

BÖLÜM

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KEMİK İNFARKTLARI VE EPİFİZYEL İŞKEMİK NEKROZLAR

Ali DABLAN¹

Vaka 1: Legg-Calve-Perthes

Vaka 2: Osgood Schlatter

Vaka 3: Kienböck hastalığı

Vaka 4: Sever hastalığı (kalkaneal apofizit)

Vaka 5: Freiberg hastalığı

Vaka 6: Scheuermann hastalığı

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Tuzaklar

Scheuermann hastalığının, özellikle hiperekstansiyon ve supin pozisyonu ile düzelen ve progresif olmayan Postural kifoz ile ayırcı tanısının yapılması önemlidir. Postural kifozda Scheuermann hastalığından farklı olarak vertebra korpuslarında kamalaşma ve uç-plak düzeyinde düzensizlik görülmemesi ayırcı tanı açısından önemlidir (29).

Tedavi ve yaklaşım

Tedavi kifoz derecesine göre farklılık göstermektedir. Tedavide genel yaklaşım:

<50° : Konservatif yöntemler ve postur değişiklikleri,

50-75° : Korse kullanımı,

>75° : Cerrahi tedavidir (30).

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