

# BÖLÜM 11

## Hemoroidal Hastalığın Cerrahi Tedavisinde Postoperatif Komplikasyonlar

Gökhan YILMAZ<sup>1</sup>

### GİRİŞ

Hemoroid tedavisi için son yıllarda cerrahi tedavinin yanı sıra poliklinik şartlarında ya da endoskopi ünitelerinde gerçekleştirilebilecek bir dizi yeni tedavi yöntemi geliştirilmiştir. En sık uygulanan iki yöntem olan Açık Hemoroidektomi (Milligan Morgan) (AH) ve Kapalı Hemoroidektomi (Fergusson) (KH) yanı sıra çeşitli enerji cihazlarının, ultrasonik diseksiyon aletlerinin kullanılması, Stapler Hemoroidopeksi (SH), Transanal Hemoroidal Dearterializasyon (THD) ve Doppler Ultrason Eşliğinde Hemoroidal Arter Ligasyonu, (DEHAL), Laser Hemoroidoplasti (LHP) gibi daha az invazif yöntemlerin geliştirilmesi, hemoroid tedavisinin komplikasyon sıklıklarını azaltmaktadır. Lastik Bant Ligasyonu (LBL), Skleroterapi uygulamaları, İnfra kırmızı ışık Kolagülasyon (İRK) gibi ayaktan tedaviyi mümkün kıلان yöntemlerin kullanılmasındaki amaç, hastaların daha erken işgücü kazanabilmelerinin yanı sıra komplikasyon oranlarının azaltılmasıdır. Bu nedenle bu bölümde hemoroidin cerrahi tedavisinin komplikasyonlarından bahsederken aynı zamanda farklı tedavi prosedürlerinin bu anlamda karşılaştırması da yapılacaktır. Farklı prosedürlere göre tüm komplikasyonlar baz alındığında %02 ile %68 oranında bir komplikasyon gelişme olasılığı olmakla birlikte tüm prose-

<sup>1</sup> Dr. Öğr. Üyesi, Medipol Üniversitesi, Genel Cerrahi Kliniği, drgokhanylmz@gmail.com

tomi sonrası hastalar asemptomatik olsalar bile %15’inde ultrasonografik olarak internal anal sfinkterde yaralanma odakları tespit edilmiştir.

## KAYNAKLAR

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