

Bölüm 14

ABDOMİNAL SARKOM CERRAHİSİNDE ANESTEZİ

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GİRİŞ

İntraabdominal veya retroperitoneal sarkomlar az görülen tümör tiplerinden olmakla birlikte agresif seyreden total cerrahi çıkarımla olumsuz prognoz düzeltilebilen tümör gruplarıdır.^(1,2,3,4)

Cerrahi sırasında genel anestezi protokolüne ek olarak perioperatif ve postoperatif gözlem ve takipte dikkat edilmesi gereken durumlar sözkonusudur.

Preoperatif Hazırlık:

Preoperatif hazırlık hastanın ihtiyaçlarına, eşlik eden hastalıklara ve organ ve sistemlerin kapasiteleri değerlendirilerek yapılmalıdır. Genel değerlendirme ile hastanın mevcut risk grubu belirlenir. Karaciğer hasarı, kalp yetmezliği, bozulmuş gaz değişimi, kanama ve böbrek yetmezliği de dâhil olmak üzere, çoklu organ disfonksiyonu riski önemli ölçüde artmaktadır. Bu nedenle ameliyat öncesi hazırlıkta Solunum Fonksiyon Testleri, Ekokardiyogram ve Arteriyel Kan Gazı ölçümü yapılmalıdır. Hastaların anestezi açısından risk gruplarının belirlenmesinde kullanılan ASA sınıflandırması hastanın anestezi riskinin anestezi uzmanı tarafından öngörülebilir olmasını sağlamaktadır (Tablo 1). Retroperitoneal veya intraabdominal girişimlerin genel olarak orta riskli bazen de yüksek riskli cerrahi girişimler olduğu unutulmamalıdır. (Tablo 2)

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