

BÖLÜM 24

KARDİYOVASKÜLER RİSK BELİRLENMESİNDE KULLANILAN GÖRÜNTÜLEME YÖNTEMLERİ

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GİRİŞ

Dört bin yıl önce antik Mısır ve antik Peru'da yaşamış insanların mumyalarında dahi gösterilmiş ve insanın varoluşundan bu yana bizimle birlikte olan ateroskleroz, özellikle antibiyotik ve aşiların bulunmasıyla ve birlikte ortalama yaşam sürelerinin artmasıyla artık epidemik bir hal almıştır.(1, 2) Ateroskleroz, arteriyel duvarın kronik bir hastalığı olup çoğu kardiyovasküler hastalığın altında yatan temel neden ve vasküler mortalitenin onde gelen nedenidir.(3)

Hastalık, uzun yıllar latent seyredip çoğunlukla birden fazla vasküler yataktakta bulunur ve başlıca koroner kalp hastalığı, serebrovasküler hastalık, periferik arter hastalığı ve aortik aterosklerotik hastalık gibi klinik durumlar ile ortaya çıkar.(2) Framingham kalp çalışmasında kırk yaş altı bireyler için koroner kalp hastalığı geliştirme riski düşük (erkekler %1,2 – kadınlar %0,2) iken kırk yaş üstü bireylerde yaşam boyu koroner kalp hastalığı riski erkekler için %48,6 kadınlar için ise %31,7 olarak bulunmuştur.(4) Bu ciddi mortalite ve morbidite sebebi olan durumun özellikle erken safhalarda tespit edilmesi ve gerekiği durumlarda da primer koruma önlemlerinin alınması önem arz etmektedir.

Aterosklerotik Risk Belirlenmesinde Kullanılan Görüntüleme Yöntemleri

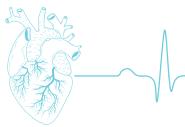
Aterosklerozun saptanması amacıyla çeşitli görüntüleme yöntemleri (Tablo 1, Şekil 1) kullanılarak hastalık tanımlanabilir veya risk altındaki kişiler daha doğru biçimde sınıflandırılarak uygulanacak tedaviye rehberlik edilebilir. Bu bölümde, risk belirlemesi amacıyla kullanılan başlıca görüntüleme yöntemlerinden bahsedilecektir.

**Tablo 1: Vasküler Fonksiyonların Değerlendirilmesi
Amacıyla Kullanılan Çeşitli Görüntüleme Yöntemleri.**

Koroner Dolaşım	Periferal Dolaşım	Subklinik Ateroskleroz
Koroner anjiyografi	Strain-gauge plethysmografi	Arterial katılık
intravasküler USG	Akim etkisiyle vazodilatasyon	Akim dalga velocitesi
MRG	Lazer doppler flowmetre	Karotid intima – media kalınlığı
PET	ABI	Koroner arter kalsiyumu

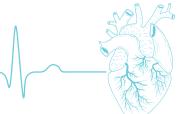
Açıklamalar: USG; Ultrasonografi, MRG; Manyetik rezonans görüntüleme, PET; Pozitron emisyon tomografisi, ABI; Ankle – Brachial indeks. (Imaging Subclinical Atherosclerosis. Current Cardiology Reviews, 2017, Vol. 13, No. 1, P. 48)

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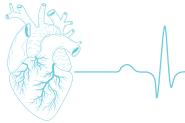


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