

YOĞUN BAKIMDA KAN VE KAN ÜRÜNLERİNİN TRANSFÜZYONU

35. BÖLÜM

Bişar ERGÜN¹

1.Giriş

Kan, içinde her birinin farklı görevleri olan hücresel elemanların olduğu canlı bir dokudur. Kanda başlıca eritrositler, lökositler, trombositler olmak üzere koagülasyon faktörleri, albumin, gamma globulinler ve diğer proteinler bulunur. Bu yüzden kan transfüzyonlarını doku nakli gibi kabul etmek gerekir. Kan ürünü transfüzyonu yapmadan önce sorulması gereken en önemli soru, transfüzyonun gerçekten gerekli olup olmadığıdır. Kan transfüzyonlarının kendine özgü çok sayıda komplikasyonu olduğu için, kar zarar oranını iyice değerlendirdikten sonra transfüzyon yapmak gerekir (1).

Bir vericiden alınan tam kan santrifüj edildikten sonra farklı komponentler elde edilir. Tam kanın santrifüje edilmesiyle en sık kullanılan ürünler olan eritrosit süspansiyonu, trombosit süspansiyonu, taze donmuş plazma ve kriyopresipitat elde edilir. Bu ürünlere pıhtılaşmayı önlemek için antikoagülan maddeler ve içindeki hücrelerin metabolizması için koruyucu sıvılar eklenir. Bu ürünler uygun sıcaklıklarda saklanarak uygun zamanda ve uygun endikasyonda kullanılırlar.

2.Kırmızı Kan Transfüzyonu

Dünya Sağlık Örgütüne göre anemi, hemoglobin değerinin erkekte 13 g/dL, kadında ise 12 g/dL'nin altında olmasıdır (2). Şiddetli anemi ise hemoglobin seviyesinin 8 g/dL'nin altında olmasıdır (3).

Yoğun bakım hastalarında çok sık anemi saptanmaktadır. Yoğun bakım yatışının 48. saatinde hastaların yaklaşık %70 kadarının bazal hemoglobin değeri 12

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7.Sonuç

Kan ve kan ürünü transfüzyonu uygun yapıldığında hayat kurtarır. Fakat transfüzyona bağlı ciddi komplikasyonlar olabilmektedir. Bu nedenle tranfüzyon kararı verirken hastada elde edeceğimiz fayda ve olası komplikasyonları iyice değerlendirip en uygun endikasyonda vermek gerekir.

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