

## Bölüm 17

# ARKA ÇAPRAZ BAĞ YARALANMALARI VE TEDAVİ YÖNTEMLERİ

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### GİRİŞ

Günümüzde artan sportif aktivite, yüksek hızlı araç içi ve araç dışı trafik kazaları ile birlikte iş kazaları sonrasında izole ve diğer ligaman yaralanmaları ile birlikte arka çapraz bağ yaralanmalarına daha sık rastlıyoruz. Bu artışta hekimin artan bilgi ve beceri düzeyinin katkısı da mutlak. Bu bölümde arka çapraz bağ anatomisi, yaralanmalarda tanı yöntemleri ve tedavisi hakkında bilgi vermek amaçlanmıştır.

### Anatomi ve Biyomekanik

Arka Çapraz Bağ (AÇB) diz eklemi içinde anterolateral ve posteromedial yerleşimli iki ana komponentin birleşmesiyle oluşur(1). AÇB proksimalde femur medial kondilinin posterolateraline yapışıp bu başlangıç noktasından 2 ana demet halinde Tibia'ya uzanır, demetler tibiadaki yapışma lokalizasyonlarına göre anterolateral ve posteromedial olarak isimlendirilirler. Tibiadaki yapışma yeri platonun posteriorunda, lateral menisküs arka boynuzunun komşuluğunda bir ağ şeklinde yayılarak, plato yüzeyinin altında son bulur (resim 1). Anterolateral parça bağın %85'lik ana kısmını oluştururken, posteromedial parça %10-15'lik kısmını oluşturmaktadır(2). Fleksiyon esnasında anterolateral parça gerilir, posteromedial parça ise gevşer. Ekstansiyonda ise tam tersi görülür(3).

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