Bölüm 6

VENÖZ YETMEZLİK VE ENDOVASKÜLER TEDAVİ YAKLAŞIMLARI

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GİRİŞ

Alt ekstremite venöz sistemi başlıca derin ve yüzeyel venöz sistem olarak iki ana yapıdan oluşur. Alt ekstremiteye gelen kanın büyük kısmı ekstremiteyi kas kasılması sayesinde derin venöz sistem aracılığı ile terk eder. Buna sistemik çalışma şekline kalf pompası adı verilir. Derin venöz sistem pek çok yolla superfisiyal sisteme bağlıdır. Bu şekilde herhangi bir yolakta engelle karşılaşan kanın kalbe dönüşü için pek çok alternatif yol sağlanmış olur.(1,2)

Venöz valfler venöz dolaşımdaki en önemli unsurlardır. Bir venöz valfin görevi reflüyü engellemektir. Valfler bikuspid yapıdadır. Alt ekstremite venöz akımı ayak ekstansör yüzü hariç yüzeyel venlerden derin venleredir. Fakat ayak ekstansör yüzde akım derin venlerden yüzeyel venlere doğrudur. Valfler derin, distal ve alt ekstremitedeki venlerde yüzeyel, proksimal ve üst ekstremite venlerine göre daha fazladır.(3) Kapakçıklar genellikle common femoral vende 1 adet, superfisial femoral vende ortalama 4 bulunurken, popliteal vende genelde 1adet, büyük safen vende 9-26 adet arası ve küçük safen vende 4-13 adet arası bulunur. Derin femoral vende ise genellikle yoktuqr.(3)

ALT EKSTREMİTE VENÖZ SİSTEM ANATOMİSİ

1. Yüzeyel venöz sistem
   a. Büyük safen ven
   b. Küçük safen ven
2. Derin venöz sistem
3. Perforan venöz sistem

Büyük safen ven (Vena Safena Magna): Genellikle müsküler fasyanın üstünde, hiperekoik görünümdeki safenoz fasyanın altındaki bu iki katman arasında seyreder. Ultrasonda (USG) transvers kesitte etrafında fasya ile birlikte safen ven,

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SONUÇ

Endovasküler tedaviler tüm tıbbi müdahale alanlarında giderek daha çok yaygınlaşmaktadır. Daha küçük insizyonlarla daha az travmatik, daha kozmetik ve daha başarılı sonuçlar amaçlanmaktadır. Bu çerçevede EVLA, RFA ve NBCA alt ekstremite yüzeyel venöz yetmezliği tedavisinde etkili bir yöntem olarak kullanılmaktadır. Konvansiyonel cerrahiye karşı EVLA, RFA ve NBCA yöntemleri başarılarını kanıtlamışlardır.

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