Patient	Sex	Age	background	Location of the lesion	Diameter	Paraclinical examination	Ophthalmolog ical examination	Gene aesthetic	Gene Psycholog ical	Therapeutic decision	Recidivism
2	M	30	Carrier of NF 1 since childhood	Inter- parieto - occipital	20/14 cm long axis.	Facial CT: invasion of soft tissues without bone involvement	Normal	Facial dysmorphia	here	Subtotal tumor excision with reconstruction by total skin graft	Absence of recurrence at 4 years interval
3	M	18	Carrier of NF 1 since childhood	Obito -palpebral	8/5 cm Major axis	Facial CT: invasion of soft tissues without bone involvement	Visual acuity 2/10	Facial dysmorphia -Lid ectropion - Mechanical ptosis	Here	Clean surgery via upper eyelid approach with reconstruction by direct suture	Tumor recurrence on MRI after 3 years.
4	F	36	Carrier of NF 1 since childhood	Lip -chin rest	7 cm large diameter/5.5/4 cm anterior projection .	Facial CT: invasion of soft tissues without bone involvement	Normal	Facial dysmorphia Lower labial eversion	here	Tumor excision by sublabial approach at the CM and paramental junction	Absence of recurrence with a follow-up of 2 years
5	F	18	Carrier of NF 1 since childhood	Fronto -orbital	5/8cm	Facial CT: dysplasia of the sphenoid wing with a cranial orbit and meningoencephalocele	AV has 10/10 without cataract or glaucoma	Significant facial dysmorphism Exophthalmos Pulsatile	here	2 surgical steps: 1st neurosurgery: by bi-coronal Cairns approach (repair of the meningo-encephalocele, and split bone graft for the orbital wall and ^{2nd} stage combined craniofacial approach	2 years back Absence of recidivism
6	F	15	Carrier of NF 1 since childhood	Temporal- palpebral	12/4cm	Facial CT: invasion of soft tissues without bone involvement	Normal	Fronto -temporal distortion	Present	Iterative intra-lesional excision of the temporal tumor, then palpebral in 3 procedures	Retreat 3 years Absence of recidivism
7	M	30	Carrier of NF 1 since childhood	Fronto - Temporo- Palpebro -jugal	14/8 cm	Facial CT: sphenoid wing dysplasia with meningoencephalocele And optic pathway glioma.	Non-functional ipsilateral eye	Ptosis	Here	1st stage: repair of the PM using a temporojugal plasty and a bi-palpebral plasty	2nd oculo - orbital and neurosurgical stage are planned
8	M	30	Carrier of NF 1 since childhood	Jugal low	20/08 cm	Facial CT: invasion of soft tissues without bone involvement	Posterior polar cataract	Significant facial dysmorphism Ipsilateral eyelid ectropion Latero-mandible	here	Patient refuses surgical treatment	Lost view
9	F	35	Carrier of NF 1 since childhood	Temporo-Cervico- jugal	20/8 cm	Not done	Not done	Important	here	Patient lost to follow-up	Lost view

Table 1: Clinical and paraclinical characteristics of patients admitted and managed in our training program