

# BÖLÜM 7

## AKROMİYOKLAVİKÜLER EKLEM YARALANMALARI

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### GİRİŞ

Akromiyoklaviküler (AC) eklem yaralanmaları, sıklıkla spor esnasında direk omuza alınan darbe ile yaygın olarak görülür(1, 2). Genellikle genç erkeklerde, tipik olarak, kol abduksiyonda iken omzun üst kısmına doğrudan düşme nedeniyle meydana gelir(3). Travma esnasında, klavikulanın altında bulunan birinci kaburga, köprücük kemiğinin aşağı doğru yer değiştirmesini engeller ve sonuç olarak klavikula kırılmamışsa, genellikle akromiyoklaviküler ve korakoklaviküler bağlar yırtılır. Yırtık derecesi ve hastanın kişisel bazı özelliklerine göre farklı tedavi yöntemleri uygulanmaktadır.

### Akromiyoklaviküler Eklem Anatomisi

Akromiyoklaviküler eklem, klavikulanın distal, düzleştirilmiş ucunu ve skapulanın akromion çıkıntısının medial kısmını içeren küçük bir yüzeye sahip diartrodial eklemdir(4). Yaklaşık olarak superior-inferior yönde 9 mm uzunluğunda, anterior-posterior yönde ise 19 mm derinliğindedir(3). Akromionun anterioru korakoakromial bağların yapıştığı kabarık yüzeye sahiptir. Klavikulanın posterolateral yönelimli medial faseti ile akromionun anteromedial eklem yüzü eklemleşir(5). Klavikulanın distal ucu alt yüzeyinde konoid ve trapezoid tüberküller bulunan düz bir yapıdır. Konoid tüberkül orta ve distal 1/3 klavikulanın birleşim yerinin arka kısmındadır. Trapezoid çıkıntı klavikula lateral 1/3 kısım alt yüzeyinde anterior ve laterale uzanır. Bu çıkıntılar aynı isimdeki bağların yapışma yerleridir(6). Deltoid kas klavikula 1/3 lateralinin anterior yüzeyine, trapezius kası ise posterioruna yapışır. Pectoralis majör ise 2/3 anterior yüzeyine yapışır (6).

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## KAYNAKLAR

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