

SERVİKAL TRAVMALAR

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GİRİŞ

Servikal travmalar, hastanelerin acil servis hizmetlerinde sık karşılaşılan nöroşirüjik acillerden birisidir. Günümüzde en sık sebebi trafik kazalarıdır (1). Diğer sebepleri arasında yüksektenden düşme, spor yaralanmaları ve dalmalar bulunmaktadır (2). Servikal travmaların mortalite ve morbidite oranları yüksek olmakla birlikte gelişen teknoloji ve tiptaki tedavi teknikleri sayesinde günümüzde mortalitede önemli ölçüde azalma gözlenmiştir fakat morbidite oranları halen toplumda iş gücü kaybı ve ekonomik yük oluşmasına devam etmektedir.

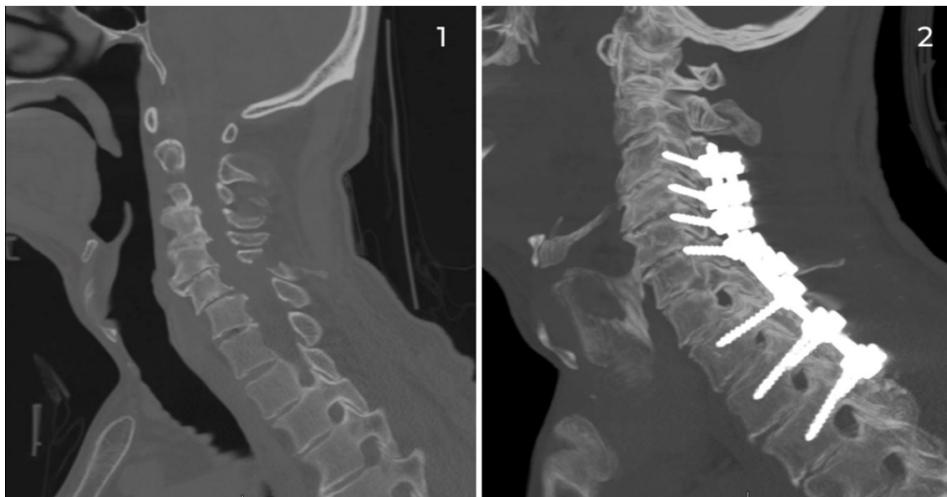
SINIFLAMA

Anatomik varyasyonlar ve kemik – bağ doku yapılarının çeşitliliği sebebiyle trauma açısından servikal omurga, üst (oksiput-C2) ve alt (C3–C7) olmak üzere iki farklı başlık altında sınıflandırılmıştır (Tablo 1’de).

TANI

Sebeplerinden ötürü servikal travmaya sahip hastalarda başta kafa travmaları olmak üzere vücudun başka bölgelerinde de travma bulgularına sıkılıkla rastlanmaktadır ve multiple vücut travmasına sahip hastalarda servikal omurga yaralanmalarının değerlendirilmesi klinik açıdan zorluk ortaya çıkartabilmektedir (3). Uyanık, asemptomatik hastalarda servikal omurga yaralanmaları genellikle fizik ve nörolojik muayene ile ekarte edilebilir. Belirgin boyun semptom ve bulgula-

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Şekil 9: Travmatik C6-7 dislokasyonu (1) olan ankilozan spondilit'li hastaya uygulanan posterior uzun segmenter enstrumantasyon cerrahisinin (2) BT görüntüleri

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