



KRONİK PANKREATİTİN KOMPLİKASYONLARI

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Kronik pankreatit, pankreasta kalıcı yapısal değişikliklerle sonuçlanan, endokrin ve ekzokrin fonksiyonların bozulmasına yol açan inflamatuvar bir süreçtir. Bu süreçte pankreas kanal bütünlüğünde gelişen bozukluklar, safra kanalı ve duodenumda obstrüksiyonlar, vasküler bozukluklar, pankreas yetmezliği, pankreas maligniteleri ve pankreatik fistüller gibi komplikasyonlar gelişmektedir (1).

PANKREAS KANAL BÜTÜNLÜĞÜNDE GELİŞEN BOZUKLUKLAR

Psödokist

Psödokist; akut pankreatitte veya kronik pankreatit sürecinde pankreas kanal yapısının bozulması sonucu gelişen, içerisinde yüksek miktarda pankreatik sıvı ile dolu (pankreas nekrozu içermez) olan, iyi tanımlanmış bir duvar (gerçek epitel dokusu içermeyen) ile çevrili koleksiyon kaviterleridir. Genelde alkolik pankreatite sekunder gelişen kronik pankreatitlerde görülür. Kronik pankreatitli hastaların yaklaşık %25'inde bu tablo görülür (2-5). Psödokistlerin çoğu asemptomatiktir. Bununla birlikte, sıvının konumuna ve kapsamına bağlı olarak çeşitli klinik tablolar

gösterebilir. Semptomu genellikle karın ağrısıdır. Ancak bulantı kusma, kilo kaybı, sarılık, mide çıkışına basıya bağlı erken tokluk, kitle etkisine bağlı safra veya duodenum obstrüksiyonu, damar basısına bağlı klinik tablolar gibi semptomlar görülebilir. Yüksek amilaz lipaz değerleri hastaların yarısında mevcut olup, psödokist gelişimi için bir belirti olabilir.

Pankreas psödokist tanısı genellikle kronik pankreatit öyküsü olan veya akut pankreatitten iyileşen bir hastada yapılan görüntülemelerde intra veya peripankreatik olarak kapsüllenmiş sıvı kolleksiyonun görülmesi ile konur. Ultrasonografi (USG) ile psödokistler görülebilir. Ancak Bilgisayarlı tomografi (BT) ve Manyetik rezonans görüntüleme (MRG); kist duvar maturitesi, mide ve duodenum ile ilişkisinin daha iyi değerlendirilmesini sağlayarak tanının doğrulanması ve tedavi şekline karar verilmesine daha çok yardımcı olacaktır. Klinik olarak net olmayan veya görüntüleme bulguları atipik olan tanısı belirsiz hastalarda sıvı örneği ve kist duvarı örnekleme için tanısal Endoskopik ultrasonografi (EUS) de tanıya yardımcı olacaktır (6).

Pankreas psödokistinin ayırıcı tanısında pankreas kistik neoplazmları, katı bir pankreas tümörünün kistik dejenerasyonu, gerçek kistler

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