull base that manifested as acute monocular blindness. GCRG, a rare, benign fibro-osseous lesion, typically presents as an expansile mass in the region of the mandible and maxilla. As this case demonstrates, GCRG can involve the skull base and enlarge to massive proportions, making surgical treatment challenging. The authors initially resected the lesion through a combined frontobasal and modified infratemporal approach, which provided wide access laterally but more limited access in the deep midline. Interestingly, the lesion recurred where the initial surgical exposure was most limited. The recurrence argues for the need for an extensive surgical exposure as was achieved in the reoperation through a combined transfrontal-transmaxillary-infratemporal approach. It is natural to try to limit the extent of the surgical approach for what typically is a benign-behaving lesion like GCRG. This case, however, demonstrates the importance of a wide surgical exposure to achieve radical resection.

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