

## 2.3.h. Renal Arter

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Renovasküler hastalıklar(RVH) damar cerrahisinde 1954'den beri üzerine arařtırmalar yapılan bir alan olarak yer almaktadır(1) . Uzun yıllardır medikal ve cerrahi tedavi üzerine arařtırmalar yapılırsa da kesin bir fikir birlięi sağlanamamıştır. RVH tedavisinde endovasküler tedavinin yeri tartışmalı olsa da yüksek mortalite ve morbidite riski olan seçilmiş hastalarda iyi bir alternatif olarak yerini korumaktadır (2) .

RVH'in bir çok sebebi olsa da en sık semptom oluşturan sebep aterosklerotik renal arter darlığıdır. Genel nüfusta görülme oranı %5 oranında olsa da 75 yaş üstü yaşlı nüfusta bu oran %40'lara kadar yükselmektedir (3).

### Tanım

Renal arterde anjiyografik yöntemlerle %60 ve daha fazla darlık olması RVH olarak tanımlanmaktadır. Ayrıca darlık %60'dan az olsa dahi 15mmHg ve daha fazla gradient olması da RVH olarak tanımlanır (4)

### Klinik

30 yaşından önce gelişen hipertansiyon, hipertansiyon ile birlikte abdominal murmur duyulması, dirençli hipertansiyon, hipertansif kriz geçirilmesi, renin-angiotensin-aldosteron blokörleri sonrasında böbrek fonksiyonların bo-

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durumdur ve endovasküler embolizasyon, koil yardımı ile veya açık cerrahi tedavi ile acil olarak tedavi edilmelidir. Prosedüre bağlı renal arter trombozunun tromboliz yoluyla başarılı şekilde açıklık sağlanabilir (26).

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