

Bölüm 22

KOMPLEKS BÖLGESEL AĞRI SENDROMUNUN YÖNETİMİNDE GİRİŞİMSSEL TEDAVİLER

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Kompleks bölgesel ağrı sendromu (KBAS) 1994 yılında, International Association Study for Pain (IASP) tarafınca ilk kez klinik bir tanı olarak kabul edilmiştir. KBAS tanısında 4 koşul gerekmektedir. Bunlar; başlatıcı bir olay veya immobilizasyon; tetikleyici olayın şiddetiyle orantısız ağrı, allodini veya hiperaljezi; ağrılı bölgede ödem, deri kan akışında değişiklikler veya anormal sudomotor bulgular ve mevcut klinik durumdan sorumlu olabilecek diğer tanıların dışlanmış olmasıdır. IASP daha sonra KBAS'ı Tip 1 (majör sinir hasarı olmadan) ve Tip 2 (majör sinir hasarı) olarak alt gruplara ayırmıştır.⁽¹⁾ IASP 2007 yılında KBAS tanı kriterlerini Budapeşte kriterleri adı altında revize etmiştir.⁽²⁾ Budapeşte kriterleri tablo 1'de gösterilmiştir. KBAS, diffüz yanıcı ağrı, allodini ve otonomik disfonksiyonla karakterizedir. 6 ay sürebilen 1. evrede ciddi yanıcı tarzda ağrı, ısı artışı ve ödem, 2 yıl sürebilen 2. evrede ise soğuk ve parlak cilt, kahverengi ödem bulguları izlenmektedir. Subkutanöz atrofi, kas atrofisi, tendon ve eklem kontraktürleri gözlenen hastaların 3. evrede olduğu kabul edilmektedir.⁽³⁾

Tablo 1: Budepeşte kriterleri

Kriter 1	Başlatan herhangi bir olayla orantısız olan, devam eden ağrı
Kriter 2	Aşağıdaki 4 grup semptomun ≥ 3 grubundan ≥ 1 tane semptom varlığı Duyu: Hiperestezi ve/veya allodini Vazomotor: Sıcaklık asimetrisi ve/veya deri renk değişikliği ve/ veya deri renk asimetrisi Sudomotor/ödem: Ödem ve/veya terleme değişiklikleri ve/veya terleme asimetrisi Motor/trofik: Azalmış eklem hareket açıklığı ve/veya motor disfonksiyon (güçsüzlük, tremor, distoni) ve/veya cilt ve cilt eklerinde trofik değişiklikler
Kriter 3	Aşağıdaki kategorilerden 2 veya daha fazlasından ≥ 1 tane bulgunun değerlendirme anında varlığı Duyu: (Pinprick ile) hiperaljezi ve/veya (yüzeysel dokunma ve/veya derin somatik basınç ve/veya eklem hareketi ile ortaya çıkan) allodini Vazomotor: >1 derece sıcaklık asimetrisi ve/veya deri renk değişikliği ve/veya asimetri Sudomotor/ödem: Ödem ve/veya terleme değişiklikleri ve/veya terleme asimetrisi Motor/trofik: Azalmış eklem hareket açıklığı ve/veya motor disfonksiyon (kas gücü kaybı, tremor, distoni) ve/veya cilt ve eklerinde trofik değişiklikler
Kriter 4	Semptom ve muayene bulgularını açıklayacak daha iyi bir tanının olmaması

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