

ALT EKSTREMİTE VE GÖVDE PERİFERİK SİNİR BLOKLARI

27. BÖLÜM

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1.Giriş

Alt ekstremité ve gövde periferik sinir blokları, ileri derecede akciğer sorunları olan veya santral blokların uygulanamadığı hastalarda önemli rol oynamaktadır. Hem cerrahi işlemin uygulanması hem de sonrasında yeterli analjezi için son zamanlarda özellikle tercih edilmektedir. Ultrason kullanımı ile görerek blok uygulanması koplikasyon oranını düşürmenin yanında yüksek başarı oranı sağlamıştır. Ayrıca genel anestezi ile batın, toraks ve omurga cerrahileri sonrası ortaya çıkan şiddetli ağrıları da kolayca kontrol altına alabilmekteyiz.

2.Alt ekstremité periferik sinir blokları

2.1.Femoral sinir bloğu

Winnie tarafından 1973 yılında “3 in 1 block” şeklinde femoral, lateral kutanöz femoris ve obturator sinirin anestezi tanımlanmıştır (1).

Femoral sinir, lomber pleksusun en büyük dalları arasındadır. Femoral sinir L2, L3 ve L4 spinal sinirlerin ventral ramilerinden doğar ve inguinal ligamanın altındaki femoral üçgene girer. Femoral sinir, sirkumfleks arter seviyesinde ön ve arka böülümlere ayrılır. Ön bölüm medial femoral kutanöz siniri oluşturur ve sartorius kasını innerve eder. Arka bölüm safen sinirini oluşturur ve kuadriseps femoris kasına innervasyon sağlar. Motor innervasyona ek olarak, femoral sinir ön uyluk ve diz altındaki medial alt ekstremiteye duyu sağlar. Safen sinir, medial alt bacak ve ayağın duyusundan sorumlu olan bir femoral sinir dalıdır (2).

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vers proces, erktör spina, psoas majör ve QL kaslarının oluşturduğu "Shamrock işaretü" gösterilir. Lokal anestezik QL kasının önüne verilir (3, 73).

Posterior QL blok, T7-L1 arasında analjezi sağlarken, anterior QL blok T10-L4 arasında, transmusküler QL blok T4-L1 arasında analjezi sağlar (3). Genellikle abdominal, obstetrik, jinekolojik ve ürolojik ameliyatlardan sonra ağrı tedavisinde kullanılır. Yine femoral bypass, kalça, femur ve lomber vertebra ameliyatlarında başarıyla kullanıldığına dair yayınlar mevcuttur (74,75).

4.Sonuç

Genel anestezi uygulanamadığı, santral blokların kontraendike olduğu durumlarda, alt ekstremitelerde periferik sinir blokları ile yeterli anestezi ve analjezi sağlanmıştır. Ayrıca toraks, batın veya spinal cerrahiler sonrası yeterli analjezi sağlanmasıyla hasta konforu da üst düzeylere ulaştırmıştır. Tüm bunların yanında cerrahi bölgünin kan akımını artırır ve stres yanımı da azaltır. Periferik sinir blokları gelecekte yeni bilgiler ışığında çok daha önemli bir yer tutacaktır.

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