

BÖLÜM 25

YOĞUN BAKIMDA COVID-19 HASTA YÖNETİMİNDE ULTRASONOGRAFİNİN YERİ



Gülbahar ÇALIŞKAN¹

1. GİRİŞ

Tanısal ve terapötik ultrasonografi (USG), kısmen daha ucuz ve daha taşınabilir ultrason makinelerinin geliştirilmesi ile son zamanlarda yoğun bakımlarda (YB) daha fazla ilgi gören bir görüntüleme yöntemi olmuştur. (1) Son on yılda yatakbaşı ultrasonografi (Point of care ultrasound POCUS) YB’da santral kateterizasyonlardan hastanın kardiyak performansının değerlendirilmesi, global sıvı dengesinin takibi ve pnömotoraks, plevral efüzyon, atelektazi gibi birçok pulmoner patolojinin tanı ve takibinde etkin bir şekilde kullanılmaya başlanmıştır (1,2). Kritik hasta yönetiminde klinik soruları yanıtlamak için yatak başında hızlı değerlendirmeye olanak sağlaması, tekrarlanabilir olması, radyasyon içermemesi ve non-invaziv bir yöntem olması belirgin avantajları iken klinisyenin deneyim ve eğitim düzeyi ile doğrudan ilgisi olması dezavantajıdır (3). Kanıta dayalı bir yaklaşım sağlanması açısından, Avrupa Yoğun Bakım Derneği 2015 yılında yoğun bakımlarda USG kullanımı ile ilgili kapsamlı bir klavuz yayınlamıştır (4).

Yoğun bakımda yatak başı USG’nin kullanılabilceği durumlar: (4-7)

- Plevral efüzyonu teşhis ve lokalize etmek, fizik muayene ve konvansiyonel göğüs radyografisini tamamlamak.
- Özellikle küçük veya loküle efüzyonların drenajına (iğne kılavuzluğu dahil) yardımcı olmak.
- Klinik durum ve hızlı tanı koyma ihtiyacına bağlı olarak, pnömotoraks tanısı koymada geleneksel göğüs radyografisini tamamlamak veya göğüs grafisinin yerine kullanmak.
- Solunum yetmezliği durumlarında birincil tanının koyulması.

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COVID-19 olduğu doğrulanmış hastalarda kullanılmak üzere tahsis edilmeli ve COVID-19 şüphesi olan hastalarla paylaşılmamalıdır (62).

Öneriler:

- Kişisel koruyucu ekipman ve çift eldiven giyilmesi.
- Tercihen klinik muayene ile birlikte, sadece gerektiğinde ultrason yapılması.
- Mobil USG cihazları için tüm cihazın, portable USG cihazı için probun kaplanması ve transparan örtü kullanılması.
- Küçük tek kullanımlık jel kullanılması.
- Mümkünse hastanın yüzünün tersi yönünde durulması.

4. SONUÇ

COVID-19 salgını sırasında AUS büyük ilgi görmektedir. AUS, interstisyel pnömoninin erken belirtilerinin belirlenmesini sağlar. Farklı işaretlerin kombinasyonuna sahip paternler, hastalığın şiddetinin tespit edilmesine ve ayırıcı tanılara yönelmesine izin verir. Ventilasyon uygulanan hastalarda, akciğer ile potansiyel kardiyak ve vasküler anormallikler arasındaki ilişkinin daha kapsamlı bir şekilde anlaşılması için sonografik olarak akciğer, kalp ve vasküler değerlendirme her zaman birlikte yapılmalıdır.

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