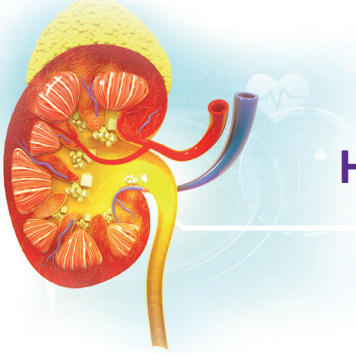


BÖLÜM 4



ÜRİNER SİSTEM TAŞ HASTALIĞINDA GÖRÜNTÜLEME YÖNTEMLERİ

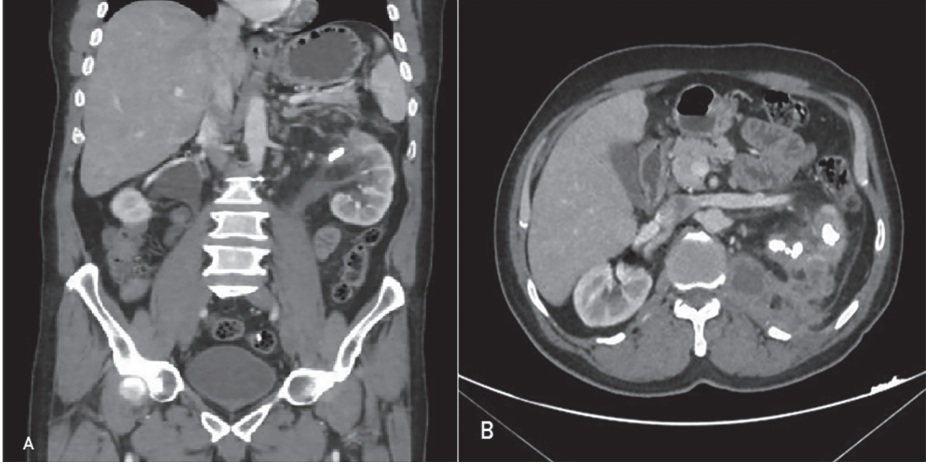
Esin ÖLÇÜCÜOĞLU¹

GİRİŞ

Ürolitiazis, üriner sistemde herhangi bir yerde taş varlığı anlamına gelir. Ürolitiazis, yoğunlaşmış idrar içerisinde atılan tuzlar ve minerallerin böbrek tübüllerinde kristaller halinde çökeltiler oluşturması ve zamanla bu kristallerin birleşip böbrek taşı haline gelmesi durumudur. Erkeklerde kadınlara göre daha sık görülür. Böbrek taşı prevalansının Amerika Birleşik Devletleri'nde %2-8, Avrupa'da %1-5, ülkemizde ise %14,8 olduğu bildirilmiştir. Gut, renal tübüler asidoz (RTA), hiperkalsemi gibi metabolik bozuklukların; obezite, hipertansiyon ve Tip II diyabet gibi kronik hastalıkların böbrek taşı oluşumunda etkili olduğu bilinmekle birlikte diyet ve yaşam şekli de çok önemlidir (1).

Görüntüleme; böbrek taşı hastalarının yönetiminde ilk tanı anında, tedavi planlamasında, medikal tedavi veya ürolojik müdahale sonrası takipte önemli bir role sahiptir. Taşı saptamak için çeşitli görüntüleme yöntemleri kullanılmaktadır. Son zamanlarda gelişen teknoloji ile birlikte sadece taşı tespit etmekle kalmayıp aynı zamanda taş bileşimlerini karakterize etmemize yardımcı olmaktadır.

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Şekil 7. Sol böbrekte (A) BT’de koronal kesitte üst kaliksi tıkayan taşı, (B) aksiyel kesitte üst toplayıcı sistem içerisindeki diğer taşları, renal parankimdeki, perirenal yağ dokudaki ve psoas kasındaki abse formasyonlarını incelemektedir (Ankara Şehir Hastanesi Radyoloji Kliniği Arşivi, 2022).

SONUÇ

Radyolojik görüntüleme yöntemleri, taş hastalığı tedavisinde önemli bir rol oynamaktadır. Özellikle MDCT’deki yeni teknolojik gelişmeler ile birlikte sadece taşı doğru tespit etmekte değil ürologlara tedavi planlaması için hasta seçiminde ve çeşitli ürolojik müdahalelere yanıtın izlenmesinde kolaylıklar sunulmaktadır.

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