BÖLÜM 34

Bariatrik Cerrahi

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GİRİŞ

Obezite çok ciddi sağlık sorunlarına yol açmaktadır. Tüm dünyada sıklığı giderek artmaktadır. 2013 yılında Amerikan Tıp Derneği (AMA) obeziteyi kronik bir hastalık olarak sınıflandırmıştır. Dünya Sağlık Örgütü (WHO) aşırı kilo ve obeziteyi, aşırı yağ birikimi sonucu oluşan bir sağlık sorunu olarak tanımlamaktadır. Vücut kitle indeksi (VKI) kişinin ağırlığının boyunun karesine bölünmesiyle elde edilir. VKI 25 in üzerindeki kişiler fazla kilolu, 30 un üstündeki kişiler obez, 40 ın üzerindeki kişiler de morbid obez olarak kabul edilir. Uyku apnesi, obezite ve diyabet ile güçlü bir şekilde ilişkilidir. Uyku apnesi pulmoner hipertansiyona ve sağ kalp hipertrofisine yol açabilir. Karın basıncının artması nedeniyle, obez hastalarda rezidüel hacim artar akciğer kompliyansı azalır. Obstrüktif uyku apnesi ve obezite hipoventilasyonu sendromu önemli morbiditeye neden olur ve ayrıca hem tıbbi açıdan hem de hastaneye yatış ve bakım giderleri açısından sağlık sistemine yüksek maliyetler oluşturur. Morbid obez kişiler diyabet, hipertansiyon, gastroözefagial reflü, uyku apnesi, kanser gibi hastalıklar açısından en yüksek risk gurubudur. Cerrahi prosedürler 1991 yılından beri morbid obez hastalar için tedavinin standart bir parçası olmuştur. Obezite prevelansının yıllar içerinde ciddi şekilde artması ve cerrahideki gelişmeler obezitede cerrahi tedavinin payını artırmıştır. Bariatrik cerrahi morbid obezite de kanıtlanmış etkili bir tedavi yöntemidir. Geleneksel kilo verme yöntemlerinden (diyet ve egzersiz) kısa ve uzun vadede daha iyi kilo kaybı sağlar. Bariatrik cerrahinin birinci amacı vücut ağırlığını azaltmaktır. Bariatrik cerrahi ile kişi tek bir ameliyatla obstruktif

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