

## 2.3.d. Aort

### 2.3.d.3. Desenden Aorta Endovasküler Tedavi Stratejileri

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#### Giriş

Kalbin sol ventrikülünden başlayıp iliak arterlere kadar uzanan aorta vücudun en büyük damarıdır (1). Aorta anatomik olarak; Asendan , Arcus , Desenden ve Abdominal olarak 4 kısımda değerlendirilir. Desenden aorta; sol subclavian arterin distali ve abdominal aortanın başladığı diafragma arasındaki bölümdür (2). Desenden aorta interkostal arterlerin dallanmalarını ve özellikle spinal kordun beslenmesinden sorumlu olan Adam Kiewich arterinin dallanmasının içerir. (3)

Desenden aorta patolojilerinde tedavi stratejisi belirlemenin önemi abdominal aorta ya da asendan aorta patolojilerinden farklı olarak cerrahi ulaşımın daha zor ve cerrahinin ciddi serebrovasküler komplikasyon risklerine sahip olmasıdır(4). Bu çalışmada desenden aortanın en sık görülen 3 patolojisi ve endovasküler tedavi stratejileri tartışılacaktır.

#### Desenden Aorta Hastalıkları ve Fizyopatolojileri

**Aort Koarktasyonu:** Aort koarktasyonu; aortun kısmen ya da tam olarak daraldığı ve buna bağlı olarak kan akışının azaldığı klinik tablo olarak adlandırılır. Aort koarktasyonu, 10.000 canlı doğumda yaklaşık 3 vaka ile diğer konje-

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pılan hatalardan kaynaklanabileceği düşünülmektedir. Tedavi çok sorunludur ve tedavisiz sonuç her zaman ölümcüldür. Stent greft seçiminde uygun boyutun seçilememesine bağlı bir diğer komplikasyon migrasyon olabilir (27).

Tüm bu komplikasyonların oluşumunu azaltmanın en etkili yolu uygulayıcının klinik deneyiminin yanında doğru hasta doğru stent doğru zaman stratejisinin belirlenmesi gereklidir.

## Sonuç

Sonuç olarak, TEVAR, desenden torasik aort rahatsızlıkları olan hastalarda tercih edilen müdahale seçeneğidir. Yeterli sızdırmazlık bölgeleri, güvenli ameliyat öncesi planlama ve uygun cihaz boyutlandırma, iyi sonuçlar elde etmek ve komplikasyonları azaltmak için önemlidir.

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