

Ateşli Silah Yaralanması Sonrası T4 Korpus Fraktürü ve Konservatif Yaklaşım

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GİRİŞ

Travmatik spinal kord yaralanmaları 15-40 yaş arası erkeklerde daha sık görülmektedir. Gençlerde motorlu taşıt kazaları daha sık iken; yaşlılarda düşme daha sık görülür(1). Nadir de olsa ateşli silah yaralanmalarına bağlı da ortaya çıkabilemektedir. Genetik olarak omurilik darlığı olan veya servikal spondilozu olan kişilerde risk daha yüksektir. İlk darbe sonrası ikincil hareketler, hipoksiyi ve iskemiyi artırabilmektedir(2-5).

OLGU SUNUMU

18 yaşında erkek hasta ateşli silah yaralanması nedeniyle 112 ambulansı tarafından acil servise getirildi. Genel durumu iyi, koopere, oryante, glaskow coma skalası (GKS) 15 olan hastanın fizik muayenesinde sol skapulamedialinde, T4 vertebra seviyesinde 2*1 cm derin abrazyon olduğu gözlandı. Saçma izi yoktu. Hastanın vital bulguları analizi; Tansiyon arteriyel: 120/73 mmHg, nabız: 93/dk, SaO₂: 99%, ateş: 36,70, solunum sayısı: 20/dk olarak tespit edildi. Elektrokardiografide (EKG) 1:1 AV ileteli sinüs ritmi mevcut idi. Nörolojik muayenesinde alt ve üst ekstremiteler aktif hareketli olup motor ve/veya duyu kaybı tespit edilemedi. Akciğer muayenesinde her iki akciğer solunuma eşit katılıyordu, ek ses sap-

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SONUÇ

Motor fonksiyonda erken geri dönüşler iyi prognozla birliktedir. Hastalara fazla umut verici bilgi vermekten veya hastaların rehabilitasyona cevabını azaltacak düzeyde olumsuz bilgi vermekten kaçınılmalıdır. Kök hücre nakli, elektriksel uyarılar gibi yöntemler çalışma aşamasındadır(46,47).

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