

Bölüm 2

AKUT APANDİSİT YÖNETİMİ

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GİRİŞ

Appendiks, işlevi ve normal fizyolojisi belirsizliğini koruyan, çekumun ucunda ve genellikle karın sağ alt kadranda yer alan içi boş rudimenter bir organdır. Vermiform apendiksin inflamasyonu olarak tanımlanan apandisit Dünya'daki en yaygın cerrahi acil durumlardan bir tanesidir. Yaşam boyu görülme riskinin %7-8 arasında olduğu bildirilmektedir. Tabi buna bağlı olarak apendektomi dünya genelinde en sık uygulanan cerrahi işlemlerden birisi olmakta ve modern sağlık sistemlerinde önemli bir yüke neden olmaktadır. Yaşam boyu yaklaşık % 8 riskle en sık görülen cerrahi karın acillerinden birisi olmasına rağmen apandisit patogenezi hala tam olarak anlaşılabilmiş değildir. Apendiksin enflamasyonuna neden olan mekanik, enfeksiyöz ve genetik durumlar gibi birçok faktöre bağlı olduğu düşünülmektedir (1). 1735 yılında Claudius Amyand tarafından belgelenen ilk apendektomiden bu yana apendiks ve cerrahi patolojinin yönetiminde birçok değişiklik olmuştur. Fransız hekim Mestier akut apandisite yönelik ilk apendektomiye 1759'da gerçekleştirmiştir. Akut apandisit tarihi tartışılırken Charles McBurney ve Reginald Fitz'in eserlerine sık sık atıfta bulunulmuştur. Yüzyıldan daha uzun bir süredir açık apendektominin apandisit için tek standart tedavi olduğu söylenmektedir. Ancak son dönemlerde yayınlanan çalışmalarda komplike olmayan apandisitlerin (bazı komplike apandisit vakaları da dahil) opere edilmeden sadece antibiyotiklerle tedavi edilmesinin mümkün olduğu gösterilmiştir (2-4). Bu yazıda akut apandisit genel yönetim prensipleri anlatılmaya çalışmıştır.

EPİDEMİYOLOJİ

İnsidansı yaklaşık 100-233/100.000 kişi olarak bildirilmektedir. En yüksek insidans genellikle yaşamın ikinci veya üçüncü on yılında ortaya çıkar ve ortalama görülme yaşı 28 civarındadır. Ekstrem yaşlarda daha nadir olarak görülür. Herhangi bir fark olmadığını bildiren çalışmalar olsa da erkeklerde kadınlara kıyasla akut apandisit gelişme eğilimi biraz daha yüksektir. Coğrafi bölgeler veya geliş-

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yönetim komplike olmamış apandisit vakalarında kesinlikle önemli ve etkin bir tedavi yöntemidir. Bu durum apendektominin apandisit tedavisinde gold standart tedavi yöntemi olduğu gerçeğini değiştirmemektedir.

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